

**CONTRACTOR'S GENERAL INFORMATION WORK SHEET**  
**eBID #20230107**

It is understood and agreed that the following information is to be used by the City to determine the qualifications of prospective Contractor to perform the work required. The Contractor waives any claim against the City that might arise with respect to any decision concerning the qualifications of the Contractor.

The undersigned attests to the truth and accuracy of all statements made on this questionnaire. Also, the undersigned hereby authorizes any public official, Engineer, Surety, bank, material or equipment manufacturer, or distributor, or any person, firm or corporation to furnish the City any pertinent information requested by the City deemed necessary to verify the information on this questionnaire.

Dated at 783 SW Spruce Ridge Dr., this 28 day of March, 2024  
(Location)

Name of Organization/Contractor: Kerner LLC dba Kerner Environmental

By: Ian Kerner/President  
Name and Title

1. Corporation, Partnership, Joint Venture, Individual or other? Corporation

2. Firm's name and main office address, telephone, and fax numbers

Name: Kerner LLC dba Kerner Environmental

Address: 783 SW Spruce Ridge Dr. Stuart FL 34994

Telephone Number: 772-260-8415

Fax Number: N/A

3. Contact person: Ian Kerner Email: ian@kernerenvironmental.com

4. Firm's previous names (if any). N/A

5. How many years has your organization been in business? 8

6. Total number of staff at this location: 32 Total number of staff on the Treasure Coast: 32

7. Is the Firm a minority business: YES / (NO)  
If no, is your company planning to implement such a program? \_\_\_\_\_

8. Is the firm claiming Local Preference under City Ordinance 35.14? (YES) / NO

9. List the license(s) that qualifies your firm to construct this project: \_\_\_\_\_  
Kerner Enviromental is licensed and Insured for the contract.  
Company licensing has been attached.

10. **ADDENDUM ACKNOWLEDGMENT** - Bidder acknowledges that the following addenda have been received and are included in its proposal/bid:

Addendum Number	Date Issued	Addendum Number	Date Issued
1	3/15/24		

11. List **five (5) Mowing & Trimming services** projects similar to this project completed by your firm in the last 5 years along with a brief description of project, location of project, client name, client phone number, email, value of contract, your firm's percentage of the total contract value, as well as the number of change orders and the total change order value. **DO NOT USE the City of Port St Lucie as a reference.**

Project Number 1

Project Name: Indian River County ROW

Description: Mowing, String trimming, edging hardscape, and blowing

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Location: SR 60, VLE, and North US1

Client Name, Phone Number & Email: Ruby Sandoval 772-713-0679, rsandoval@ircgov.com

Value of Total Contract: \$83,160.00 yearly

Date of Completion: 2/24

Firm's Percentage of Total Contract: 100

Number of Change Orders: 0

Value of Change Orders: 0

Was Project Completed on Schedule: Yes

Was Project Completed within Budget? yes

Project Number 2

Project Name: Martin County Parks

Description: Mowing, String trimming, edging hardscape, plant bed maintenance and trimming.

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Location: Martin County

Client Name, Phone Number & Email: Jim Lapilato 772-219-4962 jlopilato@martin.fl.us

Value of Total Contract: \$719,097.46 yearly

Date of Completion: 1/25

Firm's Percentage of Total Contract: 100

Number of Change Orders: 0

Value of Change Orders: 0

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Was Project Completed on Schedule: Yes

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Was Project Completed within Budget? Yes

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Project Number 3

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Project Name: Martin County Right of Way

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Description: Mowing/String Trimming/Edging/Landscape Bed Maintenance and Blowing.

