

# ADDENDUM #1

## CONTRACTOR'S GENERAL INFORMATION WORK SHEET eBID #20230049

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 Riviera Beach, FL, this 17 day of July, 2023  
(Location)

Name of Organization/Contractor: Aquatic Vegetation Control, Inc.

By: Sharon Gillenwalters, 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: Aquatic Vegetation Control, Inc.  
Address: 1860 W. 10<sup>th</sup> St.  
Riviera Beach, FL 334104

Telephone Number: 561-845-5525  
Fax Number: 561-845-5374

3. Contact person: Sharon Gillenwalters Email: sgillenwalters@avcagquatic.com
4. Firm's previous names (if any). none
5. How many years has your organization been in business? 37
6. Total number of staff at this location: 90 Total number of staff on the Treasure Coast: 15
7. Is the Firm a minority business: YES /  NO  
If no, is your company planning to implement such a program? no
8. Is the firm claiming Local Preference under City Ordinance 35.12? YES /  NO
9. List the license(s) that qualifies your firm to construct this project: none

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	6/27/23		
2	7/11/23		

11. List **five (5) Swale Liner Maintenance** 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: Drainage, Wetland, Upland Maintenance  
 Description: treatment and removal of vegetation within wetland, estuarine, aquatic, and upland areas.

Location: Martin County  
 Client Name, Phone Number & Email: Martin County, Mike Yustin 772-220-7114 myustin@martin.fl.us  
 Value of Total Contract: 400,000 per year annual average  
 Date of Completion: 2012-2024  
 Firm's Percentage of Total Contract: 100  
 Number of Change Orders: 0  
 Value of Change Orders: 0  
 Was Project Completed on Schedule: yes - ongoing  
 Was Project Completed within Budget? yes

Project Number 2

Project Name: Mitigation Maintenance & Waterway Maintenance  
 Description: treatment and removal of vegetation within wetland, littoral mitigation areas and herbicide treatment of waterways  
 Location: City of Weston  
 Client Name, Phone Number & Email: City of Weston, Reddy Chitepu 954-385-2600 rchitepu@westonFL.org  
 Value of Total Contract: 3,535,000  
 Date of Completion: 2024  
 Firm's Percentage of Total Contract: 90  
 Number of Change Orders: 0



Value of Change Orders: 0  
Was Project Completed on Schedule: yes, ongoing  
Was Project Completed within Budget? yes

Project Number 3

Project Name: Aquatic Vegetation Control and Lake Slope mowing  
Description: treatment of nuisance vegetation & retention pond mowing & trimming

Location: St. Lucie County  
Client Name, Phone Number & Email: St Lucie County, William Cornelius  
Value of Total Contract: 1,400,000  
Date of Completion: 2023  
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

772-999-1374  
corneliusw@stlucieco.org

Project Number 4

Project Name: Dry and aquatic vegetation maintenance  
Description: mowing, littoral zone maintenance, & pond maintenance.

Location: Palm Beach County  
Client Name, Phone Number & Email: Palm Beach County, Brian Powell  
Value of Total Contract: 800,000  
Date of Completion: 2028  
Firm's Percentage of Total Contract: 100  
Number of Change Orders: 0  
Value of Change Orders: 0  
Was Project Completed on Schedule: yes, ongoing  
Was Project Completed within Budget? yes

561-233-3960  
bwpowell@pbcgov.org

Project Number 5

Project Name: Ground Application Services  
Description: Aquatic & upland nuisance vegetation control

Location: SFWMD jurisdiction  
 Client Name, Phone Number & Email: SFWMD, Leroy Rodgers 561-682-2773 LRodgers@sflwmd.gov  
 Value of Total Contract: 10,000,000 for each 5-year contract  
 Date of Completion: 2025  
 Firm's Percentage of Total Contract: 75  
 Number of Change Orders: 0  
 Value of Change Orders: 0  
 Was Project Completed on Schedule: yes, ongoing  
 Was Project Completed within Budget? yes

12. Status of current contracts. Please provide the name & number of current contracts as well as a sample list of the projects currently underway.

City of Port St. Lucie - 4 contracts  
Palm Beach County - 2 contracts  
SFWMD - 1 contract, 100's of work orders  
Northern Palm Beach County Improvement District - 5 contracts  
Florida Power & Light - 2 contracts  
City of Weston - 2 contracts

13. How will the Contractor be able to meet the project timeline and budget given the current workload, work force and equipment?

AVC is currently performing Swale Liner maintenance Area A & is meeting schedule & budget. We have performed Swale liner maintenance Area B as well. The current 3 crews that have worked on both contracts will continue to be successful performing both areas considering the change from 6 cycles to 3 cycles year 1, then 1 cycle thereafter.

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

Cody Barton, Project Manager  
Ryan Schuling, Crew Supervisor + 6 Crew members  
Donald Bustik, Crew Supervisor + 6 Crew members  
Barry Gorman, Crew Supervisor + 6 Crew members

15. 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:

*None*

Insert additional projects if needed.

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

Yes ( )

No (✓)

If yes, please explain:

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

17. 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:

*Auto Liability lawsuit was filed AVC on 5/30/23 from an auto accident from 4/11/22*

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

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

*None - no lawsuit judgements in the last five years*

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

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

*no Criminal Violations*

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

20. Provide a Project Management Plan. ✓

21. Provide an Equipment List. ✓

22. Provide a Project Schedule. ✓

*[Handwritten Signature]*

Signature

*President*

Title

**\*\* THIS WILL BE THE ONLY FORM ACCEPTED UNLESS DIRECTED IN A FUTURE ADDENDUM. \*\***







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**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 Agent 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.

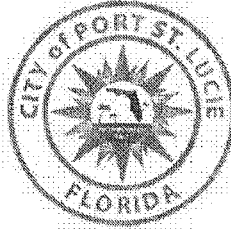
I understand and shall fully comply with all requirements of City of Port. St. Lucie Ordinance 20-15, Section 35.13.

Typed Name: Sharon Gillenwaiters

Signed: [Signature]

Company and Job Title: Aquatic Vegetation Control, Inc, President

Date: 7/17/2023



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**e-BID #20230049**

## **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 Aquatic Vegetation Control, Inc.

Signature 

Printed Name and Title Sharon Gillenwalters, President

Date 7/17/2023

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.



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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 294744

Date of Authorization 1/7/2010

Name of Contractor Aquatic Vegetation Control, Inc.

Name of Project Swale Liner Maintenance - Area A & B

Solicitation Number (If Applicable) eBid 20230049

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

Executed on July 17, 2023 in Riviera Beach (city), FL (state).

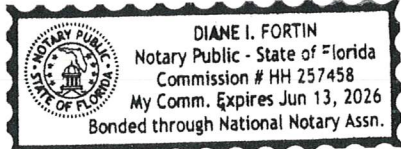
[Signature]
Signature of Authorized Officer

Sharon Gillenwalters, President
Printed Name and Title of Authorized Officer or Agent

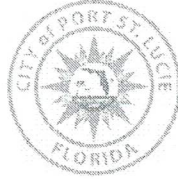
SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE 17th DAY OF July, 2023.

NOTARY PUBLIC Diane I. Fortin

My Commission Expires: 6/13/26







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**NON-COLLUSION AFFIDAVIT**

**EBID#20230049**

**Swale Liner Maintenance - Areas A & B**

State of Florida }

County of Palm Beach }

Sharon Billawaters, being first duly sworn, disposes and says that:  
(Name/s)

1. They are President of Aquatic Vegetation Control, Inc. 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) [Signature]

(Title) President



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

The foregoing instrument was acknowledged before me this (Date) July 17<sup>th</sup>, 2023

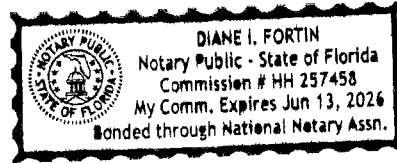
by: Sharon Gillenwalters who is personally known to me or who has produced

\_\_\_\_\_ as identification and who did (did not) take an oath.

