

BID PROPOSAL FORM BID NO. 2020-009

**BID TO: CITY COMMISSION
CITY OF MARGATE**

1. The undersigned bidder proposes and agrees, if this bid is accepted, to enter into an Agreement with the City in the form included in the Contract Documents to perform the Work as specified or indicated in said Contract Documents entitled:

BID NO. 2020-009 BLUEWAY TRAIL IMPROVEMENTS

2. Bidder accepts all of the terms and conditions of the Contract Documents, including without limitation those in the "Notice Inviting Bids", and "Instructions to Bidders", dealing with the disposition of the bid security.
3. The bid will remain open for the period stated in the "Notice Inviting Bids", unless otherwise required by law. Bidder will enter into an Agreement within the time and in the manner required in the "Notice Inviting Bids" and the "Instructions to Bidders", and will furnish the insurance certificates, Payment Bond and Performance Bond required by the Contract Documents.
4. It is the Contractor's responsibility to contact the City @ (954) 935-5346 prior to the bid opening to determine if any addenda have been issued on the project. Bidder has examined copies of all the Contract Documents including the following addenda (receipt of all of which is acknowledged):

Number	<u>1</u>	Date	<u>4/30/20</u>
	<u>2</u>		<u>5/13/20</u>

5. Bidder has familiarized itself with the nature and extent of the Contract Documents, Work, site, locality where the Work is to be performed, the legal requirements (federal, state and local laws, ordinances, rules and regulations), and the conditions affecting cost, progress or performance of the Work and has made such independent investigations as bidder deems necessary.
6. This bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm, or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization, or corporation. Bidder has not directly or indirectly induced or solicited any other bidder to submit a false or sham bid. Bidder has not solicited or induced any person, firm or corporation to refrain from bidding and Bidder has not sought by collusion to obtain for itself any advantage over any other bidder or over the City.

To all the foregoing, and including all Bid Schedule(s) and information required of bidder contained in this Bid Form, said Bidder further agrees to complete the Work required under the Contract Documents within the Contract Time stipulated in said Contract Documents, and to accept in full payment thereof the Contract Price based on the total bid price(s) named in the aforementioned Bidding Schedule(s).


BID PROPOSAL FORM BID NO. 2020-009

NAME OF FIRM Lambert Bros., Inc.

ADDRESS: 5501 Powerline Road, Fort Lauderdale, FL 33309

NAME OF SIGNER Gregg Lambert
(Print or Type)

TITLE OF SIGNER President

SIGNATURE:  DATE: 5/20/20

TELEPHONE NO: 9544919380 FAX NO: 9544919425

E-MAIL: GL@LambertBros.net

SCHEDULE OF BID PRICES – BID NO. 2020-009

TO: CITY COMMISSION

CITY OF MARGATE

(Please fill in all blanks and return with your proposal.)

In accordance with your request for proposals and the specifications contained herein, the undersigned proposes the following:

BIDDER AGREES TO PERFORM ALL THE WORK DESCRIBED IN THE CONTRACT DOCUMENTS FOR THE FOLLOWING UNIT PRICES OR LUMP SUMS. BIDS SHALL INCLUDE SALES TAX AND ALL OTHER APPLICABLE TAXES AND BIDDER UNDERSTANDS THAT THE EXTENDED TOTAL FOR EACH AND EVERY ITEM IS THE RESULT OF MULTIPLYING THE QUANTITY TIMES THE UNIT COST STATED IN FIGURES. ANY DISCREPANCY BETWEEN THE UNIT AND TOTAL, THE UNIT PREVAILS.

The contractor must comply with 2CFR 200.318 (J) (2), regarding time and materials contracts. Specifically, "non-Federal entity may use a time and materials type contract only after a determination that no other contract is suitable and if the contract includes a ceiling price that the contractor exceeds at its own risk".

ITEM NO.	LEMON TREE PARK ITEM DESCRIPTION	ESTIMATED QUANTITY	UOM	UNIT COST	TOTAL
	Summary of Floating Dock Quantities				
101-1	Mobilization	1.00	LS	\$16.100. ⁰⁰	\$ 16.100. ⁰⁰
102-1	Maintenance of Traffic	1.00	LS	\$3.300. ⁰⁰	\$ 3.300. ⁰⁰
110-1-1	Clearing and Grubbing	1.00	LS	\$2.500	\$ 2.500. ⁰⁰
160-4-1	Type B Stabilization (12")	32.67	SY	\$ 26	\$ 849.42
400-4-25	Concrete Class IV, Substructure	2.27	CY	\$3.200. ⁰⁰	\$ 7.264. ⁰⁰
522-2	Concrete Sidewalk 6"	26.83	SY	\$ 128	\$ 3.434. ²⁴
570-1-2	Performance Turf, Sod	19.83	SY	\$ 78	\$ 1.546. ⁷⁴
0001-100	16'X26' ADA Floating Dock System with 4'x22' ADA Gangway, F & I	1.00	LS	\$52.000	\$ 52.000. ⁰⁰
0001-101	4" XX Strong Steel in 6" PVC Casing Filled with Grout, F & I	5.00	EA	\$ 2.500	\$ 2.500. ⁰⁰
	Summary of Signage and Marking Quantities				
700-1-11	Single Post Sign, F&I Ground Mount, Up to 12 SF	1.00	AS	\$ 540	\$ 540. ⁰⁰
711-11224	Thermoplastic, Standard, White, Solid, 18" for Diagonal	231.00	LF	\$ 7	\$ 1617. ⁰⁰
711-16101	Thermoplastic, Standard, White, Solid, 6"	741.30	LF	\$ 2	\$ 1482. ⁶⁰

1. LEMON TREE PARK - BASE BID TOTAL

\$ 106,177.²⁹

ITEM NO.	WINFIELD PARK ITEM DESCRIPTION	ESTIMATED QUANTITY	UOM	UNIT COST	TOTAL
	Summary of Floating Dock Quantities				
101-1	Mobilization	1.00	LS	15,200	15,200
101-3	Special Trail Signs	16.00	EA	2,700	43,200
110-1-1	Clearing and Grubbing	1.00	LS	1,500	1,500
522-2	Concrete Sidewalk, 6"	42.23	SY	87	3,674 ⁰¹
570-1-2	Performance Turf, Sod	610.87	SY	10	6,108 ⁷⁰
0001-100	16'x18' ADA Floating Dock System with 4"x20" ADA Gangway, F&I	1.00	LS	36,000	36,000 ⁰⁰
0001-101	4" XX Strong Steel in 6" PVC Casing filled with grout, F&I	4.00	EA	1,800	7,200 ⁰⁰

2. WINFIELD PARK - BASE BID TOTAL

\$ 112,882.71

ITEM NO.	ADDITIONAL SERVICES ITEM DESCRIPTION	ESTIMATED QUANTITY	UOM	UNIT COST	TOTAL
See Sheet 3 Winfield Park	Replacement of All Decking for Both Existing Wood Docks at Winfield Park	1.00	LS	7,700	7,700 ⁰⁰

3. ADDITIONAL SERVICES – BASE BID TOTAL

\$ 7,700⁰⁰

TOTAL COST

1. LEMON TREE PARK BASE BID AMOUNT..... \$ 106,177.71

(All items listed in the scope of work are estimated quantity's. The CONTRACTOR shall provide all labor, material, services, tools, supervision, and technical expertise needed to accomplish the Work described in this Bid.)

2. WINFIELD PARK BASE BID AMOUNT \$ 112,882.71
(All items listed in the scope of work are estimated quantity's. The CONTRACTOR shall provide all labor, material, services, tools, supervision, and technical expertise needed to accomplish the Work described in this Bid.)

CONTINGENCY

15% OF BASE BID FOR WINFIELD PARK AND LEMON TREE PARK \$ 32,859.00
(Represents possible cost for unforeseen Work, if Approved by City)

3. ADDITIONAL SERVICES \$ 7,700.00
REPLACEMENT OF ALL DECKING FOR BOTH EXISTING WOOD DOCKS AT WINFIELD PARK

PERMIT FEES ALLOWANCE
DIRECT PASS THROUGH..... \$ 5,000.00

COST OF INDEMNIFICATION..... \$ 100.00

GRAND TOTAL FOR ALL ITEMS \$ 264,719.00

ALL BIDS MUST BE SIGNED WITH THE VENDOR NAME AND BY AN OFFICER OR EMPLOYEE HAVING THE AUTHORITY TO BIND THE COMPANY OR FIRM BY SIGNATURE.

REQUIRED PHASING PLAN ENCLOSED? YES _____ NO ✓

MATERIAL SAFETY DATA SHEETS ENCLOSED? YES _____ NO ✓

SPECIFICATION SHEETS/BROCHURES? YES _____ NO ✓

WILL YOUR FIRM ACCEPT PAYMENT VIA A CITY OF MARGATE VISA CARD? YES _____ NO x

HAVE YOUR INSURANCE REPRESENTATIVE REVIEW THE SAMPLE INSURANCE CERTIFICATE TO ENSURE COMPLIANCE. attached

BIDDER'S GENERAL INFORMATION:

The bidder shall furnish the following information. Additional sheets shall be attached as required. Failure to complete Item Nos. 1, 3, and 8 will cause the bid to be non-responsive and may cause its rejection. In any event, no award will be made until all of the Bidder's General Information (i.e., items 1 through 9 inclusive) is delivered to the City.

- (1) Contractor's name and address:

Lambert Bros, Inc., 5501 Powerline Road, Fort Lauderdale, FL 33309

- (2) Contractor's telephone number: 9544919380

- (3) Contractor's primary license classification: Certified General Contractor

State License Number: CGC1504682

Supplemental classifications held, if any: _____

Name of Licensee, if different from (1) above: _____

- (4) Name of person who inspected site of proposed Work for your firm:

Name: Gregg Lambert

Date of Inspection: _____

- (5) Name, address, and telephone number of surety company and agent who will provide the required bonds on this contract: IFIC/Harco National Insurance Co, 702 Oberlin Road,

Raleigh, NC 72605-0800

- (6) Attach to this bid, the experience resume of the person who will be designated chief construction superintendent or on-site construction manager.

- (7) Attach to this bid, a financial statement, references, and other information, sufficiently comprehensive to permit an appraisal of Contractor's current financial condition.

(8) List 3 projects completed as of recent date involving work of similar type and complexity:

PROJECT NAME	CONTRACT PRICE	NAME, ADDRESS AND TELEPHONE NUMBER OF OWNER
Deerfield Island Boardwalk Replacement	\$2,086,000.00	Broward County - Martin Gross
		Highway Construction & Eng. Div
		Phone: (954) 577-4646
		Email: mgross@broward.org
Matheson Hammock Floating Dock	\$342,000.00	Dean Gaffney, Construction Supervisor
		Miami-Dade County Parks
		11395 SW 79 Street, Miami, Florida 33173
		Phone: 305-
Bill Baggs State Park No Name Harbor Seawall Rehabilitation	\$886,000.00	Email: Dean.Gaffney@miamidade.gov
		FDEP/Tery Glunt
		Stantec, 800 Fairway Drive Suite 195
		Deerfield Beach FL 33441-1828
		Direct: 954-481-2812 ext 231
		Mobile: 954-214-7900; Fax: 954-481-2818
		tery.glunt@stantec.com

(9) Subcontractors: The bidder further proposes that as part of their submittal, attached is a list of subcontracting firms or businesses that will be awarded subcontracts for portions of the work in the event the bidder is awarded the Contract:

① Lines Unlimited - striping

Document A310™ – 2010

Conforms with The American Institute of Architects AIA Document 310

Bid Bond

CONTRACTOR:

(Name, legal status and address)

Lambert Bros., Inc.
5501 Powerline Road
Ft. Lauderdale, FL 33309

SURETY:

(Name, legal status and principal place of business)

Harco National Insurance Company
702 Oberlin Road
Raleigh, NC 27605-0800

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

OWNER:

(Name, legal status and address)

City of Margate
5790 Margate Blvd
Margate, FL 33063

BOND AMOUNT: \$ 5%

Five Percent of Amount Bid

PROJECT:

(Name, location or address, and Project number, if any)


Blueway Trail Improvements/2020-009/Margate, FL

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 19th day of May, 2020


(Witness)


(Witness) Margaret A. Schulz

Lambert Bros., Inc.

(Principal)

(Seal)

By: 

(Title)

Harco National Insurance Company

(Surety)

(Seal)

By: 

(Title) Kevin Wojtowicz

Attorney-in-Fact
& FL Licensed Agent



POWER OF ATTORNEY

Bond # Bid Bond

HARCO NATIONAL INSURANCE COMPANY

INTERNATIONAL FIDELITY INSURANCE COMPANY

Member companies of IAT Insurance Group, Headquartered: 702 Oberlin Road, Raleigh, North Carolina 27605

KNOW ALL MEN BY THESE PRESENTS: That HARCO NATIONAL INSURANCE COMPANY, a corporation organized and existing under the laws of the State of Illinois, and INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and having their principal offices located respectively in the cities of Rolling Meadows, Illinois and Newark, New Jersey, do hereby constitute and appoint

MARGARET A. SCHULZ, JESSICA P. RENO, KEVIN WOJTOWICZ, JOHN R. NEU, DANIEL F. OAKS

Miami Lakes, FL

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 13th day of December, 2018 and by the Board of Directors of HARCO NATIONAL INSURANCE COMPANY at a meeting held on the 13th day of December, 2018.