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Location: Martin County Roads

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Client Name, Phone Number & Email: Todd Warren/772-219-4934/twarren@martin.fl.us

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Value of Total Contract: 871,735.48

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Date of Completion: 9/2023

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Firm's Percentage of Total Contract: 98%

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Number of Change Orders: 0

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Value of Change Orders: 0

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Was Project Completed on Schedule: Y/N\_ extended 6 months past 3rd year

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Was Project Completed within Budget? Yes

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Project Number 4

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Project Name: Martin County Arterial Mowing

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Description: Mowing/String Trimming and Litter/Trash Pick Up

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Location: Martian County Arterial Roads

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Client Name, Phone Number & Email: Michael Clarke /772-221-1464 Mclarke@martin.fl.us

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Value of Total Contract: 245,645.50

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Date of Completion: On Going

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Firm's Percentage of Total Contract: 100%

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Number of Change Orders: 0

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Value of Change Orders: 0

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Was Project Completed on Schedule: On Going

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Was Project Completed within Budget? Yes

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Project Number 5

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Project Name: St. Lucie County

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Description: Mowing/String Trimming/ Litter/Trash Clean Up

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Aquatic Maintenance of all Storm Water Treatment Areas

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Location: St. Lucie County

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Client Name, Phone Number & Email:	James O'Connor/772-462-1435/oconnorj@stlucieco.org
Value of Total Contract:	240,000.00
Date of Completion:	On Going
Firm's Percentage of Total Contract:	100%
Number of Change Orders:	0
Value of Change Orders:	0
Was Project Completed on Schedule:	Yes
Was Project Completed within Budget?	Yes

12. List the number of personnel that will be assigned to the project and include job titles and their licenses or certifications.

William Clarke/Operations Manager
Robert Sproul/ Account Manager
Ian Kerner/Owner

13. Has the Contractor or any principals of the applicant organization failed to qualify as a responsible Contractor; refused to enter into a contract after an award has been made; failed to complete a contract during the past five (5) years or been declared to be in default in any contract or been assessed liquidated damages in the last five (5) years? List the name of project, location, client, engineer, date, and reason. Use additional pages if needed.

Total Number of Projects where Failure to Complete Work Occurred: 0

Project Number 1
Project Name:
Project Location:
Client Name and Phone Number:
Engineer Name and Phone Number:
Date:
Reason:

Insert additional projects if needed.

14. Has the Contractor or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into receivership?

Yes ( )                      No ( x )

If yes, please explain:


15. List any lawsuits pending or completed within the past five (5) years involving the corporation, partnership or individuals with more than ten percent (10 %) interest:

N/A

(N/A is not an acceptable answer - insert lines if needed)

16. List any judgments from lawsuits in the last five (5) years:

N/A

(N/A is not an acceptable answer - insert lines if needed)

17. List any criminal violations and/or convictions of the Proposer and/or any of its principals:

N/A

(N/A is not an acceptable answer - insert lines if needed)

20. Provide a Project Management Plan.

21. Provide an Equipment List.

  
Signature

  
Title

E-Bid #20230107

Mowing & Trimming Services at City Park Lands

Equipment List

<b>Quan.</b>	<b>Description</b>
8	F 350 W/ 20' Closed Trailer
8	F 150
28	Toro Mowers
26	String Trimmers
16	Backpack Blowers
12	Edgers\Trimmers
8	Hedge Trimmers
	CAT 299
	VENTREC 72" Mower
	Ferguson 110 W/ 15' Batwing



KERNER ENVIRONMENTAL

We (Kerner Environmental) will have a full time crew of five maintaining the parks on a weekly and bi-weekly basis. The crew will contain a knowledgeable crew leader that is responsible for directing the other employees. There will also be weekly and bi-weekly inspections of all the parks by an account manager or a production manager.

Each crew will be equipped with the proper equipment to complete the work during each visit. Our equipment consists of commercial grade zero turn mowers and commercial grade 2-cycle equipment. We maintain our equipment in-house to ensure that there is very little turn around time when our equipment is down.

