

**ATTACHMENT E**  
**Bid Form and Required Attachments**  
(must attach to your bid)

**BID FORM**

Manatee County is accepting bids from contractors for the rehabilitation of the property located at \_\_\_\_\_ The final selection may not be based solely on price, but may include other criteria.

**CONTRACTOR'S BID:**

Having read the Work Write-Up # \_\_\_\_\_ dated \_\_\_\_\_, I do hereby propose to furnish all labor, equipment, tools, materials and services in accordance with the work write-up for the sum of \_\_\_\_\_ (\$ \_\_\_\_\_), as fully detailed in the Work Write-up bid. All work included in this bid will be completed within \_\_\_\_\_ days of the issuance of a Notice to Proceed.

We the undersigned hereby declare that we have carefully reviewed the bid documents, and with full knowledge and understanding of the aforementioned herewith submit this bid, meeting each and every specification, term and condition contained in this invitation to bid.

We understand that the bid specifications, terms and conditions in their entirety shall be made a part of any agreement or contract between the Property Owner and the successful bidder and their subcontractors. Failure to comply shall result in contract default, whereupon, the defaulting contractor shall be required to pay for any and all re-procurement cost, damages, and attorney fees as incurred by Property Owner.

Date of Site Visit \_\_\_\_\_

Name of Representative Who Visited Site \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Federal Identification #: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Address:

City, State, Zip:

**CONTRACTORS: Submit bids and upload all required documents in Neighborly.**

Attachments are listed below. This will also serve as a checklist/reminder of those documents which need to be submitted/uploaded with your bid. Attachments are listed as Mandatory or Informational/Conditional.

<u>Document</u>	<u>Mandatory</u>	<u>Informational/ Conditional</u>
A Bid Template	X	
B Proof of Valid License	X	
C Drug Free Workplace	X	
D Public Contractors-Environmental Crime	X	
E Contractor's Questionnaire	X	
F MBE/WBE Certification - <i>(To be supplied by contractor if applicable)</i>		X
G Proof of Insurance	X	
H Proof of Registration with Suncoast Workforce	X	
I Byrd Anti-Lobbying Certificate <i>(Must be submitted with any Bid Over \$100,000K)</i>	X	
J Bid Bond (5% of Total Bid) <i>(Must be submitted with any Bid Over \$100,000K)</i>	X	
K Authorized Agent Form <i>(If someone other than the Signator of the bid form is attending info conference)</i>	X	
L Addendum Form <i>(If someone other than the</i>		X

Reminder also upload a separate page detailing any deviation from technical specifications, if any.

**Document A**  
**Bid Template**  
(must attach to your bid)

## Location: General Requirements

General Requirements	Quantity	Units	Total
<b>1 - General Requirements All (1.00100)</b>			

Community Development Division assumes no responsibility or liability. All work specified is not conclusive. All measurements, and quantities in this work write-up are approximate. Prior to bid submittal, all contractors are required to verify exact measurements, size and quantities; and to know job conditions, and to immediately notify the Community Development Division of any other necessary work to achieve quality finish products that meet or exceed applicable specs and codes prior to contract signing. The specified items in this work write-up DO NOT preempt any current applicable codes enforced by the permitting authority having jurisdiction.

Contractor shall provide all required sketches and/or drawings as required by the construction permitting authority having jurisdiction. Contractor shall obtain, pay for and post on site all permits and licenses necessary to complete this project. Contractor and Subcontractors must have current license required by the State, County and City.

Contractor shall provide on-site container for construction debris removal.

Contractor shall use only materials with low or no Volatile Organic Compounds (VOCs) on finishes, glues, adhesives, solvents, and cleaners to minimize occupant exposure to chemicals. Interior paint shall have no VOCs.