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Senior Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY have each executed and attested these presents on this 31st day of December, 2018



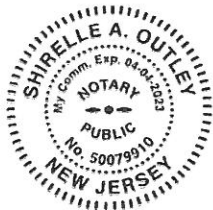
STATE OF NEW JERSEY
County of Essex

Kenneth Chapman
Executive Vice President, Harco National Insurance Company
and International Fidelity Insurance Company

STATE OF ILLINOIS
County of Cook



On this 31st day of December, 2018, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

Shirelle A. Outley a Notary Public of New Jersey
My Commission Expires April 4, 2023

CERTIFICATION

I, the undersigned officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day, May 19, 2020

Irene Martins, Assistant Secretary

REFERENCE SHEET

In order to receive Bid Award consideration on the proposed bid, it is mandatory that the following "Information Sheet" must be completed and returned with your bid. This information may be used in determining the Bid Award for this contract.

BIDDER (COMPANY NAME): Lambert Bros., Inc.

ADDRESS: 5501 Powerline Rd, Fort Lauderdale, FL 33309 TELEPHONE NO: 9544919380

CONTACT PERSON: Gregg Lambert TITLE: President

NUMBER OF YEARS IN BUSINESS: 20

ADDRESS OF NEAREST FACILITY: 5501 Powerline Road, Ft Lauderdale, FL 33309

LIST THREE (3) COMPANIES OR GOVERNMENTAL AGENCIES WHERE THESE PRODUCTS AND SERVICES HAVE BEEN PROVIDED IN THE LAST YEAR.

1. Company Name: Broward County

Address: One University Drive, Plantation, Florida

Contact Person: Martin Gross Title: Project Engineer

Phone: (954) 577-4646

2. Company Name: Miami Dade County Parks

Address: 11395 SW 79 Street: Miami, Florida 33173

Contact Person: Dean Gaffney Title: Construction Supervisor

Phone: _____

3. Company Name: Florida Dept. Environmental Protection

Address: c/o Stantec, 800 Fairway Drive Suite 195, Deerfield Beach FL 33441-1828

Contact Person: Tery Glunt Title: P.E.

Phone: 954-214-7900

NON-COLLUSIVE AFFIDAVIT FOR BID NO. 2020-009

State of Florida)

County of Broward)

Gregg Lambert being first duly sworn, deposes and says that:

He/she is the President, (Owner, Partner, Officer, Representative or Agent) of Lambert Bros., Inc., the Offeror that has submitted the attached Proposal;

He/she is fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;

Such Proposal is genuine and is not a collusive or sham Proposal;

Neither the said Offeror nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Offeror, firm, or person to submit a collusive or sham Proposal in connection with the Work for which the attached Proposal has been submitted; or to refrain from bidding in connection with such Work; or have in any manner, directly or indirectly, sought by agreement or collusion, or communication, or conference with any Offeror, firm, or person to fix the price or prices in the attached Proposal or of any other Offeror, or to fix any overhead, profit, or cost elements of the Proposal price or the Proposal price of any other Offeror, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Work;

The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Offeror or any other of its agents, representatives, owners, employees or parties in interest, including this affiant.

Signed, sealed, and delivered in the presence of:

Denise Lambert
Witness

Catherine Lambert
Witness

By 

Gregg Lambert
Printed Name
President
Title

ACKNOWLEDGMENT
NON-COLLUSIVE AFFIDAVIT FOR BID NO. 2020-009

State of Florida
County of Broward

On this the 20 day of May, 2020, before me by means of x physical presence
or online notarization, the undersigned Notary Public of the State of Florida

Gregg Lambert
(Name(s) of individual(s) who appeared before notary)

whose name(s) is/are Subscribed to within the instrument, and he/she/they acknowledge that
he/she/they executed it.

WITNESS my hand
and official seal.

NOTARY PUBLIC
SEAL OF OFFICE:



NOTARY PUBLIC, STATE OF FLORIDA

Catherine Trenet
(Name of Notary Public: Print,
Stamp, or Type as Commissioned)

☒ Personally known to me, or
☐ Produced identification:

FL Drivers License
(Type of Identification Produced)

☐ DID take an oath, or ☐ DID NOT take an oath


DRUG-FREE WORKPLACE PROGRAM FORM

In accordance with Section 287.087, State of Florida Statutes, preference shall be given to businesses with Drug-free Workplace Programs. Whenever two or more bids which are equal with respect to price, quality, and service are received for the procurement of commodities or contractual service, a bid received from a business that certifies that it has implemented a Drug-free Workplace Program shall be given preference in the award process. In the event that none of the tied vendors have a Drug-free Workplace program in effect, the City reserves the right to make final Decisions in the City's best interest. In order to have a Drug-free Workplace Program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendens to, any violation of Chapter 893, Florida Statutes, or of any controlled substance law of the United States or any State, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by any employee who is convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation.

If bidder's company has a Drug-free Workplace Program, so certify below:

AS THE PERSON AUTHORIZED TO SIGN THE STATEMENT, I CERTIFY THAT THIS FIRM COMPLIES FULLY WITH THE ABOVE REQUIREMENTS.

SIGNATURE OF BIDDER:  DATE: 5/20/20

COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH ACT (O.S.H.A.)

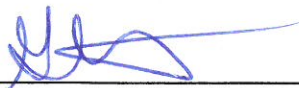
Bidder certifies that all material, equipment, etc. contained in this bid meet all O.S.H.A. requirements. Bidder further certifies that if he/she is the successful bidder, and the material, equipment, etc., delivered is subsequently found to be deficient in any O.S.H.A. requirement in effect on date of delivery, all costs necessary to bring the material, equipment, etc. into compliance with the aforementioned requirements shall be borne by the bidder.

OCCUPATIONAL HEALTH AND SAFETY DATA SHEET REQUIRED:

In compliance with Chapter 442, Florida Statutes, any item delivered from a contract resulting from this bid must be accompanied by a SAFETY DATA SHEET (SDS). The SDS must include the following information:

- A. The chemical name and the common name of the toxic substance.
- B. The hazards or other risks in the use of the toxic substances, including:
 - 1. The potential for fire, explosion, corrosivity and reactivity;
 - 2. The known acute and chronic health effects of risks from exposure, including the medical conditions which are generally recognized as being aggravated by exposure to the toxic substance; and
 - 3. The primary routes of entry and symptoms of overexposure.
- C. The proper precautions, handling practices, necessary personal protective equipment, and other safety precautions in the use of or exposure to the toxic substances, including appropriate emergency treatment in case of overexposure.
- D. The emergency procedure for spills, fire, disposal, and first aid.
- E. A description in lay terms of the known specific potential health risks posed by the toxic substances intended to alert any person reading this information.
- F. The year and month, if available, that the information was compiled and the name, address and emergency telephone number of the manufacturer responsible for preparing the information.

SIGNATURE: _____



DATE: 5/20/20

SCRUTINIZED COMPANIES CERTIFICATION

I hereby swear or affirm that as of the date below this company is not listed on a Scrutinized Companies list created pursuant to 215.4725, 215.473, or 287.135, Florida Statutes. Pursuant to 287.135, Florida Statutes I further affirm that:

4. This company is not participating in a boycott of Israel such that it is not refusing to deal, terminating business activities, or taking other actions to limit commercial relations with Israel, or persons or entities doing business in Israel or in Israeli-controlled territories, in a discriminatory manner.
5. This Company does not appear on the Scrutinized Companies with Activities in Sudan List where the State Board of Administration has established the following criteria:
 - a. Have a material business relationship with the government of Sudan or a government- created project involving oil related, mineral extraction, or power generation activities, or
 - b. Have a material business relationship involving the supply of military equipment, or
 - c. Impart minimal benefit to disadvantaged citizens that are typically located in the geographic periphery of Sudan, or
 - d. Have been complicit in the genocidal campaign in Darfur.
6. This Company does not appear on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List where the State Board of Administration has established the following criteria:
 - a. Have a material business relationship with the government of Iran or a government- created project involving oil related or mineral extraction activities, or
 - b. Have made material investments with the effect of significantly enhancing Iran's petroleum sector.
7. This Company is not engaged in business operations in Cuba or Syria.

VENDOR/COMPANY NAME: Lambert Bros., Inc.

SIGNATURE: 

PRINTED NAME: Gregg Lambert

TITLE: President

DATE: 5/20/20

The scrutinized company list is maintained by the State Board of Administration and available at <http://www.sbafla.com/>

**BYRD ANTI LOBBYING CERTIFICATION FOR CONTRACTS, GRANTS, LOANS,
AND COOPERATIVE AGREEMENTS**

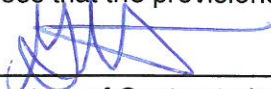
To be submitted with each bid or offer exceeding \$100,000

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The Contractor, Lambert Bros., Inc., certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. §3801 *et seq.* apply to this certification and disclosure, if any.



Signature of Contractor's Authorized Official

Gregg Lambert, President

Name and Title of Contractor's Authorized Official

Date 5.20.20

**STATEMENT OF COMPLIANCE - SMALL AND MINORITY BUSINESSES, WOMEN'S
BUSINESS ENTERPRISES, AND LABOR SURPLUS AREA FIRMS**

The undersigned Contractor hereby swears under penalty of perjury that Contractor took the following affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms were used when possible:

- (1) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
- (2) Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
- (3) Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- (4) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; and
- (5) Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.

Dated May 20, 2020 Lambert Bros., Inc.

Contractor

By [Signature]

(Signature)

By Gregg Lambert . Pres. (Name and Title)

STATE OF _____)

) SS.

COUNTY OF _____)

The foregoing instrument was acknowledged before me this 20th day of May, 2020, by means of x physical presence or _____ online notarization _____ who is personally known to me or who has produced Fl Drivers License as identification and who did/did not take an oath. WITNESS my hand and official seal, this 20 day of May, 2020

(NOTARY SEAL)

[Signature]
(Signature of person taking acknowledgment)

Catherine Trenet
(Print Name of officer taking acknowledgment)

Notary
(Title or rank)

My Commission expires: GG333539
(Serial number, if any)

ACKNOWLEDGEMENT FORM

ADDENDUM NO. 1

BID NO. 2020-009

BLUEWAY TRAIL IMPROVEMENTS

I acknowledge receipt of Addendum No. 1 for BID No. 2020-009. This addendum contains two (2) pages. Please include the original of this form in your qualifications submission.

Company Name: Lambert Bros., Inc.

Address: 5501 Powerline Road, Fort Lauderdale, FL 33309

Name of Signer Gregg Lambert
(please print)

Signature:  Date: 5/20/20

Telephone: 9544919380 Facsimile: 9544919425

Please fax your completed form to (954) 935-5258 or e-mail to purchase@margatefl.com.

Donna Hicks

Donna Hicks
Buyer II

Thursday, April 30, 2020

NOTE: The original of this form must be included with your qualifications submission.

ACKNOWLEDGEMENT FORM

ADDENDUM NO. 2

BID NO. 2020-009

BLUEWAY TRAIL IMPROVEMENTS

I acknowledge receipt of Addendum No. 2 for BID No. 2020-009. This addendum contains six (6) pages. Please include the original of this form in your qualifications submission.

Company Name: Lambert Bros., Inc.

Address: 5501 Powerline Road, Fort Lauderdale, FL 33309

Name of Signer Gregg Lambert
(please print)

Signature:  Date: 5/20/20

Telephone: 9544919380 Facsimile: 9544919425

Please fax your completed form to (954) 935-5258 or e-mail to purchase@margatefl.com.

Donna Hicks

Donna Hicks
Buyer II

Wednesday, May 13, 2020

NOTE: The original of this form must be included with your qualifications submission.

Russell W. Carter, Jr.

Work experience 11/2017 to Current Prince Land, Inc, Tequesta, FL
Grading Superintendent

- Responsible multiple project operation, main focus was a Hallandale Beach City park. Supervised and schedule pipe and grading crews, order materials, worked with the Contractor and Project Managers. Requested and coordinated equipment moves as needed, ordered inspections, and scheduled subs as jobs progressed.

2/2017 to 10/2017 Paul Davis Restoration, Tallahassee, FL
Project Manager

- Responsible for accepting new claims, coordinating scope and estimate with insurance carrier and customer. Schedule emergency and repairs services within the scope of the negotiated estimate. Schedule trades and work to complete repairs within a timely manner. Obtain necessary signatures and documents to file and complete insurance claims.

2/2015 to 1/2017 Central Florida Equipment Rentals, Inc./ Miami, FL
Operator/Foreman

- Originally hired for the Everglades Project on US 27 as a dozer operator (D8, D6, D3 and John Deer 650) responsible for filling interior canals, lifts and plugs to levee utilizing GPS dozer and other finish grading. Also operated Track Hoe for degrading roads and loading trucks, roller when operators were not available while doing lifts, Loaders with buckets and forks, Track Steers for small finishing, fuel truck when driver was out and full time towards the end of the project. Responsible for punch work clean up with small crew to complete project.

Managed up to four projects and currently assigned to road expansion project Fort Lauderdale A1A north of Oakland Park Boulevard.