Commission No. HH 257458

Notary Print: DIANE I. Fortin

Notary Signature: Diane I. Fortin







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**DRUG-FREE WORKPLACE FORM**  
**e-BID #20230049**  
**Swale Liner Maintenance - Areas A & B**

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

Aquatic Vegetation Control, Inc. 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.

A handwritten signature in blue ink, appearing to be "S. L.", written over a horizontal line.

Contractor's Signature

7/17/2023  
Date

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## Bid Bond

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KNOW ALL MEN BY THESE PRESENTS, that we **Aquatic Vegetation Control, Inc.**

as Principal, hereinafter called the Principal, and **Hartford Fire Insurance Company**

a corporation duly organized under the laws of the State of Connecticut

as Surety, hereinafter called the Surety, are held and firmly bound unto **City of Port St. Lucie, FL**

as Obligee, hereinafter called the Obligee, in the sum of **One Thousand and 00/100 Dollars (\$1,000.00)**

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the said Principal has submitted a bid for **E-Bid #20230049, Swale Liner Maintenance Area A and B**

NOW, THEREFORE, if the Obligee shall accept the bid of the principal and the Principal shall enter into a Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Obligee 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.

Signed and sealed this 18th day of July, 2023.

Witnesses:

**Aquatic Vegetation Control, Inc.**

(Seal)

*Alison D. Forter*

By: *[Signature]*

**Hartford Fire Insurance Company**



*S Phil Alan*

By: *[Signature]*

**Laura Lee Dipersico, Attorney-In-Fact and Florida Resident Agent, 561-209-1682**

# POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD  
BOND, T-11  
One Hartford Plaza  
Hartford, Connecticut 06155  
[Bond.Claims@thehartford.com](mailto:Bond.Claims@thehartford.com)  
call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

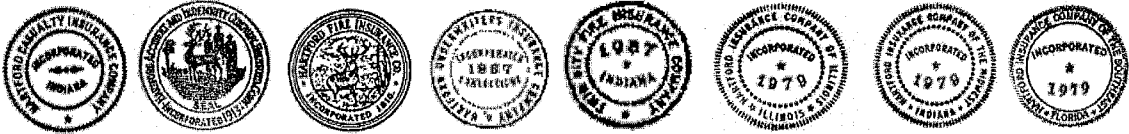
Agency Name: MARSH & MCLENNAN AGENCY LLC  
Agency Code: 21-220411

- Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
- Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
- Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
- Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of Unlimited** :  
Clinton Diers, Laura Lee Dipersico of MIAMI, Florida

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by , and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

**In Witness Whereof**, and as authorized by a Resolution of the Board of Directors of the Companies on May 23, 2016 the Companies have caused these presents to be signed by its Assistant Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



*Shelby Wiggins*

Shelby Wiggins, Assistant Secretary

*Joelle L. LaPierre*

Joelle L. LaPierre, Assistant Vice President

STATE OF FLORIDA

COUNTY OF SEMINOLE

ss. Lake Mary

On this 20th day of May, 2021, before me personally came Joelle LaPierre, to me known, who being by me duly sworn, did depose and say: that (s)he resides in Seminole County, State of Florida; that (s)he is the Assistant Vice President of the Companies, the corporations described in and which executed the above instrument; that (s)he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that (s)he signed his/her name thereto by like authority.



*Jessica Ciccone*

Jessica Ciccone  
My Commission HH 122280  
Expires June 20, 2025

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of July 18, 2023

Signed and sealed in Lake Mary, Florida.



*Keith D. Dozois*

Keith D. Dozois, Assistant Vice President





# Aquatic Vegetation Control, Inc.

Environmental Management

Riviera Beach, FL  
Palm City, FL  
Pembroke Pines, FL  
Florida City, FL

July 18, 2023

Nadia Tourjee  
Procuring Agent  
City of Port St. Lucie  
121 SW Port St. Lucie Blvd  
Port St. Lucie, FL 34984

RE: E-Bid #20230049 - Swale Liner Maintenance - Area A & B

Dear Nadia,

We are responding to your request for a business plan to successfully complete E-Bid #20230049-Swale Liner Maintenance - Area A & B. In this document, we will show our capacity to meet or exceed the City of Port St. Lucie's expectations. Our swale liner maintenance team has the capacity and experience needed for the completion of the project. We are currently maintaining the swale liners in area A since 2021 as the prime contractor and have staff, equipment and support to continue without pause. Additionally, we have maintained the swale liners in Area B on a previous contract from 2017 – 2021.

Aquatic Vegetation Control, Inc. has provided aquatic and terrestrial plant control services for over 30 years at the City. We maintain a facility nearby and our main office is less than an hour away.

## **AVC Facilities**

3449 SW Honey Terrace Palm City, FL 34990 (8 miles from PSL)

This facility will provide support services and office support and will provide equipment staging and base for the project. We have 7 acres of useable space to store materials and equipment.

1860 W. 10<sup>th</sup> St. Riviera Beach, FL 33404 (40 miles from PSL)

This facility will serve as the administrative support including A/R, A/P, Human Resources, Safety, Training, and Contract administration. We also have back up equipment and mechanics at this facility to support the project.

## Equipment Resources

All of our fleet vehicles are leased through Enterprise and are rotated on a 3-year plan to ensure no down time or vehicle breakdowns. All vehicles are equipped with flashing lights and safety equipment to comply with MOT rules. AVC has all the necessary equipment and tools to keep on schedule. The table below shows the equipment already working in Swale Liner Maintenance Area A.

EQUIPMENT DESCRIPTION	QTY
Tandem Axle Dump Trailer	3
Kubota UTV w/ Dump Bed	3
3/4 Ton Super Cab 4x4 Truck	4
Edgers	9
Debris Blowers	6
Custom Shovels to Fit Swale Liners	6
Regular Shovels	6



## Swale Liner Maintenance Team

We will utilize three crews to complete the cycles required to fulfill the contract requirements. Our crew members will be provided by our in house staffing company Field Staff, Inc. All employees, crew members, and support staff wear high visibility clothing and comply with MOT requirements.

**Project Manager:** Cody Barton

Quality control, paperwork, tailgate trainings, supplies, safety items, as well as liner repairs. The crews below can concentrate on production.

**Crew #1**

Crew Supervisor: Barry Gorman

6 Field Staff crew members

**Crew #2**

Crew Supervisor: Donald Bustin

6 Field Staff crew members

**Crew #3**

Crew Supervisor: Ryan Schuiling

6 Field Staff crew members

**Cody Barton**

**Project Manager – Swale Liner Maintenance**

PROJECT HISTORY – 2012 to Present.

**City of Port St. Lucie:** Manage swale liner maintenance production of three crews in Swale area B.

**City of Port St. Lucie:** Manage swale liner maintenance production of three crews in Swale area A.

**City of Port St. Lucie:** Airboat and truck application of herbicides to control invasive and nuisance vegetation, including water hyacinth, water lettuce, hydrilla, alligator weed, torpedo grass, and cattails within the City's 160 mile drainage network.

**FWC:** Airboat application of herbicides to control invasive and nuisance vegetation, including water hyacinth, water lettuce, hydrilla, alligator weed, torpedo grass, and cattails in various locations throughout Florida.

**SFWMD Native Plant Restoration:** Planting of native species such as bulrush within restoration sites adjacent to Lake Okeechobee.

**SFWMD STA's:** Airboat application of herbicides to unwanted terrestrial and aquatic plants within STA 1E and 1W in western Palm Beach County.

### LICENSES AND CERTIFICATIONS

FDACS Pesticide Application for Aquatic and Natural Areas

Leadership Certification, Palm Beach State College

Department of Interior, USA Marine Airboat Training

OSHA Hazardous Materials

Red Cross First Aid and CPR



## Work Plan

We have included a schedule below showing how AVC will stay on pace with the schedule.