NO FLOOR COVERING SHALL BE INSTALLED UNTIL ALL OTHER WORK HAS BEEN COMPLETED AND APPROVED BY THE OWNER AND COMMUNITY DEVELOPMENT DIVISION. Unless otherwise specified, all materials shall be new and shall match existing as to size, style, color and method of installation. All subflooring and underlayment shall be well secured, dry, clean, level, and free of cracks, depressions, voids and bumps before installation of finished floor covering. all applicable codes and/or manufacturer's specs shall apply.

Code compliance: Contractor shall comply with local and Florida Building Codes.

Contractor to preform work specified in Work Write-up in a high-quality workmanlike manner using specified materials or approved equals. Materials must also 1) be high quality 2) be installed in accordance with manufacturer's specs and 3) meet requirements of rehab inspector.

Contractor shall take steps to protect Building and contents from damage during project. Contractor is advised to use drop cloths to protect furniture, appliances and other contents and components. Contractor shall move furniture and appliances out of and back into work area once work is complete. Contractor not to leave furniture, appliances, or other Building contents unprotected outside Building during job.

Contractor responsible for professionally repairing building and site components damaged as a result or construction activity.

All new electrical wiring and plumbing lines are to be installed concealed from view inside stud walls, under floor and in attics. Unless otherwise approved by Building Owner and HDC Inspector.

All exposed exterior wall cavities that are to be enclosed by a new wall surface material are to have code required insulation installed in the cavity before the new wall surface material is installed.

Contractor to take steps necessary to reduce and contain airborne dust created during construction, demolition and removal of defective paint. Wet scrape if removing defective paint. DO NOT use electric sander or torches if removing paint. Contractor and workers encouraged to wear protective clothing and respirators and to follow hygiene procedures approved by OSHA.

The customer is responsible for moving personal items from work areas, for boxing-up and protecting any breakable items, and for removing excessive amounts or personal property from the Building before construction begins.

The customer is responsible for helping the contractor by keeping the Building and Parking Area orderly during construction.

The customer is responsible for removing all junk, trash and debris from the Property prior to construction. The customer agrees to keep Property orderly following project.

The customer shall cause to have all non-current licensed and /or inoperative vehicles and vehicle parts removed from the premises prior to the commencement of the rehab construction.

**2 - PERMITS AND LICENSES** (1.00250)

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Contractor shall obtain, pay for and post on site all permits and licenses necessary to complete this project. Contractor and subcontractors must have current licenses required by the State, County and City.

**3 - PLACE A JOB SIGN IN FRONT YARD** (1.01250)

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Contractor must securely position a project sign in the front of Building and within view of the street. It is the Contractor's responsibility to pick a sign up from, and return it to, the Program Administrator. Signs to be returned in good condition.

**4 - CONTRACTOR TO VERIFY MEASUREMENTS, SIZES & QUANTITIES** (1.01500)

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All measurements, sizes and quantities in this Work Write-Up are APPROXIMATE. The Contractor is responsible for verifying exact measurements, sizes and quantities prior to submitting a quote.

**5 - GENERAL WARRANTY** (1.02250)

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Materials installed and work performed shall have a one year Contractor warranty from the date of final acceptance of the work by the Property Owner and Program Administrator. Refer to project Contract for specific requirements concerning warranty.

**Subtotal for General Requirements**

## Location: Roof & Attic

Roof & Attic	Quantity	Units	Total
<b>6 - GENERAL ROOF WORK</b> (35.00000)		Ea	

You will need a structural Engineer to sign and seal truss repairs or replacement, there appears to be two trusses with damage. The price for this item is only the cost for the Engineer not to include the repair.

<b>7 - REPLACE UP TO 10% OF ROOF DECKING</b> (35.03750)	15	Ea	
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Replace up to 10% of any rotten, badly warped or broken roof decking and nailers. Material shall match remaining material as closely as possible. Roofs requiring more than 10% decking shall be covered through a Change Order. Call Program Administrator for Compliance Inspection after installing new decking and nailers, and before replacing additional decking and nailers. NOTE if this item is not needed it will be credited back to the project with a change order.