3/2014 to 11/2014 Solid Builders Construction, Hollywood, FL
Project Manager

- Responsible for estimating, employee training, field operation, supervision of ADA home renovations (including Medicaid Waiver Program), residential renovations and new construction municipality office renovation (City of Weston, City of Doral), commercial renovations and new construction, food and service facilities new construction (Smoothie King, Jimmy Johns), fitness centers new construction (You Fit Fitness Centers, at Quail Roost, Coconut Grove, Davie, Lauderdale Lakes) high rise interior framing, drywall and finish new construction (Plaza Construction projects Marea and One Ocean at Miami Beach)

1/2012 – 2/2014 Worley Co and Renfroe Claims
Independent Insurance Adjuster (W060682)

- Independent Insurance Adjuster subcontracted to State Farm. Responsible for the handling and settling of Catastrophe Property Claims. Licensed in Florida, South Carolina, Georgia, Alabama, Mississippi and Louisiana.

8/2005 – 12/2011 RCarter Construction (CGC 1516243)
Owner / Contractor

- Owner and operator of the business. General Contracting, remodel/renovation of hurricane damaged homes in Florida and currently Louisiana and Mississippi(Hurricane Katrina). Specialized in new construction of high end custom homes (\$3 - \$15 million homes) in the South Miami area.

11/2001 – 8/2005 Construction Industry Florida
Operation Manager Summit Roofing
Superintendent AB Wayne Construction

- Responsible for estimating, sales and field operation/supervision, drawings and permitting. Promote relationship with customers and develop referrals for new business.

8/2000 – 11/2001 GB Hotel Partner Miami, Florida
Owners Rep

- Responsible for the oversight construction of the Ritz Carlton Hotel, Key Biscayne Florida (13 story 500 room hotel/condo). Operated 2 General contractors (1 for 500 room hotel construction, 2 for 25000 sq ft Spa construction) maintained, scheduled 60 person punch crew, 12 subcontractors including, kitchen fabrication, Voice/Data/Phone, FFE, and the coordination of the Ritz Carlton personnel. Participated in all, Village, County Inspections. Completed project 2 months ahead of scheduled Opening.

9/1991 – 8/2000 Visiting Home Health / Visiting Homemaker Service
Ft. Lauderdale, FL

Executive Director

- Responsible for General Agency Operation, including accounting, budgeting, marketing, legislative compliance, JCAHO accreditation. Developed and wrote computer program for the Private Division. Maintained data network. Increase growth of both agencies established new marketing plans, adapted agencies to changing legislation.

8/1988 – 9/1991 Rusty Carter, Jr. Sports Center Ft Lauderdale, FL
Owner/Operator

- Responsible for business operation, marketing, accounting, staff training. Developed start up business (water ski training center), training techniques, competition coaching. Trained National Teams in 14 countries, travel and competition in 42 countries. Trained and developed 4 World, 12 National, 22 International, 46 Regional Champions.

1/1980 – 8/1988 Stinger Water Skis Opa Locka, Florida
Vice President/Partner

- Responsible for Marketing, Sales, Plant Operations, R&D of new products, development of new manufacturing techniques and machinery. Maintained a 50 person work force. Developed the company from \$750,000 sales in 1980 to \$14 million in 1998, accounts included Sears, Wal-Mart, K-Mart, JC Penny, Wards, Target, BJ Wholesale, Sams Club and various sporting good changes and dealer networks.

7/1975 – 12/1980 Carter Transportation Miami,
Florida

Owner/Operator

- Responsible for general business operation. Start up company developed into 3 company owned trucks and 4 contracted trucks. Warehousing, loading, unloading, delivery and distribution for Tri County and Upper Keys. Accounts included Hormel, Ocean Spray, Publix, K-Mart, Eckerd Drugs, Burdines.

Education

1973	Cascade High School Graduate	Clayton, Indiana
1973 - 1974	University of Tampa	Tampa, Florida
2008	American Construction School	Hollywood, Fl
	(Florida's General Contractor's Exam) Passed	
2010	Florida Independent Insurance Adjuster License.	

Athanassios "Sakis" Batalas
247 Imperial Lane
Lauderdale by the Sea, FL 33308
(732) 887-0200

RESUME

2010-current LAMBERT BROS., INC., Fort Lauderdale, FL
Project Manager

Florida Department of Environmental Protection – Bill Baggs State Park – No Name Harbor Sewall Rehabilitation – remove and replace 1,500 LF of bulkhead, including all tie rods, deadman, cleats and rip rap; Sidewalk replacement.

City of Palm Beach – Wastewater Treatment Plant – Remove and Replacement Railing; install gate alarms and SCADA connections, harness attachments, concrete repairs and miscellaneous improvements.

Miami Dade County – Floating Dock Repair - remove all tie rod fasteners (all thread/threaded rod) w/hardware and replace with new materials to match existing conditions in size, material, length, to floating dock systems (E, F Docks). Removal/replacement with new to all galvanized metal frame work to include triangular support (main walkway to finger walkway), side/end pile guides and rollers to match existing.

FDOT – Port of Miami – Sewall Rehabilitation - Replacing the West Bulkhead at the bridges long SR-886/Port Blvd, Port of Miami Bridge over Intracoastal Waterway. This includes demolition, repair and replacement of concrete wall, fencing and all other components of Seawall.

FDOT – Sign Structure and Concrete Maintenance – 3 year Contract. Maintenance Contract for maintenance, repair and/or replacement of miscellaneous concrete roadway components, consisting of: concrete roadway pavement, concrete barrier wall, curb and gutter, ditch pavement and sidewalk, grout pads, and stabilizing earth, as well as maintenance of structural components of sign structures and high mast light towers such as bolts, washers,

nuts, bolt assemblies, cleaning and spot painting of sign structures on various locations in Zone 1 of Florida Turnpike

FDOT – T4410 - Constructing and Widening Sidewalk, installing pedestrian lighting, upgrading signing and pavement marking and railroad crossing signs on 23rd St.

FDOT – Sawgrass AET – Install 17 new equipment buildings turnkey, concrete pavement, steel bollards, foundations, etc.

South Florida Water Management – C44 Reservoir Discharge System including sheet piling at spillway location.

South Florida Water Management – S5A – Pump Station Hardening and Bridge Repairs, dewatering of bays, building updates, etc.

South Florida Water Management – G250 & G337 – Pump replacement and structural repairs.

Town of Palm Beach – Pinewalk Transfer Station – Concrete Repairs, rail repairs, maintenance coatings, form work, etc.

South Florida Water Management – S131 – Platform Replacement

South Florida Water Management – G251 – Trash Rake Replacement, furnish and install wingwall extensions, new trash rake abutment walls and foundation, piling, etc.

Town of Jupiter – Riverwalk River Plaza - Install precast slabs and decking along the waterside of intracoastal and create walkway and plaza for recreation, including curbing, ADA accessible ramps, rip-rap and landscaping.

Broward County Aviation Dept. – Concourse F – Vendor Space build out and demolition of concrete stairwell; New utility runs inside terminal concourse F

South Florida Water Management – S20F – Wingwall Replacement & Cathodic Protection – Sheet Pile Replacement

Broward County Aviation Dept. – Soffit Replacements throughout airport and new canopy installation at terminal 4.

City of Oakland Park – NE 12 Terrace Canoe and Kayak launch - Install timber piles and canoe /kayak launch including new deck, gangway, rail, and prefab launch.

1984-2009: BATALAS INDUSTRIES, Farmingdale, NJ
Owner/Estimator

Construction Company specializing in road, concrete and masonry construction as well as general building construction for schools, railroads, medical complexes, etc. A complete project list is attached hereto.

Certificates

Approved MOT Advanced Certification #16773
Qualified Stormwater Management Inspector No. 34892
Rigging Safety – Level 1
Qualified Crane Signal Person
Fall Protection Competent Person Certificate
Crane Safety Certificate

Reference Signature: _____ Date: _____

**EVALUATION OF PAST PERFORMANCE –
ENCLOSE THREE (3) REFERENCES WITH THE BID**
(Please type or clearly print below)

To be completed by the Bidder:

Bidder or Associated Business Entity's Name: Lambert Bros., Inc.
Company Representative: Gregg Lambert
Bidder's Phone Number: (954) 491-9380

REFERENCE:

Reference Organization Name: Stantec
Reference Contact: Tery Glunt
Reference Phone Number: (954) 481-2812 - Ext. 231
Reference Email Address: teryglunt@stantec.com

Briefly describe the work performed for the above Reference:

To be completed by the Reference:

The following questions will be asked of the client reference as chosen at the discretion of the Department.

1. How well did the contractor adhere to the agreed upon schedule?

Excellent X Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: FINISHED MOST TASKS AHEAD OF SCHEDULE

2. How would you rate the contractor's overall quality of work?

Excellent _____ Above Satisfactory X Satisfactory _____ Fair _____ Poor _____

Comments: ONLY MINOR ISSUES W/ QUALITY, BUT ALL WERE RESOLVED

3. How would you rate the contractor's use of adequate personnel in quantity, experience and professionalism?

Excellent _____ Above Satisfactory X Satisfactory _____ Fair _____ Poor _____

Comments: KEPT KEY STAFF ON PROJECT UNTIL COMPLETE

4. How would you rate the contractor's use of appropriate equipment and methods?

Excellent X Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

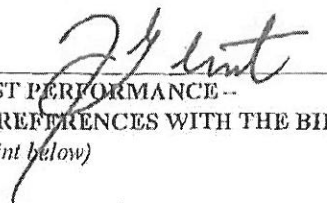
Comments: EQUIPMENT WAS APPROPRIATE FOR TASK AND IN EXCELLENT SHAPE

SCORING:

Excellent	=	4 points
Above Satisfactory	=	3 points
Satisfactory	=	2 points
Fair	=	1 point
Poor	=	0 points

Total Score = 14

Average (Total Score/4) = 3.5

Reference Signature:  Date: 6/11/19
EVALUATION OF PAST PERFORMANCE--
ENCLOSE THREE (3) REFERENCES WITH THE BID
(Please type or clearly print below)

EVALUATION OF PAST PERFORMANCE -
ENCLOSE THREE (3) REFERENCES WITH THE BID
(Please type or clearly print below)

To be completed by the Bidder:

Bidder or Associated Business Entity's Name: Lambert Bros., Inc.
Company Representative: Gregg Lambert
Bidder's Phone Number: (954) 491-9380

REFERENCE:

Reference Organization Name: City of Tamarac
Reference Contact: Alan Lam
Reference Phone Number: (954) 597-37070
Reference Email Address: alan.lam@tamarac.org

Briefly describe the work performed for the above Reference:

Headwall Sheetpile Replacement

To be completed by the Reference:

The following questions will be asked of the client reference as chosen at the discretion of the Department.

1. How well did the contractor adhere to the agreed upon schedule?

Excellent _____ Above Satisfactory X Satisfactory _____ Fair _____ Poor _____

Comments: The Contractor Completed the project in time

2. How would you rate the contractor's overall quality of work?

Excellent X Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: The contractor has performed the work with high quality.

3. How would you rate the contractor's use of adequate personnel in quantity, experience and professionalism?

Excellent _____ Above Satisfactory X Satisfactory _____ Fair _____ Poor _____

Comments: _____

4. How would you rate the contractor's use of appropriate equipment and methods?

Excellent X Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: _____

SCORING:

Excellent = 4 points
Above Satisfactory = 3 points
Satisfactory = 2 points
Fair = 1 point
Poor = 0 points

Total Score = 14

Average (Total Score/4) = 3.50

Reference Signature: _____

slgs
Am.

Date: _____

6/11/2019

EVALUATION OF PAST PERFORMANCE -

ENCLOSE THREE (3) REFERENCES WITH THE BID

(Please type or clearly print below)

Reference Signature: [Signature]
EVALUATION OF PAST PERFORMANCE -
ENCLOSE THREE (3) REFERENCES WITH THE BID
(Please type or clearly print below)

Date: 06/11/19

To be completed by the Bidder:

Bidder or Associated Business Entity's Name: Lambert Bros., Inc.
Company Representative: Gregg Lambert
Bidder's Phone Number: (954) 491-9380

REFERENCE:

Reference Organization Name: Bolton, Perez & Associates
Reference Contact: Jose Morales
Reference Phone Number: (305) 392-3100 (786) 539 9629
Reference Email Address: jmorales@bpaengineers.com

Briefly describe the work performed for the above Reference:

Seawall Rehabilitation - Demolition, Repair & Replacing of Concrete wall, fencing & all other aspects of Seawall Rehab.

To be completed by the Reference:

The following questions will be asked of the client reference as chosen at the discretion of the Department.

1. How well did the contractor adhere to the agreed upon schedule?

Excellent ☒ Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: FINISHED ON TIME

2. How would you rate the contractor's overall quality of work?

Excellent ☒ Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: CONTRACTOR WORK WAS NOMINATED FOR A PRODUCTIVITY AWARD WITH FOOT.

3. How would you rate the contractor's use of adequate personnel in quantity, experience and professionalism?

Excellent ☒ Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: CAME UP WITH GREAT IDEAS TO COMPLETE THE JOB MORE EFFICIENT

4. How would you rate the contractor's use of appropriate equipment and methods?

Excellent ☒ Above Satisfactory _____ Satisfactory _____ Fair _____ Poor _____

Comments: SPECIALIZED EQUIPMENT WAS USED TO DRIVE SHEET PILES WITH LOW CLEARANCE

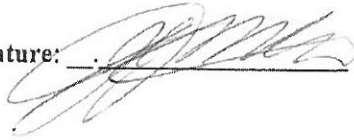
SCORING:

Excellent = 4 points
Above Satisfactory = 3 points
Satisfactory = 2 points
Fair = 1 point
Poor = 0 points

Total Score = 16

Average (Total Score/4) = 4

Reference Signature: _____



Date: _____

06/11/19

SECTION B: SPECIAL CONDITIONS



**City of Miami, Department of Procurement
Experience of the Superintendent/Reference Form ITB-SIR**

INSTRUCTIONS

Superintendents shall complete the following information for completed projects where they believe the project is of equal or greater scope, size, and complexity that best represent its ability to complete the "Project." The reference provided below should be for one (1) project and must comply with the requirements listed in the Notice to Contractors.