The management team that will oversee this project consists of the following:

-Robbie Sproul (Account Manager)

772-260-7610

-Juan Urbina (Production Manager)

863-697-8232

Prepared by Robbie Sproul

  
\_\_\_\_\_





**NOTICE TO ALL PROPOSERS:**

To ensure fair consideration is given for all Proposers, it must be clearly understood that upon release of the proposal and during the proposal process, firms and their employees of related companies as well as paid or unpaid personnel acting on their behalf shall not contact or participate in any type of contact with City employees, department heads or elected officials, up to and including the Mayor and City Council. The **“Cone of Silence”** is in effect for this solicitation from the date the solicitation is advertised on DemandStar, until the time an award decision has been approved by City Council and fully executed by all parties. Information about the Cone of Silence can be found under the City of Port St. Lucie Ordinance 20-15, Section 35.13. Contact with anyone other than the Issuing Officer may result in the vendor being disqualified. All contact must be coordinated through Nadia Tourjee, Issuing Officer, for the procurement of these services.


All questions regarding this Solicitation are to be submitted in writing to Nadia Tourjee, Procurement Contracting Officer I with the Procurement Management Department via e-mail [NTourjee@cityofpsl.com](mailto:NTourjee@cityofpsl.com), or by phone 772-871-5224. Please reference the Solicitation number on all correspondence to the City.

All questions, comments and requests for clarification must reference the Solicitation number on all correspondence to the City. Any oral communications shall be considered unofficial and non-binding.

Only written responses to written communication shall be considered official and binding upon the City. The City reserves the right, at its sole discretion, to determine appropriate and adequate responses to the written comments, questions, and requests for clarification.

\*NOTE: All addendums and/or any other correspondence before bid close date (general information, question and responses) to this solicitation will be made available exclusively through the [DemandStar's Website](#) for retrieval. All notice of intent to award documentation will be published on the [City Clerk's Website](#). Proposers are solely responsible for frequently checking these websites for updates to this solicitation.

**I understand and shall fully comply with all requirements of City of Port. St. Lucie Ordinance 20-15, Section 35.13.**

Typed Name: Jan Kerner  
Signed:   
Company and Job Title: Kerner LLC dba Kerner Environmental  
Date: 3/28/2024





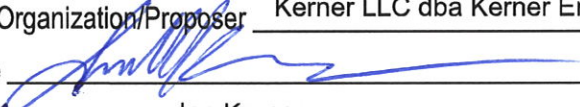
**e-BID #20230107**  
**CONTRACTOR'S CODE OF ETHICS**

The City of Port St Lucie ("City), through its Procurement Management Department ("Procurement Management Department") is committed to a procurement process that fosters fair and open competition, is conducted under the highest ethical standards, and enjoys the complete confidence of the public. To achieve these purposes, Procurement Management Department requires each vendor who seeks to do business with the City to subscribe to this Contractor's Code of Ethics.

- ◆ A Contractor's bid or proposal will be competitive, consistent, and appropriate to the bid documents.
- ◆ A Contractor will not discuss or consult with other Vendors intending to bid on the same contract or similar City contract for the purpose of limiting competition. A Vendor will not make any attempt to induce any individual or entity to submit or not submit a bid or proposal.
- ◆ Contractor will not disclose the terms of its bids or proposal, directly or indirectly, to any other competing Vendor prior to the bid or proposal closing date.
- ◆ Contractor will completely perform any contract awarded to it at the contracted price pursuant to the terms set forth in the contract.
- ◆ Contractor will submit timely, accurate and appropriate invoices for goods and/or services actually performed under the contract.
- ◆ Contractor will not offer or give any gift, item, or service of value, directly or indirectly, to a City employee, City official, employee family member or other vendor contracted by the City.
- ◆ Contractor will not cause, influence, or attempt to cause or influence, any City employee or City Official, which might tend to impair his/her objectivity or independence of judgment; or to use, or attempt to use, his/her official position to secure any unwarranted privileges or advantages for that Vendor or for any other person.
- ◆ Contractor will disclose to the City any direct or indirect personal interests a City employee or City official holds as it relates to a Vendor contracted by the City.
- ◆ Contractor must comply with all applicable laws, codes or regulations of the countries, states and localities in which they operate. This includes, but is not limited to, laws and regulations relating to environmental,

occupational health and safety, and labor practices. In addition, Contractor must require their suppliers (including temporary labor agencies) to do the same. Contractor must conform their practices to any published standards for their industry. Compliance with laws, regulations and practices include, but are not limited to the following:

- Obtaining and maintaining all required environmental permits. Further, Contractor will endeavor to minimize natural resource consumption through conservation, recycling, and substitution methods.
- Providing workers with a safe working environment, which includes identifying and evaluating workplace risks and establishing processes for which employee can report health and safety incidents, as well as providing adequate safety training.
- Providing workers with an environment free of discrimination, harassment, and abuse, which includes establishing a written antidiscrimination and anti-bullying/harassment policy, as well as clearly noticed policies pertaining to forced labor, child labor, wage and hours, and freedom of association.

Name of Organization/Proposer Kerner LLC dba Kerner Environmental  
Signature   
Printed Name and Title Ian Kerner

Date 3/28/2024

DISCLAIMER: This Code of Ethics is intended as a reference and procedural guide to contractors. The information it contains should not be interpreted to supersede any law or regulation, nor does it supersede the applicable contractor contract. In the case of any discrepancies between it and the law, regulation(s) and/or contractor contract, the law, regulatory provision(s) and/or vendor contract shall prevail.



**E-Verify Form**

**Supplier/Consultant acknowledges and agrees to the following:**

1. Shall utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the Supplier/Consultant during the term of the contract; and
2. Shall expressly require any subcontractors performing work or providing services pursuant to the state contract to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.
3. The Contractor hereby represents that it is in compliance with the requirements of Sections 448.09 and 448.095, Florida Statutes. The Contractor further represents that it will remain in compliance with the requirements of Sections 448.09 and 448.095 Florida Statutes, during the term of this contract and all attributed renewals.
4. The Contractor hereby warrants that it has not had a contract terminated by a public employer for violating Section 448.095, Florida Statutes, within the year preceding the effective date of this contract. If the Contractor has a contract terminated by a public employer for any such violation during the term of this contract, it must provide immediate notice thereof to the City.

**E-Verify Company Identification Number** 2087811

**Date of Authorization** 2/21/23

**Name of Contractor** Kerner LLC dba Kerner Environmental

**Name of Project** BID #20230107:Mowing & Trimming Services at City Park Landscaping

**Solicitation Number (If Applicable)** N/A

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on March, 28, 20 24 in Stuart (city), FL (state).

  
 \_\_\_\_\_  
 Signature of Authorized Officer

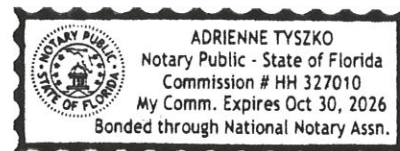
Ian Kerner/President  
 \_\_\_\_\_  
 Printed Name and Title of Authorized Officer or Agent

**SUBSCRIBED AND SWORN BEFORE ME**

ON THIS THE 28 DAY OF March, 20 24.

NOTARY PUBLIC Adrienne Tyszko

My Commission Expires: October 30, 2026







**PORT ST. LUCIE**  
HEART OF THE TREASURE COAST

**NON-COLLUSION AFFIDAVIT**

**EBID#20230107**

**Mowing & Trimming Services at City Park Lands**

State of Florida }

County of Martin }

Ian Kerner, being first duly sworn, disposes and says that:  
(Name/s)

1. They are President of Kerner LLC dba Kerner Environmental the Proposer that  
(Title) (Name of Company)

has submitted the attached PROPOSAL;

2. He is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such PROPOSAL;

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

4. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contract for which the attached proposal has been submitted or to refrain from proposing in connection with such Contract or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached Proposal or of any other Proposer, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the City of Port St. Lucie or any person interested in the proposed Contract; and

5. 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 Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

(Signed) 