<b>8 - INSTALL NEW SHINGLES ON ROOF DECKING</b> (35.09260)			
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INSTALL NEW SHINGLES ON ROOF DECKING. NOTIFY REO HOUSING & COMMUNITY DEVELOPMENT SPECIALIST TWO WORKING DAYS PRIOR TO DATE OF ROOF TEAR OFF. Roofer must provide County Building Inspections with Roofer Affidavit. Remove all existing shingles and underlayment down to roof decking. Install a secondary water barrier and aluminum drip edge. Install Ridge Vent or appropriate style venting for roof style SHINGLE MUST BE A MINIMUM TWENTY FIVE YEAR RATED, HIGH EMISSIVE ROOFING SHINGLE. Installation shall adhere to local jurisdiction's codes. **\*\*NOTE\*\* PRICE IS TO INCLUDE UP TO THREE SHEETS OF ROOF SHEATHING. \*\* NOTE\*\* This is for the parapet roof area.**

<b>9 - INSTALL NEW COLD APPLIED MEMBRANE ROOFING</b> (35.09800)	4,800	SF	
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Apply TPO , PVC or an equivalent type of roofing material. Include with your bid type and brand of roofing quoted. Provide a 10 year written performance guarantee.

**Subtotal for Roof & Attic**



## Location: Electrical

Electrical System	Quantity	Units	Total
<b>10 - CHECK/TEST/REPAIR ELECTRICAL OUTLET/SWITCH/FIXTURE CONNECTIONS</b> (80.00010)			

CHECK/TEST/REPAIR ALL ELECTRICAL OUTLET/SWITCH/FIXTURE CONNECTIONS INTERIOR AND EXTERIOR OF HOME. All receptacles, switches, fixtures, HVAC panel(s) - ground and bond, water heater and all connections should be within the local code that is appropriate for the year the structure was built. All interior and exterior wiring shall be utilized and should be checked, tested, repaired, and/or replaced as needed, and should be done according to the local code that is appropriate for the year the structure was built

<b>11 - REPLACE EXISTING CEILING LIGHT FIXTURE WITH A NEW FIXTURE</b> (80.02300)			
REPLACE EXISTING CEILING LIGHT FIXTURE WITH A NEW LIGHT FIXTURE. Install a new 4' energy star rated LED or Compact fluorescent bulb light fixture. Customer to pick style and color using a \$80 purchase allowance. Replace all lights in work/ classroom area.			

<b>12 - REPAIR ELECTRIC PLUG-IN AT WORK STATIONS</b> (80.06000)	18	Ea	
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Repair existing electrical receptacle and wiring to operate safely and properly when repair complete. There are to be two work stations per 20 amp breaker for a total of 18 circuits. Use materials and repair methods that meet with approval of electrical code inspector.

<b>13 - INSTALL A NEW 400 AMP ELECTRIC SERVICE ENTRANCE</b> (80.09000)	2		
Remove existing Electric panels and install two new 400 amp panels, 1 at the front of the building where the existing is located and the other at the rear of building where existing is located. Material and method of installation to comply with electric code requirements.			

***Subtotal for Electrical System***

## Location: HVAC

HVAC & Gas System	Quantity	Units	Total
<b>14 - GENERAL HVAC WORK</b> (85.00000)	7	Ea	

Replace all units with new 15 SEER or higher

## Location: ADA Bathroom

Electrical System	Quantity	Units	Total
<b>15 - GENERAL ELECTRICAL WORK</b> (80.00000)	1		

Install a new exhaust fan with light in ceiling with exhaust to exterior of building. Include all wiring, switches and labor. Install to local code required.

Plumbing System	Quantity	Units	Total
<b>16 - GENERAL PLUMBING WORK</b> (75.00000)			

Relocate any plumbing water lines or waste lines as needed for both the ADA bathroom and the Laundry room to include floor cutting and replacing, moving of vent stack if needed.