FAILURE TO COMPLETE AND SUBMIT THIS FORM FOR THE AMOUNT OF PROJECTS REQUIRED IN THE NOTICE TO CONTRACTORS, WILL RESULT IN THE RESPONSE BEING REJECTED AS NON-RESPONSIVE.

Name of the Superintendent: Sakis Batalas

The above referenced Superintendent is part of a team responding to a bid that has been issued by the City of Miami. The City requires that the Superintendent provide written references with their team's bid submission. By providing you with this document, the Superintendent is requesting the following reference information from you. The City may independently verify the information you provide below, as well as any other information the City may feel pertinent:

Name of Referenced Project: Matheson Hammock Floating Dock Repairs

The Following Section to be Completed by the Project Owner.

Scope of Referenced Work: remove all tie rod fasteners (all thread/threaded rod) w/hardware and replace with new materials to match existing conditions in size, material, length, to floating dock systems (E, F Docks). Removal/replacement with new to all galvanized metal frame work to include triangular support (main walkway to finger walkway), side/end pile guides and rollers to match existing.

Did the Scope involve marine and/or overwater marina utility construction? ☒ Yes ☐ No

Value of Project \$350,904.63 Date Completed: 1/2017

Percentage of physical construction Work self-performed by the Superintendent: 30%

Was Project completed on time and within budget: ☒ Yes ☐ No

If no, was the Superintendent at fault, contributed to the delay, or increased cost? ☐ Yes ☒ No

If yes, please provide details:

Comments:

Name of Project Owner: Miami Dade County

Date: 2/15/20

Signature of Project Owner's Representative: [Signature]

Title: Dean Gaffney, Engineer - Project Manager

Telephone: 305-SP6 4460-5561/208

E-mail: Dean.Gaffney@miamidade.gov



**City of Miami, Department of Procurement
Experience of the Superintendent/Reference Form ITB-SIR**

INSTRUCTIONS

Superintendents shall complete the following information for completed projects where they believe the project is of equal or greater scope, size, and complexity that best represent its ability to complete the "Project." The reference provided below should be for one (1) project and must comply with the requirements listed in the Notice to Contractors.

FAILURE TO COMPLETE AND SUBMIT THIS FORM FOR THE AMOUNT OF PROJECTS REQUIRED IN THE NOTICE TO CONTRACTORS, WILL RESULT IN THE RESPONSE BEING REJECTED AS NON-RESPONSIVE.

Name of the Superintendent: Sakis Batalas

The above referenced Superintendent is part of a team responding to a bid that has been issued by the City of Miami. The City requires that the Superintendent provide written references with their team's bid submission. By providing you with this document, the Superintendent is requesting the following reference information from you. The City may independently verify the information you provide below, as well as any other information the City may feel pertinent:

Name of Referenced Project: Seawall Rehabilitation for Port of Miami (E6)27)

The Following Section to be Completed by the Project Owner.

Scope of Referenced Work: Demo, Repair & Replace Concrete seawall

Did the Scope involve marine and/or overwater marina utility construction? ☒ Yes ☐ No

Value of Project: \$ 874,735.00 Date Completed: 4/20/2017

Percentage of physical construction Work self-performed by the Superintendent: 100 %

Was Project completed on time and within budget: ☒ Yes ☐ No

If no, was the Superintendent at fault, contributed to the delay, or increased cost? ☐ Yes ☒ No

If yes, please provide details:

Comments:

Name of Project Owner: Fl. Dept. Environmental Protection Date: _____

Signature of Project Owner's Representative:  JOSE E MORALES
2020.02.05 09:41:19 -05'00'

Title: Jose Morales, Engineer

Telephone: 786-539-9629 E-mail: JMorales@BPAEngineers.com



Town of Jupiter

Engineering & Public Works Department

210 Military Trail ~ Jupiter, Florida 33458 ~ Phone (561) 741-2372 ~ Fax (561) 741-2515

www.jupiter.fl.us

November 18, 2014

To Whom it May Concern:

Please be advised that we have worked with Lambert Bros., Inc. on the following project:

Project Name: Riverwalk River Plaza

Project Number: Contract EPW 2009-30; FM#423811-1-58-01

Project Location: Town of Jupiter – Riverwalk Plaza

Size of the Project: \$ 664,426.00

Description of the Project: Construction of 160' x 12' concrete pedestrian bridge, supported on 14" prestressed precast concrete piles, 450' x 10 textured and colored concrete sidewalk, aluminum decorative railing, lighting and landscaping along the waterside of intracoastal. F&I 20ea 30ft 14" prestressed concrete piles; F&I 10ea precast concrete pile caps; F&I 18ea 6ft wide x 1' precast deck slabs; F&I 22ea 4'x2.5'x1' cast in place reinforced concrete pedestals; F&I 12ft wide CIP approach slab; F&I 450LF x 10' x 6" textured colored sidewalk; F&I drainage: 2 inlets, 2 closed flumes and 19x30 elliptical slotted RCP exfiltration drain; F&I Drainage riprap; F&I 260LF x 4ft hgt Reinforced CMU retaining wall; F&I 280LF decorative aluminum bridge railing; F&I 400ft of 6ft Aluminum fencing; F&I lighting; F&I landscaping.

Classes of work performed by Lambert's own employees and equipment:

Concrete work, prestressed concrete pile installation, pile cap installation, cast in place reinforced concrete pedestals, CIP approach slab, sidewalk installation, railing installation, Drainage, rip rap, reinforced CMU retaining wall, aluminum bridge railing.

Was the project timely?: Yes the project was completed on time with adjustments for extra work and weather.

Was the applicant cooperative and facilitated changes to projects when required?
Yes

If you need anything further, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be 'TD' with a large loop, positioned above the printed name.

Thomas V. Driscoll, P.E.
Director of Engineering, Parks & Public Works



TARGET ENGINEERING GROUP, INC.

12508 WEST ATLANTIC BLVD.
CORAL SPRINGS, FLORIDA 33071
TELEPHONE: (954) 367-9440

To Whom it May Concern:

Please be advised that I have worked with Lambert Bros., Inc. on the following project:

Project Name: Design/Build-Conversion of the Sawgrass Expressway/ SR 869 to AET - 21 sites along the Sawgrass Exp. - Broward County

Project Number: 431281-1-52-01 & 431281-3-52-01, Contract E8M05

Project Location: Sawgrass Expressway throughout Broward County

Size of the Project: \$6,950,010.00

Description of the Project: 17ea new precast equipment buildings (turnkey) and all work to 5 feet from the buildings; F&I all new 6" concrete pavement around equipment building and generator/fuel pads; F&I steel bollards; F&I 12" reinforced equipment pads and reinforced concrete building foundations; F&I 2ea 100kw & 17ea 60kw Kohler generators and 19ea 500gal diesel fuel systems; F&I 17ea equipment building/gantry lightning protection & grounding systems; Modifications to existing equip. bldg's @ Deerfield & Sunrise mainlines; Minor modifications to Deerfield & Sunrise administration buildings; New service entrance conduit & conductors from FPL transformer; 20ea Liebert 16kva UPS's and bypass switches, 17ea SCADA control systems and panels.

Classes of work performed by Lambert's own employees and equipment:

Supervision of all subcontractors, Concrete pavement, reinforced equipment pads and building foundations; fabrication and installation of steel bollards; sidewalk installation

Was the project activity completed on time?: Yes

Was the applicant cooperative and facilitated changes to projects when required? All Lambert personnel were cooperative and knowledgeable on project details. Minor changes were easily coordinated in the field with follow-up at the management level.

If you need anything further, please do not hesitate to contact me.

Very truly yours,

Richard Lavin, P.E. - Target Engineering Group, Inc.
Senior Project Engineer
(954) 448-0647



OHL Community Asphalt

October 2, 2014

To Whom it May Concern:

Please be advised that we have worked with Lambert Bros., Inc. on the following project:

Project Name: Deerfield/Sawgrass Mainline Toll Plaza

Project Number: FDOT Project No. 420289-06-52-01 Contract No. E8H59

Project Location: Sawgrass Expressway/Florida Turnpike, Deerfield Beach

Size of the Project: \$ 4,985,778.88

Description of the Project: Design/Build: Fabricate and install two (2) High speed sun pass toll plazas; F&I 2ea-20'x30' x12'deep Cofferdam- H pile and lagging for underwater stairwell; Furnish and operate dewatering system for cofferdam; Install new concrete toll islands; Construction of 900 LF of barrier wall; Concrete modifications to tunnel; F&I 2ea - 300' Concrete Signature Walls, including structural steel and pavement footings; Fabricate and install two (2) Sun pass toll plazas and gantry buildings; Remove and replace building canopy; Furnish and Install concrete gantry building, including foundations; F&I all modifications to administration building and pump complex building; F&I all mainline toll lane and canopy modifications; F&I canopy and administration building aluminum fascia and support structure.

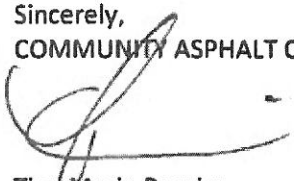
Classes of work performed by Lambert's own employees and equipment: Lambert Bros., Inc. performed all concrete work, barrier wall, dewatering system, footings, foundations, F&I all modifications to administration building and pump complex building; F&I all mainline toll lane and canopy modifications; F&I canopy and administration building aluminum fascia and support structure. Lambert rented larger cranes, excavators with hoe rams to demo concrete, boom lifts and dewatering pumps for the project. Work performed by others included electrical work, fabrication and partial installation of sun pass toll gantry.

Was the project timely?: yes

Was the applicant cooperative and facilitated changes to projects when required? Yes, Lambert was a valuable asset to completing the project under budget and on time.

If you need anything further, please do not hesitate to contact me.

Sincerely,
COMMUNITY ASPHALT CORP.


Tina Marie Pereira
Sr. Project Manager

☒ **Corporate:**
9675 NW 117 Ave. - Suite 108
Miami, FL 33178
Phone: 305.884.9444
Fax: 305.884.9448

☐ **Miami Dade:**
14005 NW 186 Street
Hialeah, FL 33018
Phone: 305.829.0700
Fax: 305.829.0431

☐ **West Palm Beach:**
7795 Hooper Road
West Palm Beach, FL 33411
Phone: 561.790.6467
Fax: 561.790.1073

☐ **Vero Beach:**
2975 Industrial Blvd.
Vero Beach, FL 32967
Phone: 772.770.3771
Fax: 772.770.3707

☐ **Fort Myers:**
16560 Mass Court
Fort Myers, FL 33912
Phone: 239.337.9486
Fax: 239.337.9488



5399 N. Dixie Highway, Suite 3 • Oakland Park, Florida 33334 • www.oaklandparkfl.gov

To Whom it May Concern:

Please be advised that we have worked with Lambert Bros., Inc. on the following project:

Project Name: NE 12th Terrace Canoe and Kayak Launch

Project Number: #E12TCKL031411

Project Location: NE 12 Terrace, Oakland Park, Florida

Size of the Project: \$ 65,276.87

Description of the Project: Install 6 12' x 25' timber piles; Install new wood bridge decking, aluminum gangway, rail and canoe launch

Classes of work performed by Lambert's own employees and equipment:

All of the above work performed by Lambert Bros., Inc. employees and equipment

Was the project timely and within budget?: yes

Was the applicant cooperative and facilitated changes to projects when required?
yes

If you need anything further, please do not hesitate to contact me.

Very truly yours,

John m. Perez
Project Manager

954-630-4479



TOWN OF PALM BEACH

Public Works Department

October 3, 2014

Mr. Lewis Harper
Contracts Administration Office
605 Suwanee Street
MS 55
Tallahassee, FL 32399

Dear Mr. Lewis:

Please be advised that we have worked with Lambert Bros., Inc. on the following project:

Project Name: Pinewalk Transfer Station, Palm Beach, Florida

Project Number: 121431

Project Location: Pinewalk, Town of Palm Beach, Florida

Size of the Project: \$ 123,745.00

Description of the Project: 2800sf pavement surface repair, sawcut and remove concrete and asphalt, compact and regrade existing subbase and install reinforced concrete slab; remove deteriorated concrete on elevated structure and repair concrete, rails and maintenance coating. Clean exposed rebar and apply Sika-Armatec; Repair concrete and expansion joints, inject resin into cracks and fill all voids, coat top of concrete slab with protective coating, replace all anchor bolts, steel cross bracing, gusset plates, F&I new steel stairs; Replace ramp guardrail, R&R new traffic rail; Install terracell erosion control system at steep sloped stone and grass area; water blast clean and dry all substrate and apply maintenance coating.

Classes of work performed by Lambert's own employees and equipment:

All of the above work performed by Lambert Bros., Inc. employees and equipment

Was the project timely?: yes

Was the applicant cooperative and facilitated changes to projects when required? yes

If you need anything further, please do not hesitate to contact me.