<b>YEAR 1 968 MILES TIMES 3 CYCLES = 2904 MILES PER YEAR</b>													
<b>CREW</b>	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>	<b>JAN</b>	<b>FEB</b>	<b>MAR</b>	<b>APR</b>	<b>MAY</b>	<b>JUN</b>	<b>JUL</b>	<b>AUG</b>	<b>SEPT</b>	<b>TOTAL</b>
RYAN	80	82	81	82	82	81	80	80	80	80	80	80	968
DONALD	80	82	81	82	82	81	80	80	80	80	80	80	968
BARRY	80	82	81	82	82	81	80	80	80	80	80	80	968
	240	246	243	246	246	243	240	240	240	240	240	240	2904
<b>YEARS 2-4 968 MILES PER YEAR</b>													
<b>CREW</b>	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>	<b>JAN</b>	<b>FEB</b>	<b>MAR</b>	<b>APR</b>	<b>MAY</b>	<b>JUN</b>	<b>JUL</b>	<b>AUG</b>	<b>SEPT</b>	<b>TOTAL</b>
RYAN	80	82	81	82	82	81	80	80	80	80	80	80	968
DONALD	0	0	0	0	0	0	0	0	0	0	0	0	0
BARRY	0	0	0	0	0	0	0	0	0	0	0	0	0
	80	82	81	82	82	81	80	80	80	80	80	80	968

Each crew will cut grass and weeds along the swale liner that prevents water flow using edgers, then dirt and debris are collected with shovels and transported to dump trailers. In addition, non-organic debris is also collected and disposed separately. Dirt and debris three feet into the culverts are shoveled out. We use blowers to ensure the liners are clear of debris. When liners are underwater, we start at the outfall and work backwards, when feasible. All debris, organic and non-organic, is hauled offsite regularly throughout the day and disposed at the City designated site. We expect each crew will average between 4.5 to 5 miles per day of swale liner maintenance. The schedule above shows how we will cover 240 + miles of swale liners each month and 2904 miles per year as required by the contract for Year 1. We will assign each crew to a section of the City to stay on rotation. We recommend that Crew #1 is assigned to Eastern, Crew #2 assigned to Central, and Crew #3 assigned to Western. We are currently completing Area A with 3 crews on a 6 cycle per year schedule. A 3 cycle per year schedule will increase effort needed because grass/weed growth and wet material will be increased on a 3 cycle per year schedule in year 1. Years 2 - 4 will require 1 crew to keep the 1 cycle per year schedule on track.

For swale liners under 20 feet that are damaged or missing, AVC will request materials from the City to repair and install new liner. Pins are installed as needed by the crews during the regular rotation. Anything occurring on resident's property that impedes water flow, such as failed culverts, inappropriate structures, or anything prohibited by the City will be reported to City staff as necessary.

Our Project Manager, Cody Barton, will meet with City staff in a pre-work meeting before any work starts to discuss the expectations, clarify the scope of work, and determine an initial schedule/start point. The project will be set up in the AVC accounting system and Daily Progress Reports (DPR's) will be generated to document

the work completed by each crew every day including personnel, hours, and miles completed. The DPR's are the documentation we use to verify invoice amounts and provide accurate invoices. We can also provide maps of the completed and scheduled areas.

### **Safety and Accident Prevention Plan**

A complete copy of AVC's Safety Plan will be provided to the City upon request. AVC has designated John Sullivan, Safety Officer, as the safety administrator for this contract. He will be responsible for administrating the accident prevention program for the Contract, which will involve training, on site safety equipment, first aid equipment, as well as outlining work in such a manner as to prevent accidents.

In the event of an accident, City staff will be immediately notified. Depending on the type of accident, notification to other agencies may be required.

Crews will operate in a safe and efficient manner without causing soil disturbance or rutting. If grass is disturbed, we will replace the damaged turf with sod promptly and professionally. The crews will be organized and have the proper tools and extra equipment to reduce down time due to equipment in need of repair.

### **E-Verification Process**

AVC is a certified E-Verified company, Company ID #294744, having obtained this certification in 2010 in response to Federal and State contracting requirements. From 2010 moving forward all new hires are verified as eligible for legal employment in the US within three days of being hired by AVC.

The AVC team sincerely appreciates the opportunity to submit this plan to the City of Port St. Lucie for Swale Liner Maintenance Areas A & B. AVC understands and accepts all terms and conditions at set forth in the E-bid documents as published by the City of Port St. Lucie and we intend to be compliant on every aspect of the submittal. Our primary goal in developing a project team for this submittal was to provide a group of qualified personnel capable of providing the most cost effective and technically sound maintenance and reporting program. We believe that our team achieves that goal and, once again, thank you for the opportunity to provide continuing services to the City of Port St. Lucie.

Sincerely,



Sharon Gillenwalters  
President/CFO



# 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.  
**Aquatic Vegetation Control, Inc.**

**2** Business name/disregarded entity name, if different from above

**3** Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ \_\_\_\_\_

**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.

Other (see instructions) ▶ \_\_\_\_\_

**4** 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) \_\_\_\_\_  
(Applies to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.) See instructions.  
**1860 W 10th Street**

**6** City, state, and ZIP code  
**Riviera Beach, FL 33404**

**7** List account number(s) here (optional)

Requester's name and address (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.

**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.

**Social security number**

			-			-					
--	--	--	---	--	--	---	--	--	--	--	--

**or**

**Employer identification number**


5	9	-	2	7	8	4	0	1	2
---	---	---	---	---	---	---	---	---	---

## Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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.

**Sign Here**    Signature of U.S. person ▶     Date ▶ **7/5/2023**

## 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)

4/6/2023

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).

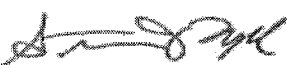
<b>PRODUCER</b> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 562-746-4546      FAX (A/C, No): E-MAIL: FLcertificates@MarshMMA.com ADDRESS:	
	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b> Aquatic Vegetation Control, Inc. 1860 W 10th St Riviera Beach FL 33404	<b>INSURER A:</b> Brierfield Insurance Company	10993
	<b>INSURER B:</b> Monroe Guaranty Insurance Company	32506
	<b>INSURER C:</b> National Trust Insurance Company	20141
	<b>INSURER D:</b> StarNet Insurance Company	40045
	<b>INSURER E:</b> FCCI Insurance Company	10178
	<b>INSURER F:</b> Evanston Insurance Company	35378

**COVERAGES**      **CERTIFICATE NUMBER:** 1221246202      **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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <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"/> AUTOS ONLY		CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE DED    RETENTION \$		UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
D	<input checked="" type="checkbox"/> 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	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E F	<input type="checkbox"/> CONTRACTORS EQUIPMENT <input type="checkbox"/> CONTRACTORS POLLUTION LIABILITY		CM10007635201 MKLV2ENV103407	4/1/2023 4/1/2023	4/1/2024 4/1/2024	LIMIT \$ 942,000 LIMIT \$ 1,000,000 AGGREGATE \$ 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 RE: #20210004 Swale Liner Maintenance Area A City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents, and Contract# 20210004 Swale Liner Maintenance- Area A are listed as additional insured as per form #CG 20 11 04 13. A Waiver of Transfer of Rights of Recovery Against Others pertains to the General Liability, Auto, and Worker's Comp policies.

<b>CERTIFICATE HOLDER</b>  City of Port St. Lucie 121 SW Port St. Lucie Blvd. Port St. Lucie FL 34984	<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  

# *State of Florida*

## *Department of State*

I certify from the records of this office that AQUATIC VEGETATION CONTROL, INC. is a corporation organized under the laws of the State of Florida, filed on October 13, 1986, effective October 9, 1986.

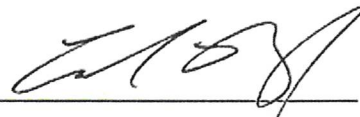
The document number of this corporation is J38016.