(Title) President



"A City for All Ages"

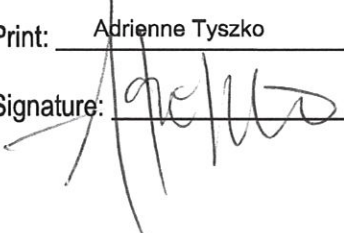
STATE OF FLORIDA }  
COUNTY OF ST. LUCIE } SS:

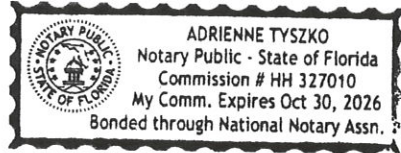
The foregoing instrument was acknowledged before me this (Date) 2/28/2024

by: Ian Kerner who is personally known to me or who has produced  
DL as identification and who did (did not) take an oath.

Commission No. 327010

Notary Print: Adrienne Tyszko

Notary Signature: 






**DRUG-FREE WORKPLACE FORM**  
**e-BID #20230107**  
**Mowing & Trimming Services at City Park Lands**

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that

Kerner LLC dba Kerner Environmental does:  
(Name of Business)

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 proposal a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under proposal, 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 contendere 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 so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

  
\_\_\_\_\_  
Contractor's Signature

3/28/2024  
\_\_\_\_\_  
Date



# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Kerner LLC</b>		
2	Business name/disregarded entity name, if different from above <b>Kerner Environmental</b>		
3	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.		4
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate		Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
	<input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <b>S</b> <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>		
	<input type="checkbox"/> Other (see instructions) ▶ _____		
5	Address (number, street, and apt. or suite no.) See instructions. <b>783 NW Spruce Ridge Dr.</b>		Requester's name and address (optional)
6	City, state, and ZIP code <b>Stuart FL 34994</b>		
7	List account number(s) here (optional)		

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									

or

Employer identification number									
8	1								

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>1/2/2024</b>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
03/26/2024

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).

<b>PRODUCER</b> State Insurance Agency Inc. 1010 SW Martin Downs Blvd  Palm City FL 34990		<b>CONTACT NAME:</b> Mitzy Taylor <b>PHONE (A/C, No, Ext):</b> (772) 426-9933 <b>FAX (A/C, No):</b> (772) 426-9943 <b>E-MAIL ADDRESS:</b> certificates@stateinsuranceagent.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Aspen Specialty Insurance Company	<b>NAIC #</b> 10717J
		<b>INSURER B:</b> Auto-Owners	18988
		<b>INSURER C:</b> Benchmark Insurance Company	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** CL2432618878      **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 EXCLUSIONS 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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ER00VYL23	05/01/2023	05/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" 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 <input type="checkbox"/> 19			5156398300	01/01/2024	01/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ WRRP \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	TWFL0000815200	03/01/2024	03/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Contractors Pollution Liability			ER00VYL23	05/01/2023	05/01/2024	Each Pollution Incident \$1,000,000

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

<b>CERTIFICATE HOLDER</b>  City of Port St Lucie - For Verification Purposes  FL	<b>CANCELLATION</b>  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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Applicator's Name	City, State
CLARKE, WILLIAM WANYE	FORT PIERCE, FL

License Number	License Status	License Type
JF257047	Normal	Certified Pest Control Operator

Original Issue Date	Last Issue Date	Expiration Date
3/23/2017	8/3/2023	6/1/2024



# *State of Florida*

## *Department of State*

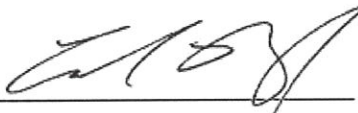
I certify from the records of this office that KERNER LLC is a limited liability company organized under the laws of the State of Florida, filed on February 18, 2016.

The document number of this limited liability company is L16000034853.