Sincerely,

Eric B. Brown, P.E., Assistant Director of Public Works

To Whom it May Concern:

Please be advised that we have worked with Lambert Bros., Inc. on the following project:

Project Name: G-251 Trash Rake Replacement

Project Number:

Project Location: SFWMD – G-251. West Palm Beach, Florida

Size of the Project: \$ 2,043,906.07

Description of the Project: Trash Rake Replacement – Remove and replace (6) stainless steel trash racks and (6) rakes; Remove and replace trash rake and rack system, including modifications to the abutments walls, new sheet pile wing walls and bulkheads and cathodic protection system; Design and install temporary sheet pile cofferdam on intake canal; Design, install and operate dewatering system; Extend the foundation footing 62ft x 6.5' x 3.5' deep; Extend abutments walls 8.67' x 1.75' x 12.5' hgt; Extend pier walls 6.67' x 1.25' x 12.5' hgt; Install new concrete pit at north end of bridge; Remove existing steel sheet pile wingwalls and bulkhead; Install 224LF of sheet pile wingwalls, tie back system and concrete deadmen; Install 224LF x 2.5' x 2.5' reinforced concrete bulkhead cap on wingwalls; F&I 12" Prestress pile for staff gauges; F&I 260ft 18" HDPE perforated exfiltration pipe; Replacement of the 3 bay trash rake and rack collection system; Install new asphalt pavement on access road; Installation of new staff gages, weed and float barriers; Installation of 370CY intake channel riprap stone protection; Installation of galvanic cathodic protection system.

Classes of work performed by Lambert's own employees and equipment: All work performed by Lambert Bros., Inc. with the exception of engineering, electrical work, asphalt access road and pump manufacturing.

Was the project timely?: _____

Was the applicant cooperative and facilitated changes to projects when required?

If you need anything further, please do not hesitate to contact me.

Very truly yours,

* - see
attached
→



Gregg Lambert <lambertbrosinc@gmail.com>

FW: G251

1 message

Palmatier, Denise <dpalmati@sfwmd.gov>
To: "Gregg Lambert (gl@lambertbros.net)" <gl@lambertbros.net>

Thu, Oct 2, 2014 at 2:17 PM

Greg, does this help?

From: Labrada, Johanna
Sent: Thursday, October 02, 2014 2:10 PM
To: Palmatier, Denise
Subject: RE: G251

Hi Denise, we do not fill out reference letters, instead we provide copies of past performance records/performance evaluations. I attached the one you did for them on G-251. You could also verify details of the contract such as scope of work, amount and contract time.

Thanks,

Johanna M. Labrada, CPPB, FCCM, FCCN, FCPA

Lead Contract Specialist

Procurement Bureau

South Florida Water Management District

phone 561-682-2520

From: Palmatier, Denise
Sent: Thursday, October 02, 2014 2:02 PM
To: Labrada, Johanna
Subject: FW: G251

What is our policy on reference letters? I want to help them out but I don't think the PMs are allowed to do reference letters.



SOUTH FLORIDA WATER MANAGEMENT DISTRICT Contractor Performance Evaluation

Instructions:
Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion.

It is especially important for the Project Manager to contact a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.

When completed, forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002596	Contractor Lambert Brothers, Inc.	Evaluation Period 3/2012 - 2/2013	<input type="checkbox"/> Interim <input checked="" type="checkbox"/> Final
Project Title G-251 Trash Rake and Wing Wall Replacement			
If evaluating under a work order contract, specify type (i.e., GEPS, STS, IT, SAP, etc.)			

Check the appropriate ratings for Lines 1 through 8.
Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9.
Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10.
Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11.

Performance Indicators	Rating				
	Unsatisfactory	Marginal	Satisfactory	Very Good	Exceptional
1. Planning & Approach	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
2. Staff Capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
3. Staff Effectiveness	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
4. Flexibility in Meeting District Goals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
5. Promptness of Deliverables/Milestones/Reports	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
6. Report Quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
7. Quality of Work Completed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
8. Contract Under or at Budgeted Cost and Invoicing Procedures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
9. Individual Column Rating (Total lines 1-8)				32	
10. Total Rating Score (Total row 9.)	32				
11. Average Rating Score (Divide line 10 by the number 8.)	4.0				

In Lines 12 through 21, provide any additional detail, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

12.	Current tasks completed and/or deliverables received? If no, reason:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
13.	Current work completed ahead/on schedule? If no, number of days late: <u>84</u> and reason: owner directed change orders	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
14.	Contract currently under/at budgeted cost? If not at budget, specify amount over \$ <u>46,906.07</u> and reason: owner directed change orders	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
15.	Contractor strengths: Contractor has ability to deal with changes in the field. Knowledgeable and efficient staff.									
16.	Contractor weaknesses:									
17.	Specific problems incurred*:									
*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section. Contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.										
18.	How may these have been prevented?									
19.	Additional comments/recommendations:									
20.	Comments on SBE utilization:									
21.	Currently recommend firm for future contracts/work orders of this type? If "No" or "Possibly", an explanation must be provided in Line 22 below.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Possibly								
<table border="1"> <tr> <td>Project Manager (sign)</td> <td>Date</td> <td>Section Administrator (sign)</td> <td>Date</td> </tr> <tr> <td><i>Margaret Mahon</i></td> <td>4/10/13</td> <td><i>[Signature]</i></td> <td>4/14/13</td> </tr> </table> <p>Please indicate any additional comments corresponding to Performance Indicators (Lines 1-8) on Page 1 – explain marginal/unsatisfactory performance; if either "No" or "Possibly" apply to Question 21, an explanation must be provided here. Additional sheets may be attached if necessary.</p>			Project Manager (sign)	Date	Section Administrator (sign)	Date	<i>Margaret Mahon</i>	4/10/13	<i>[Signature]</i>	4/14/13
Project Manager (sign)	Date	Section Administrator (sign)	Date							
<i>Margaret Mahon</i>	4/10/13	<i>[Signature]</i>	4/14/13							
Number	Remarks									
#										
#										



SOUTH FLORIDA WATER MANAGEMENT DISTRICT
Contractor Performance Evaluation
ORIGINAL

Instructions:

Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion.

It is especially important for the Project Manager to contact a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.

When completed, forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002466-2446	Contractor Lambert Bros., Inc.	Evaluation Period 06/11 - 07/12	<input type="checkbox"/> Interim <input checked="" type="checkbox"/> Final
Project Title S343 A & B Catwalk and Gate Support Replacement			
If evaluating under a work order contract, specify type (i.e., GEPS, STS, IT, SAP, etc.)			

Check the appropriate ratings for Lines 1 through 8.

Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9.

Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10.

Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11.

Performance Indicators	Rating				
	Unsatisfactory	Marginal	Satisfactory	Very Good	Exceptional
1. Planning & Approach	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
2. Staff Capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input checked="" type="checkbox"/> 5
3. Staff Effectiveness	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
4. Flexibility in Meeting District Goals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
5. Promptness of Deliverables/Milestones/Reports	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input checked="" type="checkbox"/> 5
6. Report Quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
7. Quality of Work Completed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
8. Contract Under or at Budgeted Cost and Invoicing Procedures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
9. Individual Column Rating (Total lines 1-8.)				24	10
10. Total Rating Score (Total row 9.)	34				
11. Average Rating Score (Divide line 10 by the number 8.)	4.25				

12. Current tasks completed and/or deliverables received? If no, reason:

☒ Yes☐ No

13. Current work completed ahead/on schedule? If no, number of days late: 20 and reason: SCADA requested additional junction boxes and conduit at Substantial Completion. There was lead time on these items

☐ Yes ☒ No

☒ No

14. Contract currently under/at budgeted cost? If not at budget, specify amount over \$ <u>19,883.92</u> and reason: Unforeseen field conditions and SCADA requests.	<input type="checkbox"/> Yes
	<input checked="" type="checkbox"/> No

☒ No

15. Contractor strengths: Planning, availability, responsiveness, and quality of work. The contractor thought the project through from NTP to end of construction. Submittals were on time and contain all pertinent information. Returned all phone calls and e-mails in a timely manner.

1

17. Specific problems incurred*: A couple of the catwalk piles required additional augering



*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section. Contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.

y al exteñsion

18. How may these have been prevented? Geotechnical borings at the specific pile locations

19. Additional comments/recommendations: This project was located 20 mi west of Krome Avenue off of Tamiami Trail. There was not sufficient construction inspection services; however, the contractor turned in a good quality product.

20. Comments on SBE utilization: Lambert Bros., Inc. is a SBE.

21. Currently recommend firm for future contracts/work orders of this type? If "No" or "Possibly", an explanation <u>must</u> be provided in Line 22 below.		<input checked="checked" type="checkbox"/> Yes
Project Manager (sign) 	Date 09/24/12	Section Administrator (sign) 
	Date 9/24/12	<input type="checkbox"/> No <input type="checkbox"/> Possibly

☐ Possibly

22. Please indicate any additional comments corresponding to Performance Indicators (lines 1-8) on Page 1 – explain marginal/unsatisfactory performance; if either "No" or "Possible" apply to Question 21, an explanation must be provided here. Additional sheets may be attached if necessary.

Number	Remarks
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#	

CONTRIBUTIONS TO THE THEORY OF THE

Please indicate any additional comments.

1. *Pharmaceutical Industry*
 2. *Medical Devices Industry*
 3. *Health Insurance Industry*
 4. *Hospital Industry*
 5. *Pharmaceutical Industry*
 6. *Medical Devices Industry*
 7. *Health Insurance Industry*
 8. *Hospital Industry*
 9. *Pharmaceutical Industry*
 10. *Medical Devices Industry*
 11. *Health Insurance Industry*
 12. *Hospital Industry*
 13. *Pharmaceutical Industry*
 14. *Medical Devices Industry*
 15. *Health Insurance Industry*
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 91. *Health Insurance Industry*
 92. *Hospital Industry*
 93. *Pharmaceutical Industry*
 94. *Medical Devices Industry*
 95. *Health Insurance Industry*
 96. *Hospital Industry*
 97. *Pharmaceutical Industry*
 98. *Medical Devices Industry*
 99. *Health Insurance Industry*
 100. *Hospital Industry*

1. *Chlorophyll a* (Chl *a*) is the primary photosynthetic pigment in most plants and algae. It is responsible for capturing light energy and converting it into chemical energy through the process of photosynthesis. Chl *a* is a green pigment and is found in the chloroplasts of plant cells.

The image shows the front cover of a book. It has a dark, heavily textured surface, possibly leather or a similar material. A vertical strip of lighter, smoother material, likely cloth or leather, runs down the center of the cover, creating a spine-like effect. The overall appearance is aged and worn.

[illegible]

8. Overall Average Score

Protein Expression and Purification

David M. Quinn, Jr. 11/2 South 1st St. #1000

Enorm 1120 (06/2012)



INSTRUCTIONS: Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion. *It is especially important for the Project Manager to get in touch with a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.*

Circle the appropriate ratings for Lines 1 through 8. Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9. Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10. Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11. Provide any additional detail in Lines 12 through 21, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

Forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002586 Contractor Lambert Bros. Inc.

Project Title: S131 Operating Platform Modification Evaluation Period 120 days INTERIM ☐ FINAL ☒

If evaluating under a work order contract, specify type (i.e. GEPS, STS, IT, SAP, etc.) _____

Circle Appropriate Rating for Questions 1-8, Total Columns in Line 9, Total Line 9 in Line 10, Average Line 10 (divide Line 10 by the number 8) in Line 11.

divide Line 10 by the number 9 in Line 11.

Performance Indicators		Rating				
		Exceptional	Very Good	Satisfactory	Marginal	Unsatisfactory
1.	Planning and Approach	5	④	3	2	1
2.	Staff Capability	5	④	3	2	1
3.	Staff Effectiveness	5	④	3	2	1
4.	Flexibility in Meeting District Goals	⑤	4	3	2	1
5.	Promptness of Deliverables / Milestones / Reports	5	4	③	2	1
6.	Report Quality	5	4	③	2	1
7.	Quality of Work Completed	⑤	4	3	2	1
8.	Contract Under or at Budgeted Cost and Invoicing Procedures	5	4	③	2	1
9.	Individual Column Rating	10	12	9		
10.	Total Rating Score	31				
11.	Average Rating Score	3.9				

Complete 12 - 21 for additional detail of items 1 - 8 above. Additional space is available on Item 22 of this form.

12. Current tasks completed and/or deliverables received? X YES NO

If no, reason: _____

13. Current work completed ahead/on schedule: X YES NO # OF DAYS LATE

If no, reason: _____

**CONTRACTOR
FIELD PERFORMANCE REPORT**

- ☐ Periodic
☒ Initial
☐ Final

RATING**90.00**Date: June 30, 2010Lambert Bros Construction

Contractor Name

FIN. Project ID's

Additional FIN Project ID's (if applicable)

PR4366556\$22,787.00

Contract No.

Original Contract Amount

Relocation of Triplewide Trailer

Type of Work

Grading Instructions10 - Outstanding
9 - Excellent8 - Good
7 - Satisfactory5 - Unsatisfactory
3 - Poor**Grade**

1. Prosecution, control and timely completion of the work.
2. Overall quality control and compliance with contract.
3. On-Site supervision and staffing (no. and skill level).
4. Quantity, suitability and effectiveness of equipment.
5. Maintenance of traffic operations.
6. Interface with traveling public and adjacent property owners.
7. Effectiveness of general management.
8. Furnishing of required documents and reports.
9. Cooperation with Department personnel.
10. Final clean-up of work site.