I further certify that said corporation has paid all fees due this office through December 31, 2023, that its most recent annual report/uniform business report was filed on February 6, 2023, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Sixth day of February, 2023*

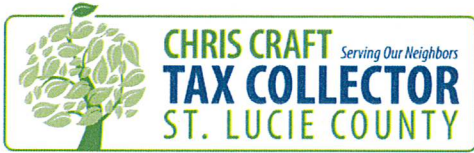


  
*Secretary of State*

Tracking Number: 7141352903CC

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

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



**2022 - 2023**

**St. Lucie County Local Business Tax Receipt**

Facilities or machines #                      Rooms #                      Seats #                      Employees #15                      Receipt #1022722  
Type of business 7299 MISC/PUBLIC SERVICE (Environmental Services)                      Expires SEPTEMBER 30, 2023

DBA name    Business Aquatic Vegetation Control, Inc.

Mailing address: James L. Burney, Jr.  
1860 W. 10th St.  
Riviera Beach, FL 33404                      Business location: 3449 SW Honey Terrace  
Palm City, FL 34990

RENEWAL		City of Pt St Lucie	
Original tax:	\$27.55	3420-560-2274-000/5	J38016
Penalty:	\$6.89		
Collection cost:	\$5.00	Paid 06/26/2023 39.44	0025-20230626-041900
Total:	\$39.44		

Law requires this Local 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. Upon failure to do so, the local business taxpayer shall be subject to the payment of another Local Business Tax for the same business, profession or occupation.

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 the succeeding year. Those Local Business Tax Receipts renewed beginning October 1 shall be delinquent and subject to a delinquency penalty of 10 percent for 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.

In addition to the penalty, the Tax Collector is entitled to a collection fee of \$1 to \$5. This fee is based on the amount of Local Business Tax, which will be collected from delinquent taxpayers after September 30 of the business year.

This receipt is a Local Business Tax only. It does not permit the local business taxpayer to violate any existing regulatory or zoning laws of the state, county or city. It also does not exempt the local business taxpayer from any other taxes, licenses or permits that may be required by law.

Pursuant to Florida law, Local Business Taxes are subject to change.

James L. Burney, Jr.  
1860 W. 10th St.  
Riviera Beach, FL 33404





# Aquatic Vegetation Control, Inc.

**Environmental Management**

Riviera Beach, FL  
Palm City, FL  
Pembroke Pines, FL  
Florida City, FL

## **EXECUTIVE SUMMARY**

Aquatic Vegetation Control, Inc. (AVC), recognized as an innovative leader in aquatic and terrestrial vegetation management, is a Florida corporation founded in 1986 primarily as an aquatic and roadside vegetation management company. The company is based on three fundamental principles: quality, value, and responsible stewardship. Since its incorporation, AVC's scope of services has expanded to include upland and aquatic invasive plant control, mitigation planting and maintenance, hydro-ecological restoration projects, weed sciences research and development, utility right-of-way and infrastructure vegetation control, and utility emergency response field transportation services.

From AVC's family owned start in 1986 with 4 employees, the company has grown to currently employ 105 full time employees and 130-180 contract workers per day operating out of four facilities located in Florida. In order to perpetuate its strong sense of unity, AVC adopted an Employee Stock Ownership Plan trust in 2008 whereby the company is now 40% employee owned, representing the majority stock ownership. With the corporate headquarters located in Riviera Beach since 1992, many current projects, are managed and logistically supported directly from this established facility. In addition to this home facility, there are three other warehouse offices located in Florida: Palm City, Pembroke Pines, and Florida City.

Aquatic and terrestrial vegetation management experience, includes AVC providing all administration, management, supervision, labor, equipment, and materials needed to treat: (1) invasive upland and aquatic plants for the South Florida Water Management District through five consecutive contracts since 1998; (2) invasive upland plants for Martin County ESLP through uninterrupted contracts since 2002; (3) invasive upland and aquatic plants for Florida Department of Environmental Protection and Florida Fish and Wildlife Conservation Commission through uninterrupted contracts since 1999; (4) invasive aquatic and upland plants for the City of Port St. Lucie through uninterrupted contracts since 1986; and (5) invasive aquatic and upland plants for Palm Beach County ERM through uninterrupted contracts since 1999. In addition to the references presented here, the cumulative area of Florida's waterways and natural lands treated though AVC's 37 years' of experience has not been officially calculated, but stretches from Key West Naval Air Station to the Pensacola area's Gulf Shores Wildlife Refuge and is in excess of one million acres.

To this day, AVC's fundamental principles of quality work, positive client relations, value added services, and the responsible care of aquatic and terrestrial systems under our stewardship, remain the driving influences that allow AVC to be considered a leader in providing vegetation management solutions throughout Florida. In addition to these core values, the company is also committed to increasing the quality of the communities in which we conduct business. This is accomplished through involvement in many professional organizations, as well as providing volunteer support for community and environmental events.

The professionals at AVC are proud to be among those supporting the management of natural resources in the State of Florida, be it upland or wetland, freshwater or estuarine, for both the private and public sectors. We support each client by providing a competent staff of professionals capable of delivering innovative, cost-effective management and reporting programs while functioning as an extension of the client's team in all aspects of a project. In short, AVC's use of experienced professionals, dependable equipment, extensive knowledge of herbicides and best management practices, practical experience gained from a variety of projects, a safety-driven culture, and current positive working relationships with state and local regulatory agencies are just a few of the qualifications that make AVC the optimal choice for providing such services.

AVC supports the following organizations through contributions and service:

- ✓ Florida Aquatic Plant Management Society (FAPMS)
- ✓ Florida Vegetation Management Association (FVMA)
- ✓ Florida Invasive Species Council (FISC)
- ✓ Invasive Plant Management Association (IPMA)
- ✓ Aquatic Ecosystem Restoration Foundations (AERF)
- ✓ North American Invasive Species Management Association (NAISMA)
- ✓ Responsible Industry for a Sound Environment (RISE)
- ✓ South Florida Aquatic Plant Management Society (SFAPMS)

## RANGE OF SERVICES

Since establishment in 1986, AVC has broadened its scope of services to include:

- Aquatic Vegetation Control
  - golf course and private community waterways
  - utility and road rights-of-way
  - drainage system networks
  - public lakes and waterways
  - stormwater treatment areas (STAs)
  - retention/detention ponds
- Holistic Lake Management Services.
  - professional consultation and representation
  - water quality and sediment monitoring
  - turbidity control
  - aeration system and fountain sales and service
  - harvesting/mechanical removal of nuisance vegetation
  - bacterial and enzymatic nutrient removal
  - organic sediment reduction
  - grass carp stocking
  - native fish stocking
- Upland and Wetland Invasive Vegetation Control
  - public conservation and natural areas
  - private conservation areas and ranchland
  - utility and road rights-of-way
  - stormwater treatment areas (STAs)
  - mitigation banks and onsite mitigation areas
  - private urban preserves
  - military installations
- Ecosystem Restoration and Mitigation
  - management and monitoring plan preparation and implementation
  - native plant installation
  - invasive plant maintenance of planted areas
  - wetland construction
- Ecological Resource Assessment
  - vegetation resource mapping
  - threatened or endangered species surveys
  - critical habitat analysis
  - aquatic macro invertebrate studies
  - fisheries investigations
- Nuisance Terrestrial Vegetation Control
  - DOT rights-of-way
  - utility rights-of-way and facilities
  - plant growth regulators
  - forestry vegetation management
- Surface Water and Groundwater Quality Studies