<b>17 - INSTALL A NEW WALL HUNG SINK</b> (75.02250)	1		
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Install a new wall hung lavatory. Install necessary blocking behind wall surface and a new metal bracket to support sink. Install a new faucet with two lever handles. Connect water lines, drain lines and vents that are necessary to make sink work properly and meet code requirements. Install armor over water and waste lines to meet ADA code

<b>18 - INSTALL A NEW TOILET FOR A PERSON WITH A DISABILITY</b> (75.06500)	1	Ea	
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Install a new 2 piece closed coupled, vitreous china, water saving commode with maximum 1.6 gallons per flush manufactured by American Standard, Kohler or approved equal. Toilet to be designed for use by a person who has a disability like the disabled person's living in the house. Commode to include all new components including a metal flush handle, pressed wood seat, plastic supply line, shut off valve, stub up, flange and wax seal. Top of toilet tank to be no more than 1" from back wall. Owner to select commode using an \$200. fixture allowance.

### ***Subtotal for Plumbing System***

Walls	Quantity	Units	Total
<b>19 - REMOVE WALL</b> (60.00250)		LF	

Demo existing public bathroom and existing laundry room and prepare for new.

**20 - FRAME UP A NEW STUD WALLS ADA PUBLIC BATHROOM AND LAUNDRY (60.05000)**

SF

Frame up a new 2" x 4" stud wall using building code approved materials and methods of construction. Wall to have a single bottom plate and a double top plate and blocking for grab bars and wall hung sink. Include ALL finish work drywall, doors, paint, baseboard, grab bars, mirror and ceilings.

***Subtotal for Walls***

**Location: Laundry Room**

Electrical System	Quantity	Units	Total
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**21 - INSTALL A CEILING LIGHT FIXTURE, SWITCH AND WIRING (80.02250)**

1

Ea

Install a new 4' LED ceiling light fixture with new switch and new wiring. Materials and installation method to meet with approval of electrical inspector. Owner to select light fixture using a \$80 allowance.

**22 - INSTALL A NEW WASHING MACHINE PLUG-IN AND WIRING (80.07500)**

1

Ea

Install a new washing machine receptacle with new wiring that includes a ground wire. Run new wiring behind building surface materials unless otherwise approved by Program Administrator. Materials and method of installation must also meet with approval of electrical inspector.

**23 - INSTALL A CLOTHES DRYER PLUG-IN AND WIRING (80.07750)**

1

Ea

Install a new 220-V 50-Amp clothes dryer receptacle and wiring that includes a ground wire. Run new wiring behind building surface materials unless otherwise approved by Program Administrator. Materials and method of installation must also meet with approval of electrical inspector.

***Subtotal for Electrical System***

Plumbing System	Quantity	Units	Total
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**24 - GENERAL PLUMBING WORK (75.00000)**

1

Relocate existing water heater in new laundry room to include water lines, drain lines, drain pan and electrical. All work to meet local codes.

<b>25 - INSTALL A WASHING MACHINE HOOK-UP</b> (75.12250)	1	Ea	
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Install a recessed washing machine control box, hot and cold water lines, cut-off valves, drain lines and vent. All materials and work to comply with code requirements.

**Subtotal for Plumbing System**

**Location: Storefront**

Doors	Quantity	Units	Total
<b>26 - GENERAL DOOR WORK</b> (45.00000)	1	Ea	

Remove existing door towards rear of building on parking lot side, frame new opening and install a double 3-0 x 6-8 impact rated 6 panel door with new hardware. Owner to use \$150 allowance for hardware.

<b>27 - GENERAL DOOR WORK</b> (45.00000)	1	Ea	
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Remove existing door and frame work at front parking lot side of building. Install new impact rated store front glass and double doors.