9.09.09.09.09.09.09.09.09.09.0Raw Score = 90.0**Note:**

1. If all items are graded, the maximum rating attainable is (100).
2. If any items do not apply mark them N/A and use the following formula:

$$\text{Max Rating Attainable} = 100 - (\underline{10} \text{ (Max. grade per item)} \times \underline{0} \text{ (No. of items marked N/A)}) = (\underline{100.00} \text{ Max Rating Attainable})$$

$$\text{Performance Rating} = \frac{90}{(\text{Raw Score})} + \frac{100}{(\text{Max. Rating Attainable})} \times 100 = \frac{90}{(\text{Rating})}$$

14. Contract currently under/at budgeted cost? YES X NO \$1,299.99 OVERIf not at budget, specify reason: Request for Quote information was missing Technical Specification Section 0990015. Contractor strengths: The quality of the construction work performed at the project site.16. Contractor weaknesses: Some submittal deliveries were not on schedule for the District to review the packages.17. Specific problems incurred*: Rebar location of in the area of the embedded anchor bolt locations for the mounting of the gate stem base.

*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section -- contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.

18. How may these have been prevented? If template of anchor bolt locations were double checked before the concrete was poured or embedded in wet cement during curing time.19. Additional comments / recommendations: no additional comments20. Comments on SBE utilization: RFQ was sent to a SBE sheltered market, Lambert Bros. Inc. performed 100% of work.21. Currently recommend firm for future contracts/work orders of this type? X YES *NO *POSSIBLY
*(for either "No" or "Possibly", an explanation must be provided below)

Project Manager

Date

Section Administrator

Date

22. Please indicate any additional comments corresponding to Performance Indicators (Items 1-8) on Page 1 -- explain marginal/unsatisfactory performance; if either "No" or "Possibly" apply to Question 21, an explanation must be provided below. Additional sheets may be attached as necessary.

Number	Remarks
#	
#	

Definitions of Overall Ratings:

5 Exceptional 4 Very Good 3 Satisfactory 2 Marginal 1 Unsatisfactory

--- Contract Management/Procurement & SBE Section Use Only ---

Please indicate any additional comments corresponding to the numbered question on Page 1 and/or Page 2:

Number	Remarks
#	
#	

Evaluation Number/Score

Running Average Score

SBE COMPLIANT (YES/NO) Comments:

Procurement Representative

Date

SBE Representative

Date



INSTRUCTIONS: Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion. *It is especially important for the Project Manager to get in touch with a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.*

Circle the appropriate ratings for Lines 1 through 8. Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9. Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10. Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11. Provide any additional detail in Lines 12 through 21, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

Forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002289 Contractor Lambert Brothers, Inc.

Project Title: S-20F Wingwall Repairs Evaluation Period Final INTERIM ☐ FINAL ☒
If evaluating under a work order contract, specify type (i.e. GEPS, STS, IT, SAP, etc.) _____

Circle Appropriate Rating for Questions 1-8 , Total Columns in Line 9 , Total Line 9 in Line 10, Average Line 10 (divide Line 10 by the number 8) in Line 11.

Performance Indicators		Rating				
		Exceptional	Very Good	Satisfactory	Marginal	Unsatisfactory
1.	Planning and Approach	5	4	3	2	1
2.	Staff Capability	5	4	3	2	1
3.	Staff Effectiveness	5	4	3	2	1
4.	Flexibility in Meeting District Goals	5	4	3	2	1
5.	Promptness of Deliverables / Milestones / Reports	5	4	3	2	1
6.	Report Quality	5	4	3	2	1
7.	Quality of Work Completed	5	4	3	2	1
8.	Contract Under or at Budgeted Cost and Invoicing Procedures	5	4	3	2	1
9.	Individual Column Rating		20	9		
10.	Total Rating Score	30				
11.	Average Rating Score	3.625				

Complete 12 - 21 for additional detail of items 1 - 8 above. Additional space is available on Item 22 of this form.

12. Current tasks completed and/or deliverables received? X YES _____ NO

If no, reason: _____

13. Current work completed ahead/on schedule: X YES _____ NO _____ # OF DAYS LATE

If no, reason: _____

14. Contract currently under/at budgeted cost? X YES NO \$ OVER

If not at budget, specify reason: _____

15. Contractor strengths: Diligent effort exerted in performing work to ensure that project is constructed in compliance with contract plans and documents. Flexible in meeting varying project demands.16. Contractor weaknesses: None noted.

17. Specific problems incurred*:

N/A

*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section – contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.

18. How may these have been prevented? _____

19. Additional comments / recommendations: Contractor met all expectations and is recommended for future work.20. Comments on SBE utilization: 100% SBE (Lambert Brothers is an SBE).21. Currently recommend firm for future contracts/work orders of this type? X YES *NO *POSSIBLY *(for either "No" or "Possibly", an explanation must be provided below)

Mick Hine 9/27/11
 Project Manager [Signature] Date 9/27/11
 Division Director _____ Date _____

22. Please indicate any additional comments corresponding to Performance Indicators (Items 1-8) on Page 1 – explain marginal/unsatisfactory performance; if either "No" or "Possibly" apply to Question 21, an explanation must be provided below. Additional sheets may be attached as necessary.

Number	Remarks
# _____	_____
# _____	_____

Definitions of Overall Ratings:

5 Exceptional	4 Very Good	3 Satisfactory	2 Marginal	1 Unsatisfactory
---------------	-------------	----------------	------------	------------------

--- Contract Management/Procurement & SBE Section Use Only ---

Please indicate any additional comments corresponding to the numbered question on Page 1 and/or Page 2:

Number	Remarks
# _____	_____
# _____	_____

Evaluation Number/Score _____

Running Average Score _____

SBE COMPLIANT (YES/NO) Comments: _____

Bonnie Cantrell 10/11/11
 Procurement Representative _____ Date _____
SBE Prime Contractor
Colleen M. Noble 10/10/11
 SBE Representative _____ Date _____



Instructions: Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all Science & Technology Work Orders; (3) all General Engineering Professional Services Work Orders (4) all Information Technology Services Work Orders; and (4) all other Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion. *It is especially important for the Project Manager to get in touch with a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.*

Circle the appropriate ratings for Lines 1 through 8. Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9. Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10. Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11. Provide any additional detail in Lines 12 through 21, as deemed necessary, to support the ratings given in Lines 1 through 8. Additional space is available on Line 22 if needed.

Forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order.

The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, P.S.

Contract/Work Order No. 4600001864 Contractor LAMBERT BROS INC.

Evaluation Period 6-3-09 TO 3-15-2010 INTERIM ☐ FINAL ☒

Check Box, as applicable: GES ☐ GEPS ☐ STS ☐ IT SERVICES ☐

Circle Appropriate Rating for Questions 1-8, Total Columns in Line 9, Total Line 9 in Line 10, Average Line 10 (divide Line 10 by the number 8) in Line 11.

Performance Indicators		Rating				
		Exceptional	Very Good	Satisfactory	Marginal	Unsatisfactory
1.	Planning and Approach	5	4	3	2	1
2.	Staff Capability	5	4	3	2	1
3.	Staff Effectiveness	5	4	3	2	1
4.	Flexibility in Meeting District Goals	5	4	3	2	1
5.	Promptness of Deliverables / Milestones / Reports	5	4	3	2	1
6.	Report Quality	5	4	3	2	1
7.	Quality of Work Completed	5	4	3	2	1
8.	Contract Under or at Budgeted Cost and Invoicing Procedures	5	4	3	2	1
9.	Individual Column Rating	15	20			
10.	Total Rating Score	35				
11.	Average Rating Score	4.4				

Complete 12 - 20 for additional detail of items 1-8 above. Additional space is available on Item 21 of this form.

12. Current tasks completed and/or deliverables received? ☒ YES ☐ NO

If no, reason: _____

13. Current work completed ahead/on schedule: ☒ YES ☐ NO ☐ # OF DAYS LATE

If no, reason: _____



14. Contract currently under/at budgeted cost? YES ☒ NO ☐ \$ 9,525¹⁴ OVER
If not at budget, specify reason: CO FOR INSTALLATION OF TOP SEAL AT GATED CULVERT NOT SPECIFIED IN DESIGN.
15. Contractor strengths: VERY RESPONSIVE, GOOD COMMUNICATIONS, GREAT FINAL PRODUCT
16. Contractor weaknesses: NONE OBSERVED
17. Specific problems incurred: NONE
18. How may these have been prevented? N/A
19. Additional comments / recommendations: GOOD JOB
20. Currently recommend firm for future contracts/work orders of this type? ☒ YES ☐ NO ☐ POSSIBLY (explain below)

Jeffery V. McCann
Project Manager CM JEFFERY V. MCCANN
Division Director

5/13/2010
Date
5/12/10
Date

21. Please indicate any additional comments corresponding to Performance Indicators (Items 1-8) on Page 1 (note marginal/unsatisfactory performance as necessary)

Number	Remarks
#	
#	
#	

Definitions of Overall Ratings:

5 Exceptional 4 Very Good 3 Satisfactory 2 Marginal 1 Unsatisfactory

--- Contract Management and Procurement Use Only ---

Please indicate any additional comments corresponding to the numbered question on Page 1 and/or Page 2:

Number	Remarks
#	
#	
#	

Evaluation Number/Score _____

Running Average Score _____

SBE Compliance (49/10)

Comments Firm is Certified SBE

Procurement Representative

SBE Representative

Renee Burger
Date 6/29/10
Christina Helms
Date 6/29/10
800



SOUTH FLORIDA WATER MANAGEMENT DISTRICT Contractor Performance Evaluation

Instructions:
Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all Individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion.

It is especially important for the Project Manager to contact a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.

When completed, forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002596	Contractor Lambert Brothers, Inc.	Evaluation Period 3/2012 - 2/2013	<input type="checkbox"/> Interim <input checked="" type="checkbox"/> Final
Project Title G-251 Trash Rake and Wing Wall Replacement		If evaluating under a work order contract, specify type (i.e., GEPS, STS, IT, SAP, etc.)	

Check the appropriate ratings for Lines 1 through 8.
Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9.
Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10.
Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11.

Performance Indicators	Rating				
	Unsatisfactory	Marginal	Satisfactory	Very Good	Exceptional
1. Planning & Approach	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
2. Staff Capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
3. Staff Effectiveness	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
4. Flexibility in Meeting District Goals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
5. Promptness of Deliverables/Milestones/Reports	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
6. Report Quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
7. Quality of Work Completed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
8. Contract Under or at Budgeted Cost and Invoicing Procedures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
9. Individual Column Rating (Total lines 1-8)				32	
10. Total Rating Score (Total row 9)				32	
11. Average Rating Score (Divide line 10 by the number 8)	4.0				

In Lines 12 through 21, provide any additional detail, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

12.	Current tasks completed and/or deliverables received? If no, reason:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
13.	Current work completed ahead/on schedule? If no, number of days late: <u>84</u> and reason: owner directed change orders	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
14.	Contract currently under/at budgeted cost? If not at budget, specify amount over \$ <u>46,906.07</u> and reason: owner directed change orders	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
15.	Contractor strengths: Contractor has ability to deal with changes in the field. Knowledgeable and efficient staff.									
16.	Contractor weaknesses:									
17.	Specific problems incurred*:									
*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section. Contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.										
18.	How may these have been prevented?									
19.	Additional comments/recommendations:									
20.	Comments on SBE utilization:									
21.	Currently recommend firm for future contracts/work orders of this type? If "No" or "Possibly", an explanation must be provided in Line 22 below.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Possibly								
<table border="1"> <tr> <td>Project Manager (sign)</td> <td>Date</td> <td>Section Administrator (sign)</td> <td>Date</td> </tr> <tr> <td><i>Margaret Mahon</i></td> <td>4/10/13</td> <td><i>M. Mahon</i></td> <td>4/14/13</td> </tr> </table>			Project Manager (sign)	Date	Section Administrator (sign)	Date	<i>Margaret Mahon</i>	4/10/13	<i>M. Mahon</i>	4/14/13
Project Manager (sign)	Date	Section Administrator (sign)	Date							
<i>Margaret Mahon</i>	4/10/13	<i>M. Mahon</i>	4/14/13							
22. Please indicate any additional comments corresponding to Performance Indicators (Lines 1-8) on Page 1 – explain marginal/unsatisfactory performance, if either "No" or "Possibly" apply to Question 21, an explanation must be provided here. Additional sheets may be attached if necessary.										
Number	Remarks									
#										
#										



SOUTH FLORIDA WATER MANAGEMENT DISTRICT Contractor Performance Evaluation

Instructions:

Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion.

It is especially important for the Project Manager to contact a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even when this is not within the normal review cycle. In the event the Average Rating Score is "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.

When completed, forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002753	Contractor Lambert Bros Inc	Evaluation Period 12/3/2012 - 6/15/2013	<input type="checkbox"/> Interim <input checked="" type="checkbox"/> Final
Project Title Pump Station S-4 Roof Replacement			
If evaluating under a work order contract, specify type (i.e., GEPS, STS, IT, SAP, etc.)			

Check the appropriate ratings for Lines 1 through 8.

Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9.

Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10.

Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11.