## Aquatic Vegetation Control, Inc. Company-Owned Equipment Fleet

<u>Equipment</u>	<u>Number</u>	<u>Uses</u>
Aluminum Airboat	34	Crew Transport, Aquatic Application
Argo 6x6 or 8x8	21	Crew Transport, Herbicide Application
¾ Ton Buggy 4x4	14	Crew Transport, Survey
Micro Buggy	1	Herbicide Application
UTV, 4x4	6	Herbicide Application
ATV 4x4	8	Transportation, Herbicide Application
Mowers	14	Mowing ROW, Trails, Ret/Det Pond Areas
Skiff, 21 ft	1	Crew Transport, Equipment Barge
Scout, 21 ft	1	Crew Transport: Deep Water
Skiff, 14 ft	8	Aquatic Application
Jon Boat, 12-14	5	Aquatic Application, Crew Transport
Gheenoe	3	Urban Aquatic Application
Tractor, 30 hp	1	Nursery Operations, Mowing
Chipper	1	Chipping vegetation debris on-site
Cargo Trailer	17	Secure Storage and Transport
Utility Trailer	18	Small Equipment Transport
Utility Trailer, tandem	3	Buggy/Tractor Transport
Water Tanker	4	Application Support, Plant Watering
Vortex Blower	2	Delivery of Granular Pesticides
Backpack	300	Herbicide Application

## REFERENCES

**Lake Worth Drainage District**  
Aquatic Application Services

**Client:**

James Schultz  
13081 South Military Trail  
Delray Beach, FL 33484  
Phone: 844-306-5933  
E-mail: jschultz@lwdd.net

**Contractor Status:** Prime

**Services Provided:** Aquatic vegetation control within the District's jurisdiction

**Project Revenue:** \$19,300.00 annual

**Contract Amount:** \$11,000.00 (current work order) Fandrey ditch \$1,800.00 per treatment \$6,500.00 (work order)

**Project Duration:** 2018 - present

**Completion Date:** September 2023

**Project Manager:** Linda Defee

AVC is contracted to provide aquatic herbicide applications in canals in the district. The treatments address water hyacinth, water lettuce, hydrilla, crested floating heart and shoreline weeds. The equipment in use includes skiffs, airboats, trucks and potentially UTV's.

In addition to the canals, we have been providing herbicide applications in the Fandrey ditch requiring deployment of specialized equipment such as an Argo or custom mini swamp buggy for several years. AVC has a multitude of specialized equipment to access difficult terrain.

AVC Airboats and some skiffs are designed to apply herbicide by "direct injection" method that improves efficiency by three times over conventional tank application methods. Application methods include foliar, submerged injection, direct injection, low volume, and boomless broadcast.

## **Palm Beach County Environmental Resource Management**

Ground Application for Exotics, Wetland, and Vegetation Control Zones 1 and 2

### **Client:**

Brenda Hovde, Director  
Environmental Resource Management  
Palm Beach County  
2300 North Jog Road, 4th Floor  
West Palm Beach, FL 33411-2743  
Phone: (561) 233-2487  
E-mail: bhovde@pbcgov.org

**Contractor Status:** Prime

**Services Provided:** Treatment and removal of invasive vegetation within wetland, estuarine and upland preserves

**Project Revenue:** \$4,000,000/annual average

**Project Duration:** initiated 1998, ongoing

**Completion Date:** 5-year contract expiring September 30, 2026

**Project Manager:** Cody Kenny

AVC is contracted by the County ERM to provide exotic vegetation treatment and removal services for their environmental lands program consisting of >31,000 acres. The sites range from spoil islands in the Lake Worth Lagoon to Yamato Scrub to large freshwater wetland/upland systems (Cypress Creek, Pond Cypress) to very large wetland/upland systems (Loxahatchee Slough). Target species include treating and removing guava, climbing fern, moon vine, Australian pine, bowstring hemp, melaleuca, Scaevola, mahoe, downy rose myrtle, Brazilian pepper, nutsedge, and other invasive species. Projects include both initial treatments and regular maintenance events. Treatment methods include foliar, low volume, boomless broadcast, basal bark, and hand removal.

There are currently nine, 10-person crews dedicated to this project. In addition to invasive plant control, AVC maintained fence lines around the properties with herbicide applications.



**Florida Department of Transportation**  
District 4 Invasive Vegetation Control

**Client:**

Nicole Carter  
Stantec, Inc.  
901 Ponce de Leon Blvd., Suite 900  
Coral Gables, Florida 33134  
Phone: 305.445.2900  
Email: Nicole.carter@stantec.com

**Contractor Status:** Subcontractor

**Services Provided:** Invasive species control and native plantings in mitigation areas

**Project Revenue:** \$120,000 annual average

**Contract Amount:** \$500,000 over four years

**Project Duration:** 2012 – 2017, 2017 - present

**Completion Date:** December 2023

**Project Manager:** Kevin Damaso

AVC is subcontracted by Stantec to furnish all supervision, labor, equipment, and materials (including herbicides) necessary to treat exotic and nuisance vegetation in FDOT District 4 mitigation areas. To date, the mitigation areas include the Sheridan Street boardwalk, Pond Apple Slough mitigation area, C-18, SR A1A, and Mapp road created wetland. Target species include Brazilian pepper, Australian pine, lather leaf, melaleuca, mahoe, Sansevieria, lead tree, cattails, torpedo grass, air potato/yam, primrose, and other invasive species. Treatments are conducted by airboat, Argo amphibious vehicle, backpack, hand wicking, and hand removal. Application methods include low volume, foliar, and hack/squirt.

In addition to the mitigation maintenance, AVC has provided mitigation planting services to restore over 25 acres of mangrove habitat and thirty acres of upland buffer.

## South Florida Water Management District

Ground Application Services

### Client:

Leroy Rodgers  
3301 Gun Club Road  
West Palm Beach, Florida 33406  
Phone: (561) 682-2773  
E-mail: lrodders@sfwmd.gov

**Contractor Status:** Prime

**Services Provided:** Aquatic and Upland nuisance vegetation control within the District's jurisdiction

**Project Revenue:** \$2,500,000 annual average

**Contract Amount:** \$10,000,000 over five years

**Project Duration:** 2011 – 2016, 2016 – 2020, 2020 - present

**Completion Date:** September 2025

**Project Managers:** Linda Defee, Dominick Dulevich, Travis Schwalm, Paul Terry

AVC was awarded a fifth, five-year general contract renewal to perform ground application services on an hourly basis for the South Florida Water Management District. Primary tasks are the treatment of melaleuca, Brazilian pepper, Australian pine, lygodium, and other invasive species using nine to ten 6-person ground crews. Work orders include treating invasive plants within the stormwater treatment areas, water conservation areas, Loxahatchee National Wildlife Refuge, Modellands, Frog Pond, C-18, Southern Glades, Lakebelt, and canals and levees within the District.

In addition to invasive plant control, AVC performs aquatic and ROW vegetation management in district canals, levees, and stormwater treatment areas. Aquatic and ROW applications are conducted by 9-10 aquatic applicators using trucks, Argos, skiffs, and airboats. Airboats are designed to apply herbicide by "direct injection" method that improves efficiency by three times over conventional tank application methods. Application methods include foliar, submerged injection, direct injection, low volume, and boomless broadcast. Average acreage treatment totals are approximately 8,000 per year.

## **Northern Palm Beach County Improvement District**

Invasive Plant Control in Preserve Areas, Aquatic Weed Control, and Marsh Maintenance

### **Client:**

Sam Payson, Staff Biologist  
359 Hiatt Dr.  
Palm Beach Gardens, FL 33418  
Phone: (561) 624-7830  
E-mail: sam@npbcid.org

**Contractor Status:** Prime

**Services Provided:** Treatment and removal of invasive vegetation within wetland and upland preserves, treatment and removal of aquatic vegetation within 604 acres of lakes and wetlands at PGA National (Unit 11) and Ibis GCC (Unit 18), treatment and removal of aquatic vegetation in surface water and created marshes within NPBCID jurisdiction.