**Subtotal for Doors**

**Location: Floor**

Floors & Stairs	Quantity	Units	Total
<b>28 - GENERAL FLOOR &amp; STAIR WORK</b> (55.00000)			

Prep existing concrete floors, repair cracks, remove any paint or existing floor coverings. Paint floor with an epoxy nonskid covering. Owner to select color from color chart and floor scheme. Owner can pick up to three colors.

**Location: Parking Lot**

Site Work	Quantity	Units	Total
<b>29 - GENERAL SITE WORK</b> (20.00000)		Ea	

Enlarge parking lot inside fenced area. Extend paved area towards trees, reseal existing and paint parking spaces. Provide signs for Handi-cap spaces per code.

## Location: Plumbing

Plumbing System	Quantity	Units	Total
<b>30 - GENERAL PLUMBING WORK</b> (75.00000)			

The owner says there is a problem with the waste line backing up. The waste line runs along the east side of the building between the HVAC units and the building. The line appears to have a pitch problem and may need to be reset to the correct slope.

Total

### OWNER ACCEPTS SCOPE OF WORK

I have read the contents of this work write up and received a copy. I fully understand the repairs to be made to my property.

X \_\_\_\_\_ Date \_\_\_\_\_  
 Owner:

### CONTRACTOR ACCEPTS SCOPE OF WORK

I have read the contents of this work write up and agree to perform all work called for in accordance with the bid submitted on \_\_\_\_\_.

X \_\_\_\_\_ Date \_\_\_\_\_  
 Contractor

X \_\_\_\_\_ Date \_\_\_\_\_  
 Construction Specialist

**Document B**  
**Proof of Valid License**  
(must attach to your bid)

**Document C**  
**Drug Free Work Place Certification**  
(must attach to your bid)

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Program/Activity Receiving Federal Grant Funding

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here  if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official		Title
Signature		Date
X		

form HUD-50070 (3/98)  
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3



**Document D**  
**Public Contracting and Environmental**  
**Crimes Certification**  
(must attach to your bid)

## PUBLIC CONTRACTING AND ENVIRONMENTAL CRIMES CERTIFICATION

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

This sworn statement is submitted to the Manatee County Board of County Commissioners by:

\_\_\_\_\_ for  
[print individual's name and title]

\_\_\_\_\_  
[print name of entity submitting sworn statement]

whose business address is:

\_\_\_\_\_ and (if applicable) its Federal Employer Identification Number (FEIN) is \_\_\_\_\_ . If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:

I understand that no person or entity shall be awarded or receive a County contract for public improvements, procurement of goods or services (including professional services) or a County lease, franchise, concession or management agreement, or shall receive a grant of County monies unless such person or entity has submitted a written certification to the County that it has not:

been convicted of bribery or attempting to bribe a public officer or employee of Manatee County, the State of Florida, or any other public entity, including, but not limited to the Government of the United States; any state, or any local government authority in the United States, in that officer's or employee's official capacity; or

been convicted of an agreement or collusion among bidders or prospective bidders in restraint of freedom of competition, by agreement to bid a fixed price or otherwise; or

been convicted of a violation of an environmental law that, in the sole opinion of the County's Purchasing Director, reflects negatively upon the ability of the person or entity to conduct business in a responsible manner; or

made an admission of guilt of such conduct described in items (1), (2), or (3) above, which is a matter of record, but has not been prosecuted for such conduct, or has made an admission of guilt of such conduct, which is a matter of record, pursuant to formal prosecution. An admission of guilt shall be construed to include a plea of *nolo contendere*; or

where an officer, official, agent or employee of a business entity has been convicted of or has admitted to any of the crimes set forth above on behalf of such entity and pursuant to the direction or authorization of an official thereof (including the person committing the offense, if he is an official of the business entity), the business shall be chargeable with the conduct herein above set forth. A business entity shall be chargeable with the conduct of an affiliated entity, whether wholly owned, partially owned, or one which has common ownership or a common Board of Directors. For purposes of this form, business entities are affiliated if, directly or indirectly, one business entity controls or has the power to control another business entity, or if an individual or group of individuals controls or has the power to control both

entities. Indicia of control shall include, without limitation, interlocking management or ownership, identity of interests among family members, shared organization of a business entity following the ineligibility of a business entity under this Article, or using substantially the same management, ownership or principles as the ineligible entity.