I further certify that said limited liability company has paid all fees due this office through December 31, 2024, that its most recent annual report was filed on January 24, 2024, and that its status is active.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Twenty-fourth day of January,  
2024*



  
*Secretary of State*

Tracking Number: 1278044751CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

# MARTIN COUNTY BUSINESS TAX RECEIPT

## 2023 / 2024



EXPIRES: September 30, 2024

Account #: 20200655

**Honorable Ruth Pietruszewski**  
**Martin County Tax Collector**

Location: 783 NE SPRUCE RIDGE DR  
Business Phone: 772-260-8415  
NAICS Code: 561730  
State License:  
Business Description:  
LAWN/LANDSCAPE MAINTENANCE (LANDSCAPING)

This receipt is a local business tax only. This receipt is in addition to and not in lieu of any other license required by law or local ordinance and is subject to regulations of zoning, health, contractor licensing, and other lawful authority.

Business Name: KERNER LLC  
Business DBA: KERNER ENVIRONMENTAL  
Owner Name: IAN KERNER  
KERNER LLC  
783 NE SPRUCE RIDGE DR  
STUART, FL 34994

Paid Date 07/24/2023  
Receipt Number  
INT-22-00238376

Tax Amount	Transfer Fee	Penalty	Late Penalty	Collection Cost	Total Paid
26.25	0.00	0.00	0.00	0.00	26.25

## Ruth Pietruszewski · Martin County Tax Collector

Website:  
MartinTaxCollector.com

3485 SE Willoughby  
Blvd. Stuart, FL 34994

Phone:  
(772)288-5600

**To renew your Business Tax Receipt, visit our payment menu  
at [martintaxcollector.com](https://martintaxcollector.com).**

Contact our office by email at [btdept@martintax.us](mailto:btdept@martintax.us) if any of the following changes occur with your business:

- Business Name
- Mailing Address
- Ownership
- Closing your Business
- Physical Location

Dear Business Owner:

The law requires this business tax receipt to be displayed conspicuously at the place of business in such a manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the County.

Pursuant to Florida law, all Local Business Tax Receipts shall be sold by the Tax Collector beginning July 1 of each year and shall expire on September 30 of each succeeding year. Those Local Business Tax Receipts renewed beginning October 1 shall be delinquent and subject to a delinquency penalty of 10 percent in the month of October. An additional 5 percent penalty for each month of delinquency is added until paid, provided that the total delinquency penalty shall not exceed 25 percent of the Local Business Tax for the delinquent establishment. A \$250 penalty will be applied 150 days from the initial notice, plus collection costs.

Annual account notices are mailed on July 1.

Regardless of amount due all receipts must be renewed or delinquent fees will apply.

Do you qualify for an exemption? Visit our website <https://martintaxcollector.com/local-business-tax/> for details on Business Tax Receipt Exemptions. An application is required.

If you have any questions please contact our office at [btdept@martintax.us](mailto:btdept@martintax.us) or (772)288-5600.



# MARTIN COUNTY BUSINESS TAX RECEIPT



2023 / 2024

EXPIRES: September 30, 2024

Account #: 20182750552

**Honorable Ruth Pietruszewski**  
**Martin County Tax Collector**

Location: 783 NW SPRUCE RIDGE DR  
Business Phone: (772)260-8415  
NAICS Code: 541620  
State License:  
Business Description:

PUBLIC SERVICE (ENVIRONMENTAL MANAGEMENT)

Business Name KERNER LLC  
Business DBA KERNER ENVIRONMENTAL  
Owner Name KERNER, IAN  
KERNER LLC  
783 NW SPRUCE RIDGE DRIVE  
STUART, FL 34994

This receipt is a local business tax only. This receipt is in addition to and not in lieu of any other license required by law or local ordinance and is subject to regulations of zoning, health, contractor licensing, and other lawful authority.