**Project Revenue:** \$2,000,000 annual average

**Contract Amount:** \$2,000,000 per year

**Project Duration:** 2011 – present

**Completion Date:** September 2024

**Project Manager:** Kevin Damaso

AVC is contracted to provide nuisance and aquatic vegetation control services in both upland and wetland preserves along with surface water and created marshes throughout the 400 square mile Northern Palm Beach County Improvement District jurisdiction. Work includes both initial treatments and regular maintenance events in urban and non-urban preserves and waterways. Treatment methods include foliar, low volume, submerged, granular broadcast, boomless broadcast, hack/squirt, and hand removal. Equipment used to provide these services include airboat, truck, UTV, and backpack.

There are currently two 6-person crews, and five applicators dedicated to this project. In addition to invasive plant control, AVC maintains fence lines around the properties with herbicide vegetation management.

AVC is also contracted to provide aquatic vegetation control services in lakes and wetlands within PGA National (261 acres) and Ibis Golf and Country Club (343 acres) for the Northern Palm Beach County Improvement District. Previous contracts date back to 1995. AVC has also been contracted on two occasions by NPBCID to provide initial cleanup services after other contractors failed to meet the maintenance levels required by the district.



Work includes both herbicide treatments and manual removal, marsh maintenance events in waterbodies under the management of the NPBCID. Treatment methods included foliar, submerged, granular broadcast, and hand removal. Equipment used to provide these services include airboat, truck, ATV/mule, backpack, small dump truck, ATV, and trailer.

Currently, marsh maintenance is completed by two 8-person crews pulling weeds out of created marshes and hauling to an approved waste facility. These crews also harvest and transplant native aquatic plants within the created marshes. There are currently five aquatic applicators dedicated to this project.

## **Florida Power & Light**

Invasive Vegetation Control at the Everglades Mitigation Bank - Turkey Point Nuclear Plant

### **Client:**

Brian Yates  
700 Universe Blvd.  
Juno Beach, FL 33408  
Phone: (561) 691-7060, Cell: (772) 214-6597  
E-mail: Brian.Yates@fpl.com

**Contractor Status:** Prime

**Services Provided:** Aquatic and Upland invasive plant control in Phase I and II at the FPL EMB

**Project Revenue:** \$226,481 annual average

**Contract Amount:** \$679,444 over three years

**Project Duration:** 2013 – 2017, 2018 – 2021, 2021 - 2024

**Completion Date:** 2024

**Project Manager:** Dominick Dulevich

AVC is contracted by FPL to provide invasive vegetation control services for their Everglades Mitigation Bank near Homestead Florida. The work areas are divided into Phase I (4,389 acres) and Phase II (5,479 acres) and consists of monitoring/controlling invasive plants to sustain the necessary mitigation credits for FPL.

The work areas are extremely remote and can only be accessed by airboat, Argo and on foot. Some of the representative species controlled include Australian pine, Brazilian pepper, Shoebuttton ardisia, cattails, colubrine, and other invasive species. Typically two – three 8-person crews are utilized for this project.

AVC has completed multiple multi-year maintenance cycles for FPL at this site dating back to the initial treatment for Phase I in 1998.

## **Martin County**

Drainage, Wetland, and Upland Maintenance

### **Client:**

Michael Yustin  
2401 SE Monterey Road  
Stuart, FL 34996  
Phone: (772) 220-7114  
E-mail: myustin@martin.fl.us

**Contractor Status:** Prime

**Services Provided:** Treatment and removal of invasive vegetation within wetland, estuarine, aquatic and upland areas; native plant supply and installation

**Project Revenue:** \$400,000 annual average

**Contract Amount:** \$1,200,000 over three years

**Project Duration:** 2012 – 2017, 2021 - 2024

**Completion Date:** 2024

**Project Managers:** Cody Kenny

AVC has been contracted by the County to provide drainage, wetland and upland maintenance throughout Martin County and is contracted to provide invasive vegetation control on the County's Environmentally Sensitive Lands Program.

Environmentally Sensitive Lands Program: Invasive plant control and native plant supply/installation. Exotic vegetation treatment and removal services for their environmental lands program consisting of >1,600 acres. Target species includes treating and removing guava, climbing fern, moon vine, Australian pine, bowstring hemp, melaleuca, Scaevola, mahoe, downy rose myrtle, climbing fern, Brazilian pepper, and other invasive species. Work included both initial treatments and regular maintenance events. Treatment methods include foliar, low volume, boomless broadcast, and hack/squirt. AVC provided and installed over 55,000 native wetland and upland plants at Kitching Creek restoration area.

Engineering Department Stormwater Treatment Areas: Invasive and aquatic plant control. Manual invasive plant removal and selective low volume herbicide treatments were conducted to maintain the functions of STAs for water quality improvement and holding capacity.

Mosquito Control: Aquatic Plant Control in lakes, ditches and canals. Aquatic weed control to vegetation within drainage systems throughout the county to decrease mosquito breeding sites.

Typically two 4-person crews and two applicators work on this project using trucks, ATV's, Argos, skiffs, airboats, Gheeno's, buggies. AVC continues to



provide invasive plant control for the ESL program with a contract spanning from 2021-2024 on an as needed basis.

## **City of Port St. Lucie**

Aquatic and Wetland Maintenance, Invasive Plant Control, ROW Mowing, Swale Liner Maintenance, Bacteria Augmentation

### **Client:**

John Dunton, Assistant Public Works Director  
450 SW Thornhill Dr.  
Port St. Lucie, FL 34984  
Phone: (772) 344-4002  
E-mail: JDunton@cityofpsl.com

**Contractor Status:** Prime

**Services Provided:** Treatment and removal of invasive vegetation within wetland, estuarine, aquatic and upland areas; Invasive Plant Control within urban areas; ROW mowing, swale liner maintenance, bacteria augmentation

**Project Revenue:** \$2,700,000 annual average

**Contract Amount:** \$13,500,000 to date for current contract

**Project Duration:** 1986 – present

**Completion Date:** October 2023

**Project Managers:** Kyle Rypma

AVC is contracted by the City since 1986 to provide drainage, wetland, and upland maintenance throughout the City of Port St. Lucie. The contract has expanded to include stormwater treatment area maintenance, invasive plant control, right-of-way mowing, swale liner maintenance, and bacteria augmentation. Work consists of aquatic plant control in lakes, ditches, canals, stormwater treatment areas, greenways, and urban areas throughout the City along with mowing services and swale liner maintenance services throughout the City.

Work includes both herbicide treatments, manual removal, and bacteria augmentation in waterbodies; ground herbicide treatments for Brazilian pepper in urban areas; low-volume herbicide treatments in stormwater treatment areas; ROW mowing in urban areas; and swale liner maintenance in urban areas. Herbicide treatment methods included foliar, submerged, granular broadcast, and hand removal. Equipment used to provide these services include trucks, trailers, airboats, skiffs, Argos, backpacks, mowers, weed eaters, and edgers.

There are currently 14 applicators and crew supervisors along with 36 crew members dedicated to these projects.

## **City of Weston**

Mitigation Area Invasive Vegetation Management and City Waterways  
Vegetation Management

### **Client:**

Reddy Chitepu, P.E., Director of Public Works  
20200 Saddle Club Road  
Weston, Florida 33327  
Phone: (954) 385-2600  
E-mail: rchitepu@westonfl.org

**Contractor Status:** Prime

**Services Provided:** Treatment and removal of invasive vegetation within wetland, and littoral mitigation areas, herbicide treatment of waterways with the City

**Project Revenue:** \$707,000 annual average

**Contract Amount:** \$3,535,000

**Project Duration:** 2017 – present

**Completion Date:** 2024

**Project Managers:** Hughie Cucurullo

AVC is contracted to provide mitigation area maintenance for the City of Weston in over 2,000 acres of mitigation area since 2007. We are the only contractor to provide compliance for the City of Weston in their mitigation areas. Target species include climbing fern, Australian pine, melaleuca, Brazilian pepper and other FLEPPC category I invasive plants. Work includes regular maintenance events to control invasive plants for compliance. Treatment methods include foliar, low volume, cut stump and hack/squirt. Equipment used to provide these services include airboats, skiffs, Argo, UTV's and trucks. Additionally, AVC maintains City of Weston waterways, keeping a clear water surface from invasive/nuisance plants as well as drainage maintenance. The target plants include cattails, torpedograss, bladderwort, hydrilla, hygrophila, and floating algae. Equipment used to provide these services include Skiffs, UTV's, and trucks. AVC removes floating debris such as coconuts, trash and other vegetative matter and disposes of material off-site.