Any person or entity who claims that this Article is inapplicable to him/her/it because a conviction or judgement has been reversed by a court of competent jurisdiction, shall prove the same with documentation satisfactory to the County's Purchasing Director. Upon presentation of such satisfactory proof, the person or entity shall be allowed to contract with the County.

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR MANATEE COUNTY IS VALID THROUGH DECEMBER OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT ANY CONTRACT OR BUSINESS TRANSACTION SHALL PROVIDE FOR SUSPENSION OF PAYMENTS, OR TERMINATION, OR BOTH, IF THE CONTRACTING OFFICER OR THE COUNTY ADMINISTRATOR DETERMINES THAT SUCH PERSON OR ENTITY HAS MADE FALSE CERTIFICATION.

\_\_\_\_\_  
[Signature]

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_ .

Personally known \_\_\_\_\_ OR produced identification

\_\_\_\_\_ My commission

expires \_\_\_\_\_  
[Notary Public Signature]

\_\_\_\_\_  
[Print, type or stamp commissioned name of Notary Public]

Signatory Requirement – In the case of a business entity other than a partnership or a corporation, this affidavit shall be executed by an authorized agent of the entity. In the case of a partnership, this affidavit shall be executed by the general partner(s). In the case of a corporation, this affidavit shall be executed by the corporate president.

**Document E**  
**Contractor's Questionnaire**  
**(must complete and include in bid**  
**package – answer all questions or**  
**indicate why the question does not**  
**apply to you - do not leave any blanks)**

**CONTRACTOR'S QUESTIONNAIRE**

The Bidder warrants the truth and accuracy of all statements and answers herein contained (include additional sheets if necessary).

THIS QUESTIONNAIRE MUST BE COMPLETED AND SUBMITTED WITH YOUR BID.

LICENSE # and COMPANY NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: (    ) \_\_\_\_\_ FAX: (    ) \_\_\_\_\_

Bidding as an individual: \_\_\_; a partnership: \_\_\_; a corporation: \_\_\_; a joint venture: \_\_\_

If a partnership, list names and addresses of partners. If a corporation, list names of officers, directors, shareholders, and state of incorporation. If a joint venture, list names and address of venturers and the same if any venture is a corporation for each such corporation, partnership or joint venture:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your organization has been in business under this firm's name as a \_\_\_\_\_ for how many years? \_\_\_\_\_

Describe and give the date and owner of the last three government projects you've completed which are similar in cost, type, size and nature as the one proposed. Include contact names and phone numbers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been assessed liquidated damages under a contract during the past (5) five years? If so, state when, where and why and provide contact names, addresses and phone numbers.

\_\_\_\_\_  
\_\_\_\_\_

Have you ever failed to complete work awarded to you? If so, state when, where and why and provide contact names, addresses and phone numbers.

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Have you ever been debarred or prohibited from bidding on a governmental entity's construction project? If yes, name the entity and describe the circumstances:

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Name three individuals, governmental entities, or corporations for which you have performed work (preferably similar in nature) and to which you refer. Include contact name and phone number:

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What specific steps have you taken to examine the physical conditions at or contiguous to the site, including but not limited to, the located of existing underground facilities?

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What specific physical conditions, including but not limited to the location of existing underground facilities have you found, which will in any manner affect the cost, progress performance or completion of the work?

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Will you subcontract out any part of this work? If so, describe which major portion(s):

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List any/all WBE/MBEs that will be utilized in this project, including the contract amount:

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What equipment do you own that will be used for this project?

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What equipment will you purchase/rent that will be used for this project?