Performance Indicators	Rating				
	Unsatisfactory	Marginal	Satisfactory	Very Good	Exceptional
1. Planning & Approach	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2. Staff Capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3. Staff Effectiveness	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4. Flexibility in Meeting District Goals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5. Promptness of Deliverables/Milestones/Reports	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6. Report Quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
7. Quality of Work Completed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
8. Contract Under or at Budgeted Cost and Invoicing Procedures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
9. Individual Column Rating (Total lines 1-8.)			18	8	
10. Total Rating Score (Total row 9.)	26				
11. Average Rating Score (Divide line 10 by the number 8.)	3.25				

In Lines 12 through 21, provide any additional detail, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

12. Current tasks completed and/or deliverables received? If no, reason:

☒ Yes
☐ No

13. Current work completed ahead/on schedule? If no, number of days late: _____ and reason:

☒ Yes
☐ No

14. Contract currently under/at budgeted cost? If not at budget, specify amount over \$2,750.00 and reason: Contractor suggested a design option to increase the final slope on half the roof. District elected to approve change to increase roof slope. ☐ Yes ☒ No

15. Contractor strengths: The roofing subcontractor performed good quality work and completed construction activities very quickly. Contractor prepared for an attended progress meetings.

16. Contractor weaknesses: Preparation of submittals and cost-loaded schedule proceeded slowly.

17. Specific problems incurred*:

*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section. Contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.

18. How may these have been prevented?

19. Additional comments/recommendations:

20. Comments on SBE utilization:

21. Currently recommend firm for future contracts/work orders of this type? If "No" or "Possibly", an explanation must be provided in Line 22 below.

Project Manager (sign) *[Signature]* Date *7/3/2013* Section Administrator (sign) *[Signature]* Date *7/18/13* ☒ Yes ☐ No ☐ Possibly

22. Please indicate any additional comments corresponding to Performance Indicators (Lines 1-8) on Page 1 - explain marginal/unsatisfactory performance; if either "No" or "Possibly" apply to Question 21, an explanation must be provided here. Additional sheets may be attached if necessary.

Number Remarks

#

#

CONTRACT MANAGEMENT/PROCUREMENT & SBE SECTION USE ONLY

Please indicate any additional comments corresponding to the numbered/question on Page 1 and/or Page 2

Number Remarks

#

#

Evaluation Number/Score

Running Average Score

Procurement Representative (sign)

[Signature]

Date

7/16/13



SOUTH FLORIDA WATER MANAGEMENT DISTRICT Contractor Performance Evaluation

Instructions:

Performance evaluations shall be completed by the Project Manager for the following: (1) all Contracts; (2) all individual Work Orders with a term of 6 months or more. At a minimum, the Project Manager shall complete performance evaluations at the mid-point of the project term or at more frequent intervals as required by the Work Order and at the time of Work Order or Contract completion.

It is especially important for the Project Manager to contact a Procurement representative to advise of any performance issues so that Procurement can assist with efforts to bring performance back to acceptable standards. It is equally important to complete this form whenever any of the performance indicators are either "marginal" or "unsatisfactory" even after reasonable efforts have been taken by the District to improve performance, the Project Manager shall coordinate with Procurement to determine what action needs to be taken under the circumstances.

When completed, forward the evaluation form to Procurement. Procurement will keep track of the Average Rating Scores (Line 11) for all evaluations completed for the entire term of the Contract/Work Order. The completed Performance Evaluation form will be retained in Procurement and will be available as a record of current performance for use in the evaluation process of future solicitations released by the District. The completed evaluation is available to the contractor upon a Public Records request pursuant to Chapter 119, F.S.

Contract/Work Order No. 4600002752	Contractor Lambert Bros Inc	Evaluation Period 12/3/2012 - 6/15/2013	<input type="checkbox"/> Interim <input checked="" type="checkbox"/> Final
Project Title Pump Station S-3 Roof Replacement		If evaluating under a work order contract, specify type (i.e., GEPS, STS, IT, SAP, etc.)	

Check the appropriate ratings for Lines 1 through 8.
Sum the individual ratings, by column, to produce the Individual Column Ratings on Line 9.
Sum the Individual Column Ratings in Line 9 to produce the Total Rating Score on Line 10.
Divide the Total Rating Score in Line 10 by the number 8 (the number of performance indicators in Lines 1-8) to produce the Average Rating Score in Line 11.

Performance Indicators	Rating				
	Unsatisfactory	Marginal	Satisfactory	Very Good	Exceptional
1. Planning & Approach	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2. Staff Capability	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3. Staff Effectiveness	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4. Flexibility in Meeting District Goals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5. Promptness of Deliverables/Milestones/Reports	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6. Report Quality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
7. Quality of Work Completed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
8. Contract Under or at Budgeted Cost and Invoicing Procedures	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> 5
9. Individual Column Rating (Total lines 1-8.)			18	8	
10. Total Rating Score (Total row 9.)					26
11. Average Rating Score (Divide line 10 by the number 8.)					3.25

In Lines 12 through 21, provide any additional detail, as deemed necessary, to support the ratings given in Lines 1 through 8 as well as any additional comments regarding SBE utilization on Line 20. Additional space is available on Line 22 if needed.

12. Current tasks completed and/or deliverables received? If no, reason:

☒ Yes
☐ No

13. Current work completed ahead/on schedule? If no, number of days late: _____ and reason:

☒ Yes
☐ No

14. Contract currently under/at budgeted cost? If not at budget, specify amount over \$2,000.00 and reason: After award the District discovered a downspout and leader box missing. Change order was issued at the District's request

☐ Yes
☒ No

15. Contractor strengths: The roofing subcontractor performed good quality work and completed construction activities very quickly. Contractor prepared for an attended progress meetings.

16. Contractor weaknesses: Preparation of submittals and cost-loaded schedule proceeded slowly.

17. Specific problems incurred:

*Note: Problems concerning loss of keys to District structures/controlled areas should be included in this section. Contact Mary Margaret Mahon for detailed history at extension 6238. Repeated loss of keys may lead to deeming a contractor as non-responsible in conjunction with future solicitations.

18. How may these have been prevented?

19. Additional comments/recommendations:

20. Comments on SBE utilization:

21. Currently recommend firm for future contracts/work orders of this type? If "No" or "Possibly", an explanation must be provided in Line 22 below.

Project Manager (sign) *[Signature]* Date *7/3/2013* Section Administrator (sign) *[Signature]* Date *7/8/13* ☒ Yes
☐ No
☐ Possibly

22. Please indicate any additional comments corresponding to Performance Indicators (Lines 1-8) on Page 1 – explain marginal/unsatisfactory performance; if either "No" or "Possibly" apply to Question 21, an explanation must be provided here. Additional sheets may be attached if necessary.

Number Remarks

#

#

CONTRACT-MANAGEMENT/PROCUREMENT & SBE SECTION USE ONLY

Please indicate any additional comments corresponding to the numbered question on Page 1 and/or Page 2.

Number Remarks

#

#

Exclusion Number/Score

Running Average Score

Procurement Representative (sign) *[Signature]* SBE compliant ☒ Yes ☐ No Comments: *SBE Prime Contractor* Date *7/14/13* SBE Representative (sign) *[Signature]* Date *7/14/13*



*Operates the statewide
Turnpike System as
part of the Florida
Department of
Transportation*

CHARLIE CRIST
Governor

STEPHANIE C. KOPELOUSOS
Secretary of Transportation

KEVIN J. THIBAUT, P.E.
Interim Executive Director

Turnpike Operations
Milepost 65, Florida's Turnpike
(at Pompano Service Plaza)
Pompano Beach, FL 33069

Mailing Address:
P.O. Box 9828
Ft. Lauderdale, FL 33310

Tel: 954.975.4855

www.floridasturnpike.com

July 16, 2010

Mr. Gregg Lambert
Lambert Bros. Inc
823 N.W. 57th Street
Ft. Lauderdale, Florida 33309

Re: Contract: PR4366556
Fin No. 190775-1-52-01
Relocation of Triple Wide Trailer
Ft. Pierce

Dear Mr. Lambert:

Attached is your Final Contractor Field Performance Report for Contract PR4366556, Relocation of Triple Wide Trailer.

If you have questions about this process, please call me at (954) 934 – 1261.

Sincerely,

Tooraj Nowzamani
Business Operation Analyst
For Santiago Alvarez
Facilities and Telecommunications Maintenance Administrator

AA Attachment (Initial Contractor Field Performance Report)

cc: Contract File
Contract Manager
Project Manager



*Operates the statewide
Turnpike System as
part of the Florida
Department of
Transportation*

CHARLIE CRIST
Governor

STEPHANIE C. KOPELOUSOS
Secretary of Transportation

KEVIN J. THIBAUT, P.E.
Interim Executive Director

Turnpike Operations
Milepost 65, Florida's Turnpike
(at Pompano Service Plaza)
Pompano Beach, FL 33069

Mailing Address:
P.O. Box 9828
Ft. Lauderdale, FL 33310

Tel: 954.975.4855

www.floridasturnpike.com

July 2, 2010

Mr. Gregg Lambert
Lambert Bros. Inc
823 N.W. 57th Street
Ft. Lauderdale, Florida 33309

Contract: PR4366556
FPN #: 190775-1-52-01
Relocation of Triple Wide Trailer
Ft. Pierce

Dear Mr. Lambert:

Attached is your Initial Contractor Field Performance Report for Contract PR4366556, Relocation of Triple Wide Trailer. The process for finalizing this report is as follows:

1. If you agree with the Contract Field Performance Report, please sign on the bottom of page two and send it back to me at Department of Transportation, Turnpike Operation Center, P O Box 9828, Ft. Lauderdale, Florida 33310-9828, within ten (10) calendar days from the receipt of this letter. The Initial Contract Field Performance Report will become the Final Contract Field Performance Report.
2. If you desire a meeting with the Contract Manager and Regional Maintenance Manager to discuss your rating, please submit your written request to Steve Wille at Department of Transportation, West Palm Beach Office, 6401 Okeechobee Blvd., West Palm Beach, Florida 33417 or at fax number (561) 683-9043. Your written request for a meeting must be received by the Department within 10 calendar days from the receipt of this letter. If a meeting is not requested, or you fail to attend the meeting that is scheduled to discuss this rating, the rating will become the Final Contract Field Performance Report.
3. If you are not satisfied after the meeting, you can request that Santiago Alvarez, Facilities and Telecommunications Maintenance Administrator, review the rating and make a determination on those issues in dispute. You must provide any information or data relevant to the disputed rating to the Contract Manager within five calendar days of your request for review of the issues in dispute. The decision of the Facilities and Telecommunications Administrator will be final.

If you have questions about this process, please call me at (954) 934 -1265.

Sincerely,


Benito Hernandez
Capital Improvement Procurement Administrator
AA/ Attachment (Initial Contractor Field Performance Report)

ENGINEERS REMARKS SUPPORTING GRADES

Work was completed on time, with quality workmanship

(Attach Additional Remarks)

Submitted By:

Project Manager

6/30/2010

Date

Reviewed By:

Cost Center Manager

7-2-10

Date

Reviewed By:

Department Head

Date

CONTRACTOR

(Signature does not indicate concurrence)

Date

COPIES:

Contractor

Project File

Department Head - Original

Cost Center Manager

**CONTRACTOR
FIELD PERFORMANCE REPORT**375-020-43
MAINTENANCE
08/09☐ Periodic☒ Initial JK☒ Final**RATING****90.00**Date: June 30, 2010Lambert Bros Construction

Contractor Name

FIN. Project ID's

Additional FIN Project ID's (if applicable)

PR4366556\$22,787.00

Contract No.

Original Contract Amount

Relocation of Triplewide Trailer

Type of Work

Grading Instructions10 - Outstanding
9 - Excellent8 - Good
7 - Satisfactory5 - Unsatisfactory
3 - Poor

1. Prosecution, control and timely completion of the work.
2. Overall quality control and compliance with contract.
3. On-Site supervision and staffing (no. and skill level).
4. Quantity, suitability and effectiveness of equipment.
5. Maintenance of traffic operations.
6. Interface with travelling public and adjacent property owners.
7. Effectiveness of general management.
8. Furnishing of required documents and reports.
9. Cooperation with Department personnel.
10. Final clean-up of work site.

Grade9.09.09.09.09.09.09.09.09.09.0

Raw Score =

90.0**Note:**

1. If all items are graded, the maximum rating attainable is (100).
2. If any items do not apply mark them N/A and use the following formula:

Max Rating Attainable = $100 - (\underline{10} \text{ (Max. grade per item)} \times \underline{0} \text{ (No. of items marked N/A)}) = (\underline{100.00} \text{ Max Rating Attainable})$

Performance Rating = $\frac{90}{\text{(Raw Score)}} \div \frac{100}{\text{(Max. Rating Attainable)}} \times 100 = \frac{90}{\text{(Rating)}}$

ENGINEERS REMARKS SUPPORTING GRADES

Work was completed on time, with quality workmanship

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
CONTRACTOR
FIELD PERFORMANCE REPORT

FINAL

Date: 7/16/10 Sign: [Signature]

- ☒ Contractor has elected not to sign report.
☒ Contractor has not requested any meetings.
☐ Contractor did not attend requested meetings.