## **Fish and Wildlife Conservation Commission**

Aquatic Vegetation Control Services

### **Client:**

Kat Ethridge

3800 Commonwealth Blvd, M.S. 705

Tallahassee, Florida 32399

Phone: (850) 717-2129

E-mail: Evelyn.Ethridge@myfwc.com

**Contractor Status:** Prime

**Services Provided:** Treatment of aquatic vegetation in Lake Okeechobee

**Project Revenue:** \$500,000 annual average

**Project Duration:** 2018 – present

**Completion Date:** 2028

**Project Manager:** Linda Defee

AVC is contracted to provide treatment of floating vegetation in eligible water bodies with SFWMD jurisdiction including Lake Okeechobee using airboats. Target species include water lettuce and water hyacinth. Treatment methods include foliar and direct injection.

## **St. Lucie County Board of County Commissioners**

Aquatic Vegetation Control and Lake Slope Mowing Services

### **Client:**

William Cornelius, Stormwater Inspector

2300 Virginia Avenue

Fort Pierce, Florida 34982

Phone: (772) 999-1374

E-mail: CorneliusW@stlucieco.org

**Contractor Status:** Prime

**Services Provided:** Treatment of nuisance vegetation and lake slope mowing

**Project Revenue:** \$280,000 annual average

**Project Duration:** 2018 – present

**Completion Date:** 2023

**Project Manager:** Travis Schwalm

AVC is contracted to provide all labor, materials, equipment for the chemical treatment and physical removal of nuisance vegetation in drainage rights-of-way, waterways, lakes, and ponds including water lettuce for the Mosquito Control Department. Other target species include border grasses and brush to the water's edge, hydrilla, cattails, broadleaf weeds, grasses, and other waterborne weeds and vegetation that are unsightly or impede the flow of water. Slope mowing, weedeating, and debris removal is performed around all waterbodies during each cycle.

## **Palm Beach County Board of County Commissioners**

Dry and Aquatic Vegetation Maintenance for Retention/Detention Ponds

### **Client:**

Brian Powell  
50 South Military Trail  
West Palm Beach, Florida 33415  
Phone: (561) 233-3960  
E-mail: [bwpowell@pbcgov.org](mailto:bwpowell@pbcgov.org)

**Contractor Status:** Prime

**Services Provided:** Mowing, Littoral Zone Maintenance, and Pond Maintenance

**Project Revenue:** \$75,300 annual average

**Project Duration:** 2018 – present

**Completion Date:** 2028

**Project Manager:** Travis Schwalm

AVC is contracted to provide all labor, materials, equipment for the mowing and trimming of all turf areas, poles, trees, posts, guardrails, guy wires, bus benches, fences, walls, and beds including curbs, sidewalks, and pathways within the retention/detention pond areas. For littoral and pond maintenance, AVC performs chemical treatment and physical removal of nuisance vegetation along with debris removal. Target species include grasses and brush around the water's edge, hydrilla, cattails, broadleaf weeds, grasses, and other waterborne weeds and vegetation that are unsightly or impede the flow of water along with earleaf acacia, Australian pine, lygodium, melaleuca, downy rose myrtle, Brazilian pepper, and any other invasive or nuisance plant species.



**Village of Royal Palm Beach**  
Aquatic Vegetation Maintenance

**Client:**

Michael Cheatham  
1050 Royal Palm Beach Boulevard  
Royal Palm Beach, Florida 33411  
Phone: (561) 718-8215  
E-mail: mcheatham@royalpalmbeach.com

**Contractor Status:** Prime

**Services Provided:** Aquatic Vegetation Maintenance within Village Boundaries

**Project Revenue:** \$173,100 annually

**Project Duration:** 2018 – present

**Completion Date:** 2025

**Project Manager:** Kevin Damaso

AVC is contracted to provide all labor, materials, and equipment for the control of canal bank growth, emergent weeds, and submerged weeds along with littoral maintenance and public posting. AVC is responsible for managing the Village's canal systems to provide maintenance control of the aquatic vegetation within the canals for flood control, fishing, boating, and aesthetic purposes using a full system treatment strategy using multiple herbicides to target specific vegetation in treatment areas. Target species include hygrophila, cabomba, rotala, chara, water hyacinth, water lettuce, cattails, broadleaf weeds, hydrilla, coon-tail, crested floating heart, spatterdock, tape grass, pondweed, and torpedo grass. Target shoreline species include melaleuca, Brazilian pepper, Australian pine, and earleaf acacia.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/6/2023

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> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
<b>INSURED</b> AQUATVEGET1 Aquatic Vegetation Control, Inc. 1860 W 10th St Riviera Beach FL 33404	<b>INSURER A :</b> Brierfield Insurance Company		10993
	<b>INSURER B :</b> Monroe Guaranty Insurance Company		32506
	<b>INSURER C :</b> National Trust Insurance Company		20141
	<b>INSURER D :</b> StarNet Insurance Company		40045
	<b>INSURER E :</b> FCCI Insurance Company		10178
	<b>INSURER F :</b> Evanston Insurance Company		35378

**COVERAGES**

CERTIFICATE NUMBER: 1094632743

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> <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			CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input checked="" type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
D	<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	N/A	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E	<b>CONTRACTORS EQUIPMENT AND POLLUTION LIABILITY</b>			CM10007635201	4/1/2023	4/1/2024	LIMIT	942,000
F				MKLV2ENV103407	4/1/2023	4/1/2024	LIMIT AGGREGATE	1,000,000 3,000,000

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

1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 RE: E-BID #20170006-SWALE LINER MAINTENANCE-AREA B City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents are included as Additional Insured on General liability, Auto Liability and Excess Liability policies as required by written contract. Insurance is primary and non-contributory. Waiver of Subrogation applies in favor of Additional Insureds on General Liability, Auto Liability, Excess Liability and Worker's Compensation policies as required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

City of Port St. Lucie 121 S.W. Port St. Lucie Blvd. Port St. Lucie FL 34984-5099	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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<b>PRODUCER</b> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C No.):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
INSURER A : Brierfield Insurance Company			10993
INSURER B : Monroe Guaranty Insurance Company			32506
INSURER C : National Trust Insurance Company			20141
INSURER D : StarNet Insurance Company			40045
INSURER E : FCCI Insurance Company			10178
INSURER F : Evanston Insurance Company			35378

**COVERAGES** **CERTIFICATE NUMBER: 1221246202** **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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> <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			CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input checked="" type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
D	<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	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E	<b>CONTRACTORS EQUIPMENT AND POLLUTION LIABILITY</b>			CM10007635201 MKLV2ENV103407	4/1/2023 4/1/2023	4/1/2024 4/1/2024	LIMIT 942,000 LIMIT 1,000,000 AGGREGATE 3,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 RE: #20210004 Swale Liner Maintenance- Area A City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents, and Contract# 20210004 Swale Liner Maintenance- Area A are listed as additional insured as per form #CG 20 11 04 13. A Waiver of Transfer of Rights of Recovery Against Others pertains to the General Liability, Auto, and Worker's Comp policies.