Paid Date 07/24/2023  
Receipt Number  
INT-22-00238376

Tax Amount	Transfer Fee	Penalty	Late Penalty	Collection Cost	Total Paid
26.25	0.00	0.00	0.00	0.00	26.25

## Ruth Pietruszewski · Martin County Tax Collector

Website:  
[MartinTaxCollector.com](http://MartinTaxCollector.com)

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**City of Port St. Lucie**  
**E-Bid #20230107 - Mowing & Trimming Services at City Park Lands**  
**Cost Worksheet - Schedule A**

Kerner Environmental

Line #	Locations	# of Service Acres	Rate per Acre	Rate per Mow	# of Mows per Year	Total Amount
1	Apache Park	13.9	\$ 38.00	\$ 528.20	42	\$ 22,184.40
3	C-24 Canal Park	8	\$ 38.00	\$ 304.00	42	\$ 12,768.00
4	Charles E. Ray Park	8.7	\$ 38.00	\$ 330.60	42	\$ 13,885.20
5	Duck Court Park	0.89	\$ 38.00	\$ 33.82	42	\$ 1,420.44
6	Fred Cook Park	5	\$ 38.00	\$ 190.00	42	\$ 7,980.00
7	Girl Scout Park	8.3	\$ 38.00	\$ 315.40	42	\$ 13,246.80
8	Jaycee Park	4.5	\$ 38.00	\$ 171.00	42	\$ 7,182.00
9	Kiwanis Park	3.5	\$ 38.00	\$ 133.00	42	\$ 5,586.00
10	Oak Hammock Park	2.7	\$ 38.00	\$ 102.60	42	\$ 4,309.20
11	PSL Elks Lodge Park	7	\$ 38.00	\$ 266.00	42	\$ 11,172.00
12	River Place Park	3.5	\$ 38.00	\$ 133.00	42	\$ 5,586.00
13	Rotary Park	10.4	\$ 38.00	\$ 395.20	42	\$ 16,598.40
14	Turtle Run Park	8	\$ 38.00	\$ 304.00	42	\$ 12,768.00
15	Whitemore Park	4	\$ 38.00	\$ 152.00	42	\$ 6,384.00
17	Woodland Trails Expansion	3.5	\$ 38.00	\$ 133.00	42	\$ 5,586.00
18	Woodland Trails Park	8	\$ 38.00	\$ 304.00	42	\$ 12,768.00
19	Doat Street Park	2.4	\$ 38.00	\$ 91.20	24	\$ 2,188.80
20	Harborview Park	4.8	\$ 38.00	\$ 182.40	24	\$ 4,377.60
21	O.L. Peacock Park	13.7	\$ 38.00	\$ 520.60	24	\$ 12,494.40
22	Sandpiper Bay Park	3.75	\$ 38.00	\$ 142.50	24	\$ 3,420.00
23	SW Cycle Street	15.69	\$ 38.00	\$ 596.22	24	\$ 14,309.28
24	Wilderness Park	65.29	\$ 38.00	\$ 2,481.02	34	\$ 84,354.68
25	Woodstork Trail	33	\$ 38.00	\$ 1,254.00	24	\$ 30,096.00
<b>TOTAL AMOUNT:</b>						<b>\$ 310,665.20</b>

Line #	Additional Services	Unit Price
1	Additional Sites by Acre	\$ 38.00

NOTE: The City's Estimated Annual Usage as indicated in this document has been inserted to establish a possible annual usage. Actual quantities that will be ordered by the City during the Contract Period may vary substantially from the Estimated Annual Usage. Bidders are cautioned that the anticipated quantities used for this computation will be estimates. The City makes no guarantee as to the actual quantity or type of services that will be utilized during the Contract period.

NOTE: Unit prices are limited to two decimals.

EXAMPLE: \$5.2555 is unacceptable - \$5.25 is acceptable

Contractor's Signature: \_\_\_\_\_

Printed - Contractor's Name: \_\_\_\_\_

Contractor's Phone Number: \_\_\_\_\_

Contractor's Email Address: \_\_\_\_\_

*[Handwritten Signature]*  
 Ian Kerner  
 772-260-8415  
 Ian@kernerenvironmental.com