(Attach Additional Remarks)

Signature: [Signature]

Date: 7/16/10

CONTRACTOR
(Signature does not indicate concurrence) Date

COPIES:
Contractor
Project File
Department Head - Original
Cost Center Manager

Submitted By: [Signature]
Project Manager

6/30/2010
Date

Reviewed By: [Signature]
Cost Center Manager

7-2-10
Date

Reviewed By: [Signature]
Department Head

7/19/2010
Date



*Operates the statewide
Turnpike System as
part of the Florida
Department of
Transportation*

JEB BUSH
Governor

DENVER J. STUTLER, JR.
*Secretary of
Transportation*

JAMES L. ELY
Executive Director

Turnpike Headquarters:
MP 65, Florida's Turnpike
Pompano Service Plaza
Ft. Lauderdale, FL 33310-9828

Mailing Address:
P.O. Box 9828
Ft. Lauderdale, FL 33310-9828

Tel: 954.975.4855

www.floridasturnpike.com

February 23, 2006

Mr. Gregg Lambert, President
Lambert Bros. Inc.
823 NW 57th Ave.
Ft. Lauderdale, FL 33309

**Re: Letter of Recommendation
Various Projects, Florida's Turnpike**

To whom it may concern:

Lamberts Bros. Inc. has completed a number of projects for Florida's Turnpike and has performed admirably on all of them. Lambert's staff and their sub-contractors knew the job requirements of each project and completed them with the highest degree of workmanship, professionalism, and timeliness.

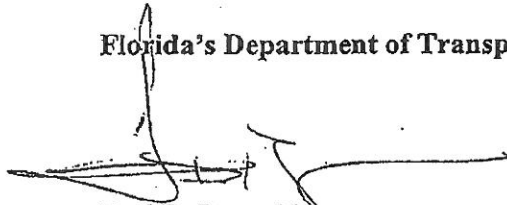
On our latest project at NW 57th (Red Road) the Turnpike employed an outside consultant to perform inspection services. Both, the inspector and the Designer-of-Record were impressed with the level of detail and adherence to the contract documents displayed by Lambert Bros. It was readily apparent that Lambert Bros. is thoroughly versed in all aspects of the construction process and is knowledgeable of the DOT rules, regulations, and guidelines. When any conflict arose, Lambert's staff reported the matter immediately and sought a mutually agreeable solution.

The schedule and budget were met and the toll plaza staff reported no negative feed back, which is the ultimate testimony.

I look forward to the next project and, once again I would like to congratulate Lambert Bros. Inc. on a job well done.

Sincerely,

Florida's Department of Transportation-Turnpike Enterprise



Fred D. Reynolds
Capital Improvements Manager
FDR/



4780 North State Road 7 • Lauderdale Lakes, Florida 33319 • 954-739-1114 • 954-535-0407 fax • 954-735-4371 TDD • www.bchaf.org

August 28, 2006

State of Florida
Department of Military Affairs
Attn: Lt. Colonel William H. Harding
Post Office Box 1008
St. Augustine, Florida 32085

Reference: LAMBERT BROS. INC.
Subject: Headway Office Build-out for Broward County Housing Authority

Dear Lt. Colonel Harding:

This letter is to advise the Military, and you, of the substantial completion of the contract the Broward County Housing Authority has with Lambert Bros., Inc. referencing the above noted subject.

Lambert Bros. Inc. was contracted to do the \$657,670 office build-out for BCHA starting in January 2006. This contract would have been complete in April, well within the time frame allocated, had it not been for the delay encountered with the Broward County Office of Waste Water Management and Office of Environment Services and their long process exhibited in issuing a permit for the water-tap needed to complete the fire hydrant hook-up to our newly installed sprinkler system. This delay is the only outstanding portion of this contract for completion and is not the shortcoming of Lambert. The set back culpability is due to BCWWS. They have clearly stated that it is a 4-6 month period for the complete permit application to be processed. This did not stop the issuance of a Temporary Certificate of Occupancy so we could move into our new surroundings.

I would be amiss if I did not cite the professionalism and blue-ribbon workmanship displayed throughout the adjudication of this contract by Lambert and staff. I would strongly recommend their services to any firm, commercial owners, private residents, as well as any branch of the government and look forward to working with the "Lambert Team" in the future.

Please feel free to contact me at 954-739-1114x2327 should you require any additional information.

Sincerely,

BARBARA SEGAL
Capital Fund Manager



City of Lauderdale

Finance Department

September 18, 2006

Mr. Greg Lambert
Lambert Bros, Inc
823 NW 57th Street
Fort Lauderdale, FL 33309

Dear Sir:

I would like to take this opportunity to thank you and your staff for the excellent service provided during the recent Renovation of temporary office space for the City of Lauderdale.

Your quick response the day after hurricane Wilma damaged City Hall, renovating store front into offices and converting leased space into temporary city offices was truly a challenge.

Let me commend your staff particularly Paul Dombro, Superintendent, for their patience and professionalism in getting the offices ready in order to continue serving the residents of the city.

On behalf of the City of Lauderdale, thank you for a job well done.

Sincerely,

Ruby Levy, CPPB
Purchasing Manager



Venice of America

CITY OF
FORT LAUDERDALE

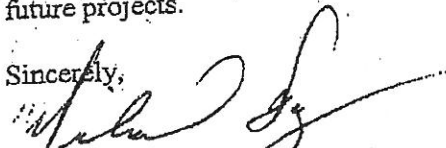
Date: 6-3-04

Attn. Greg Lambert
Lambert Bros., Inc.
1886 B 79th Street Causeway
North Bay Village, Fl., 33141

Re: Bass Park Playground -- Project 10598

Greg, I just wanted to let you know how much we appreciate the great job you and your firm did with the construction of the Bass Park Playground Project. On rare occasions, we have the opportunity of working with truly professional construction firms such as yours. You and your staff were great to work with and were complimented many times during the course of construction by Parks staff as well as the local neighborhood representatives. The fact that you were on time and within budget is a credit to your firm. Thanks for the great job, and we look forward to working with you and your staff on future projects.

Sincerely,



Michael Fay, Landscape Architect
Project Manager

PUBLIC SERVICES DEPARTMENT (ENGINEERING AND ARCHITECTURAL SERVICES)
100 NORTH ANDREWS AVENUE, FORT LAUDERDALE, FLORIDA 33301

TELEPHONE (954) 828-5772

ENGINEERING FAX (954) 828-5074 • ARCHITECTURE FAX (954) 828-5070
www.ci.fort-lauderdale.fl.us

EQUAL OPPORTUNITY EMPLOYER

PRINTED ON RECYCLED PAPER





Florida Department of Transportation

JEB BUSH
GOVERNOR

JOSE ABREU
SECRETARY

April 1, 2003

Mr. Greg Lambert, President
Lambert Brothers, Inc.
1886B - 79th Street Causeway
North Bay Village, FL 33141

Dear Mr. Lambert:

I would like to express my gratitude for the professional way that your company conducted the work on the project, Commercial Boulevard Toll Booth Replacement, for the Florida Department of Transportation. The personal effort and cooperation by you and your sub-contractors made this project successful. Thank you for a job well done!!

Sincerely,

Chuck Freeman
Project Manager



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/03/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Frank H. Furman, Inc. 1314 East Atlantic Blvd. P. O. Box 1927 Pompano Beach FL 33061		CONTACT NAME: Jerri Moor PHONE (A/C, No, Ext): (954) 943-5050 FAX (A/C, No): (954) 942-6310 E-MAIL ADDRESS: jerri@furmaninsurance.com	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Continental Insurance Company	
		INSURER B: Transportation Ins Co (zx)	
		INSURER C: Axis Surplus Insurance Co	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 19-20GL/Auto/XS **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

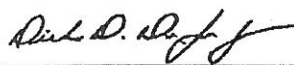
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y	Y	9780649	10/25/2019	10/25/2020	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input checked="" type="checkbox"/> Marine Services Liability						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						PERSONAL & ADV INJURY \$ 1,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			C6016235781	10/25/2019	10/25/2020	GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> HIRED AUTOS ONLY						Gen Aggregate Limit \$ 2,000,000
	<input type="checkbox"/> OTHER:						COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB			P00100005093402	10/25/2019	10/25/2020	BODILY INJURY (Per person) \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						BODILY INJURY (Per accident) \$
	DED \$ RETENTION \$						PROPERTY DAMAGE (Per accident) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						Medical payments \$ 5,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				EACH OCCURRENCE \$ 3,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						AGGREGATE \$ 3,000,000
							PER STATUTE \$ OTH-ER \$
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is included as Additional Insured and waiver of Subrogation applies for General Liability when required by written contract.

CERTIFICATE HOLDER

CANCELLATION

City of Lauderhill Building Permit Department 5581 West Oakland Park Blvd Lauderhill FL 33313	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/3/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER FRANK H FURMAN INC. 1314 EAST ATLANTIC BLVD POMPAN BEACH FL 33060	CONTACT NAME: DIRK D. DEJONG PHONE (A/C, No, Ext): (954) 943-5050 E-MAIL: DIRK@FURMANINSURANCE.COM ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: FWCJUA INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	FAX (A/C, No): NAIC #
INSURED LAMBERT BROS INC 5501 NORTH POWERLINE ROAD FORT LAUDERDALE FL 333090000 FEIN: 651005943		

COVERAGES

CERTIFICATE NUMBER: 2003030041

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	9F779771	8/10/2019	8/10/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000.00 E.L. DISEASE - EA EMPLOYEE \$ 500,000.00 E.L. DISEASE - POLICY LIMIT \$ 500,000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

City of Lauderhill Building Permit Department 5581 West Oakland Park Blvd Lauderhill FL 33313 Phone Number: (954) 491-9425	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/25/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER FRANK H FURMAN INC. 1314 EAST ATLANTIC BLVD POMPANO BEACH FL 33060	CONTACT NAME: DIRK D. DEJONG PHONE (A/C, No, Ext): (954) 943-5050 FAX (A/C, No): E-MAIL ADDRESS: DIRK@FURMANINSURANCE.COM
INSURED LAMBERT BROS INC 5501 NORTH POWERLINE ROAD FORT LAUDERDALE FL 333090000 FEIN: 651005943	INSURER(S) AFFORDING COVERAGE INSURER A: FWCJUA INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2002250024

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	9F779771	8/10/2019	8/10/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000.00 E.L. DISEASE - EA EMPLOYEE \$ 500,000.00 E.L. DISEASE - POLICY LIMIT \$ 500,000.00

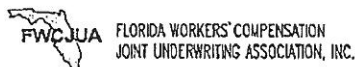
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

State of Florida, Dept. of Transportation Florida's Turnpike Enterprise Milepost 263 Florida's Turnpike Building 5315 Turkey Lake Service Plaza Ocoee FL 34761 Phone Number: (954) 942-6310	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY**

INFORMATION PAGE WC 00 00 01 (A)

POLICY NUMBER: (6FR13UB-9F77977-1-19)

RENEWAL OF (6FR13UB-9F77977-1-18)

INSURER: FLORIDA W.C. JUA

NCCI CO CODE: 80179

1.

INSURED:

LAMBERT BROS INC
5501 NORTH POWERLINE ROAD
FORT LAUDERDALE FL 33309

PRODUCER:

FRANK H FURMAN INC
PO BOX 1927
POMPANO BEACH FL 33060

Insured is a A CORPORATION

Other work places and identification numbers are shown in the schedule(s) attached.

2. The policy period is from 08-10-19 to 08-10-20 12:01 A.M. at the Insured's mailing address.

3. A. WORKERS COMPENSATION INSURANCE: Part One of the policy applies to the Workers Compensation Law of the state(s) listed here:

FL

B. EMPLOYERS LIABILITY INSURANCE: Part Two of the policy applies to work in each state listed in Item 3.A. The limits of our liability under Part Two are:

Bodily Injury by Accident:	\$	500000	Each Accident
Bodily Injury by Disease:	\$	500000	Policy Limit
Bodily Injury by Disease:	\$	500000	Each Employee

C. OTHER STATES INSURANCE: Part Three of the policy applies to the states, if any, listed here:

SEE ENDORSEMENT FWCJUA 03 01

D. This policy includes these endorsements and schedules:

SEE LISTING OF ENDORSEMENTS - EXTENSION OF INFO PAGE

4. The premium for this policy will be determined by our Manual of Rules, Classifications, Rates and Rating Plans. All required information is subject to verification and change by audit. ANNUALLY.

DATE OF ISSUE: 08-19-19 MC

ST ASSIGN: FL

OFFICE: FLORIDA WC JUA 821

PRODUCER: FRANK H FURMAN INC

2649J

Page 1 of 1

WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY

INFORMATION PAGE WC 00 00 01 (A)

POLICY NUMBER: (6FR13UB-9F77977-1-19)

CLASSIFICATION SCHEDULE:

CLASSIFICATIONS	CODE NO	PREMIUM BASIS TOTAL ESTIMATED ANNUAL REMUNERATION	RATES PER \$100 OF REMUNERATION	ESTIMATED ANNUAL PREMIUM
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SEE EXTENSION OF INFORMATION PAGE - SCHEDULE WC 00 00 01 (A)

NAICS: 236220

TOTAL ESTIMATED ANNUAL STANDARD PREMIUM	\$	28388
PREMIUM DISCOUNT		NONE
0900-09 EXPENSE CONSTANT		160
TERRORISM		49
TIER 3 SURCHARGE		12011
FWCJUA FLAT FEE		475
TOTAL ESTIMATED PREMIUM		41083
TOTAL AMOUNT DUE		41083

Minimum Premium: \$ 1900

EMPLOYERS LIABILITY MINIMUM: \$ 75

ST ASSIGN: FL

DATE OF ISSUE: 08-19-19 MC
OFFICE: FLORIDA WC JUA 821
PRODUCER: FRANK H FURMAN INC

2649J

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