<b>CERTIFICATE HOLDER</b>  City of Port St. Lucie 121 SW Port St. Lucie Blvd. Port St. Lucie FL 34984	<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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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/6/2023

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**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> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
INSURER A : Brierfield Insurance Company			10993
INSURER B : Monroe Guaranty Insurance Company			32506
INSURER C : National Trust Insurance Company			20141
INSURER D : StarNet Insurance Company			40045
INSURER E : FCCI Insurance Company			10178
INSURER F : Evanston Insurance Company			35378

**COVERAGES** **CERTIFICATE NUMBER: 1876247781** **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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> <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			CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input checked="" type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
D	<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	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E	<b>CONTRACTORS EQUIPMENT AND POLLUTION LIABILITY</b>			CM10007635201	4/1/2023	4/1/2024	LIMIT	942,000
F				MKLV2ENV103407	4/1/2023	4/1/2024	LIMIT AGGREGATE	1,000,000 3,000,000

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

1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 General Liability Deductible: \$10,000 Combined BI/PD/ALAE Per Occurrence. RE: REFERENCE NO. 90-007590-20040116-3-0. CONTRACT # 20040116, AMENDMENT #3, BRAZILIAN PEPPER TREE REMOVAL. THE CITY OF PT. ST. LUCIE, POLITICAL SUBDIVISION OF THE STATE OF FLORIDA, ITS OFFICERS, EMPLOYEES AND AGENTS ARE LISTED AS ADDITIONAL INSURED WITH RESPECT TO GENERAL LIABILITY COVERAGE (LG3180 0907) AND AUTOMOBILE LIABILITY COVERAGE (AX 12 23 03 05). A WAIVER OF SUBROGATION IS INC..LUDED UNDER THE GENERAL LIABILITY (LG3180 0907), WORKERS COMPENSATION (WC 00 03 13) POLICIES IN FAVOR OF THE CERTIFICATE HOLDER.

**CERTIFICATE HOLDER****CANCELLATION**

CITY OF PORT ST. LUCIE/O EBIX BPO P.O. BOX 257, REF. # 90-7590-20040116-3-0 PORTLAND MI 48875	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)

4/6/2023

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<b>PRODUCER</b> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
<b>INSURED</b> Aquatic Vegetation Control, Inc. 1860 W 10th St Riviera Beach FL 33404	<b>INSURER A :</b> Brierfield Insurance Company		10993
	<b>INSURER B :</b> Monroe Guaranty Insurance Company		32506
	<b>INSURER C :</b> National Trust Insurance Company		20141
	<b>INSURER D :</b> StarNet Insurance Company		40045
	<b>INSURER E :</b> FCCI Insurance Company		10178
	<b>INSURER F :</b> Evanston Insurance Company		35378

**COVERAGES**

CERTIFICATE NUMBER: 1990296654

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 <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> 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			CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
D	<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	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E	CONTRACTORS EQUIPMENT			CM10007635201	4/1/2023	4/1/2024	LIMIT	942,000
F	CONTRACTORS POLLUTION LIABILITY			MKLV2ENV103407	4/1/2023	4/1/2024	LIMIT	1,000,000
							AGGREGATE	3,000,000

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

1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 Contract #: 20180177 | RE: Mowing of Road Right of Ways - Area 2 City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents are included as additional insured on General liability, Auto Liability and Umbrella Liability policies as required by written contract. Insurance is primary and non-contributory. Waiver of Subrogation applies in favor of Additional Insureds on General Liability, Auto Liability, Umbrella Liability and Worker's Compensation policies as required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

City of Port St. Lucie Procurement Management Department Attn: Sherri Hawes, Buyer 121 SW Port St. Lucie Blvd. Port St. Lucie FL 34984	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)

4/6/2023

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<b>PRODUCER</b> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
<b>INSURED</b> Aquatic Vegetation Control, Inc. 1860 W 10th St Riviera Beach FL 33404	AQUATVEGET1		<b>INSURER A :</b> Brierfield Insurance Company 10993
			<b>INSURER B :</b> Monroe Guaranty Insurance Company 32506
			<b>INSURER C :</b> National Trust Insurance Company 20141
			<b>INSURER D :</b> StarNet Insurance Company 40045
			<b>INSURER E :</b> FCCI Insurance Company 10178
			<b>INSURER F :</b> Evanston Insurance Company 35378

**COVERAGES**

CERTIFICATE NUMBER: 2040017422

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> <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			CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input checked="" type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
D	<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	KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<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
E	<b>CONTRACTORS EQUIPMENT AND POLLUTION LIABILITY</b>			CM10007635201	4/1/2023	4/1/2024	LIMIT	942,000
F				MKLV2ENV103407	4/1/2023	4/1/2024	LIMIT	1,000,000
							AGGREGATE	3,000,000

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

1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 Contract #: 20170016 RE: Invasive Plant Control & Vegetation Management City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents are included as Additional Insured on General Liability and Auto Liability policies as required by written contract. Insurance is primary and non-contributory. Waiver of Subrogation applies in favor of additional insureds as respects General Liability, Auto Liability and Worker's Compensation policies as required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

City of Port St. Lucie Attn: Procurement Management Dept. 121 S.W. Port St. Lucie Blvd. Port St. Lucie FL 34984	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)

4/6/2023

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<b>PRODUCER</b> Tequesta Insurance Advisors, a Marsh & McLennan Agency LLC Company 218 South Hwy 1, Suite 300 Jupiter FL 33469	<b>CONTACT NAME:</b> PHONE (A/C No. Ext): 562-746-4546		<b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> FLCertificates@MarshMMA.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
<b>INSURED</b> Aquatic Vegetation Control, Inc. 1860 W 10th St Riviera Beach FL 33404	AQUATVEGET1		<b>INSURER A :</b> Brierfield Insurance Company 10993
			<b>INSURER B :</b> Monroe Guaranty Insurance Company 32506
			<b>INSURER C :</b> National Trust Insurance Company 20141
			<b>INSURER D :</b> StarNet Insurance Company 40045
			<b>INSURER E :</b> FCCI Insurance Company 10178
			<b>INSURER F :</b> Evanston Insurance Company 35378

**COVERAGES**

CERTIFICATE NUMBER: 206109575

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	CP10007635101	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> <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	Y	Y	CA10007634901	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input checked="" type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UMB10007635301	4/1/2023	4/1/2024	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
D	<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		KEY0145976 KEY0145977	4/1/2023 5/1/2023	4/1/2024 5/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$ 1,000,000 \$ 1,000,000 \$ 1,000,000
E	<b>CONTRACTORS EQUIPMENT AND POLLUTION LIABILITY</b>			CM10007635201	4/1/2023	4/1/2024	LIMIT	942,000
F				MKLV2ENV103407	4/1/2023	4/1/2024	LIMIT AGGREGATE	1,000,000 3,000,000

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

1860 W 10th St, Riviera Beach, FL 33404  
 957 NW 3d St, Florida City, FL 33034  
 21011 Johnson St, Ste 111, Pembroke Pines, FL 33029  
 3449 SW Honey Ter, Palm City, FL 34990  
 RE:20210026)  
 City of Port St. Lucie, a municipality of the State of Florida, its officers, employees and agents and shall include Contract #20210026 - Invasive Plant Control & Vegetation Project be listed as additionally insured as per form number LC 04 43 05 12 Waiver of Subrogation as respects General Liability and Workers Compensation in favor of Additional Insured when required by written contract subject to the terms, conditions and exclusions of the policy.

**CERTIFICATE HOLDER****CANCELLATION**

City of Port St. Lucie 121 S.W. Port St. Lucie Blvd. Port St. Lucie FL 34984	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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# 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>Aquatic Vegetation Control, Inc.</b>	
2 Business name/disregarded entity name, if different from above	
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.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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 <b>not</b> 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.  <input type="checkbox"/> Other (see instructions) ▶ _____	4 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>
5 Address (number, street, and apt. or suite no.) See instructions. <b>1860 W 10th Street</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Riviera Beach, FL 33404</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.

**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.

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									
5	9	-	2	7	8	4	0	1	2

## 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>7/5/2023</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.*