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If applicable, list the Surety that will provide the bond(s) for this project:

Surety's Name: \_\_\_\_\_

Surety's Address: \_\_\_\_\_

\_\_\_\_\_

Surety's resident agent for service of process in Florida:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

**Document F**  
**MBE/WBE/Section 3 Certification**  
(must be attached to your bid to be eligible for  
up to 10% pricing consideration)



**Document G**  
**Proof of Insurance**  
(must be attached to your bid)

**Document H**  
**Proof of Registration with**  
**CareerSource Suncoast**

(must be attached to your bid to be eligible for  
the project)

**Document I**  
**Byrd Anti-Lobbying Certificate**  
(must be attached to bids over \$100,000K)

## BYRD ANTI-LOBBYING CERTIFICATE

### **Certification for Contracts, Grants, Loans and Cooperative Agreements (to be submitted with each bid)**

The undersigned Contractor 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 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 making lobbying contacts to 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—LL, “Disclosure Form to Report Lobbying,” in accordance with its instructions as amended by “Government wide Guidance for New Restrictions on Lobbying,” 61 Fed. Reg. 1413 (1/19/96).
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients 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 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995). 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.

Pursuant to 31, U.S.C. § 1352 (c)(1)-(2)(A), any person who makes a prohibited expenditure or fails to file or amend a required certification or disclosure form shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure or failure.

The Contractor, \_\_\_\_\_, 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.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Company Name: \_\_\_\_\_

Title: \_\_\_\_\_

**Document J**  
**Bid Bond (5% of Total Bid)**  
**(Must be included in bid package for any**  
**Bid over \$100,000K)**

## **Document K**

### **Authorized Agent Form**

(must be completed, notarized and brought to the Information Conference when Prime sends alternate to act on his behalf)

AUTHORIZED AGENT FORM

For

Manatee County Redevelopment and Economic Opportunity Department

DATE: \_\_\_\_\_

I, \_\_\_\_\_ (name of contractor), authorize  
\_\_\_\_\_ (name of agent), to be an agent in  
and of \_\_\_\_\_ (company name) in all matters with  
my work regarding the Manatee County Redevelopment and Economic Opportunity  
Department. This authorization shall include but not be limited to the signing of  
contracts, change orders and any other related documents that shall be necessary.

\_\_\_\_\_  
Signature - (NAME OF CONTRACTOR)

\_\_\_\_\_  
Signature - (NAME OF AGENT)

State of Florida  
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_,  
200\_\_\_ by \_\_\_\_\_, who produced identification  
\_\_\_\_\_ OR is personally known to me and who did/did  
not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
My Commission Expires



**Document L**  
**Addendum Acknowledgement Form**  
(must attach to your bid when addendums are  
issued)

**ADDENDUM ACKNOWLEDGEMENT FORM**

We, the undersigned hereby declare that we have carefully reviewed the bid documents/addendum(s), and with full knowledge and understanding of the aforementioned herewith submit this bid, meeting each and every specification, term and condition contained in this Invitation for Bids.

We understand that the bid specifications, terms and conditions in their entirety shall be made a part of any agreement or contract between the Homeowner and the successful bidder and their subcontractors. Failure to comply shall result in contract default, whereupon, the defaulting contractor shall be required to pay for any and all re-procurement costs, damages, and attorney fees as incurred by Manatee County and the Homeowner.

PROJECT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

Acknowledge Addendum No. \_\_\_\_ Dated: \_\_\_\_\_  
Acknowledge Addendum No. \_\_\_\_ Dated: \_\_\_\_\_  
Acknowledge Addendum No. \_\_\_\_ Dated: \_\_\_\_\_  
Acknowledge Addendum No. \_\_\_\_ Dated: \_\_\_\_\_  
Acknowledge Addendum No. \_\_\_\_ Dated: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_  
\_\_\_\_\_  
(Print Name & Title of Signer)

DATE: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_