

**THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
PURCHASING DEPARTMENT  
3300 Forest Hill Boulevard, Suite A-323  
West Palm Beach, FL 33406-5813**

**INVITATION TO BID  
Bidder Acknowledgement**

**Vendor Name: Diversified Electrical Systems Inc.**

**Vendor Mailing Address: 4283 SW High Meadows Ave  
Palm City, FL 34990**

**E-Mail Address: rcullipher@diversified-electrical-sys.com**

**Area Code / Telephone Number: 7722193389**

**Toll-Free Telephone Number: 8662845627**

**Fax Number: 7722193242**

**Web Address: www.diversified-electrical-sys.com**

**FEID No. or SS #: 65-0681453**

**Delivery calendar days after receipt of order: 15**

**ANTI-COLLUSION**

By electronically submitting your bid, the bidder certifies that they have not divulged, discussed or compared their bid with other bidders and have not colluded with any other bidder or parties to a bid whatsoever. No premiums, rebates or gratuities permitted either with, prior to, or after any delivery of material. Any such violation will result in the cancellation and/or return of materials (as applicable) and the removal from the bid lists for the School District of Palm Beach County, Florida and I hereby certify that I have read and understand the requirements of this Invitation to Bid and that I am duly authorized to execute this offer document and any contract(s) and/or other transaction by award of this bid.

**BID CERTIFICATION**

I further certify that I have read the entire contents of this Invitation to Bid document and agree to full, complete and unconditional acceptance of the contents of this Invitation to Bid and all appendices and the contents of any Addendum released hereto. I further certify that by virtue of executing and returning this Bidder Acknowledgement Form, I am submitting the following information as this company's response.

**Name of Representative Submitting Bid: Roy Cullipher**

**Title of Company Representative: Vice President Of Operations**

**Date: 4/01/2019**

**SCHOOL DISTRICT OF PALM BEACH COUNTY  
PURCHASING DEPARTMENT  
3300 Forest Hill Blvd, Suite A-323  
West Palm Beach, FL 33406-5813**

**REQUIRED RESPONSE FORM**

**This information package should be submitted to BidSync for the School District of Palm Beach County, Purchasing Department. Information Packages are due and will be opened at this time.**

**Anti-Collusion Statement / Public Domain**

I, the undersigned responder(s), have not divulged, discussed, or compared this information package with any other responder(s), and have not colluded with any other Responder(s) in the preparation of this information package in order to gain an unfair advantage in the award of this information package.

I acknowledge that all information contained herein is part of the public domain as defined in the Public Records Act, Chapter 119, F.S.

**Information Package Certification**

I hereby certify that I am electronically submitting the following information as my company's information package. Information Package must be signed by an officer or employee having authority to legally bind the responder(s).

RESPONDER(S) (firm name): Diversified Electrical Systems Inc.

STREET ADDRESS: 4283 SW High Meadows Ave

CITY & STATE: Palm City, Florida

ELECTRONIC SIGNATURE OF AUTHORIZED REPRESENTATIVE: Roy Cullipher

TITLE: Vice President of Operations      DATE: 04/01/2019

CONTACT PERSON: Roy Cullipher

CONTACT PERSON'S ADDRESS: 4283 SW High Meadows Ave

TELEPHONE: 772-203-1456      FAX: 772-219-8471      TOLL FREE: 866-284-5627

E-MAIL ADDRESS: rcullipher@diversified-electrical-sys.com      INTERNET URL: www.diversified-electrical-sys.com

RESPONDER(S) TAXPAYER IDENTIFICATION NUMBER: 65-0681453



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Beneficial Interest and Disclosure of Ownership Affidavit

Bid No. 19C-24T Project No./ Title Cabling Contractor Services

Corporate Name Diversified Electrical Systems Inc.

Tax FEIN No. 65-0681453

Before me, the undersigned authority, personally appeared, Roy Cullipher, ("Corporate Representative") this First day of April, 2019, who, first being duly sworn, as required by law, subject to the penalties prescribed for perjury, deposes and says:

- 1) Corporate Representative has read the contents of this Affidavit, has actual knowledge of the facts contained herein, and states that the facts contained herein are true, correct; and complete.
2) The following is a list of every "person" (as defined in Section 1.01(3), Florida Statutes to include individuals, children firms, associates, joint adventures, partnerships, estates, trusts, business trusts, syndicates, fiduciaries, corporations and all other groups and combinations) holding 5% or more of the beneficial interest in the disclosing entity: (If more space is needed, attach separate sheet)

A. Persons or corporate entities owning 5% or more:

Table with 3 columns: Name, Address, Percentage. Rows include Scott Eccleston (55%) and John Wehl (45%), both at 4283 SW High Meadows Ave. Palm City, FL 34990.

B. Persons or corporate entities who hold by proxy the voting power of 5% or more:

Table with 3 columns: Name, Address, Percentage. Currently empty.

C. Stock held for others and for whom held:

Table with 3 columns: 1. Name / 2. From Whom Held, Address, Percentage. Multiple rows for listing stock holdings.

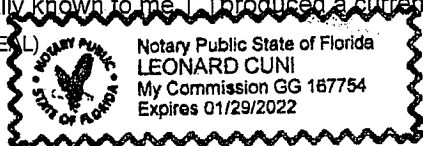
CORPORATE REPRESENTATIVE

By: Roy Cullipher VP Operations [Signature]

SWORN TO and subscribed before me this First day of April, 2019, by Such person(s) (Notary Public must check applicable box).

[X] is/are personally known to me. [ ] produced a current driver license(s). [ ] produced as identification.

(NOTARY PUBLIC SEAL)



[Signature]
Notary Public

# *State of Florida*

## *Department of State*

I certify from the records of this office that DIVERSIFIED ELECTRICAL SYSTEMS, INC. is a corporation organized under the laws of the State of Florida, filed on July 15, 1996.

The document number of this corporation is P96000058992.

I further certify that said corporation has paid all fees due this office through December 31, 2019, that its most recent annual report/uniform business report was filed on January 26, 2019, 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 Twelfth day of April, 2019*



*Ronald R. DeBevoise*  
*Secretary of State*

Tracking Number: 8792357014CU

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

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

MARTIN COUNTY ORIGINAL  
BUSINESS TAX RECEIPT

Honorable Ruth Pietruszewski CFC, Tax Collector  
3485 S.E. Willoughby Blvd., Stuart, FL 34994  
(772) 288-5604

Account 1997-508-0005 Cert EC13004826  
Phone (772)219-9942 Sic No 238210  
Location 4283 SW HIGH MEADOW AVE PC



Prev Yr	\$ .00	Lic Fee	\$26.25
	\$ .00	Penalty	\$ .00
	\$ .00	Coll-Fee	\$ .00
	\$ .00	Transfer	\$ .00

TOTAL \$26.25

Has satisfied requirements to engage in the business, profession  
or occupation of **ELECTRICAL CONTRACTOR**  
at location listed for the period beginning on the  
18 Day of JULY  
AND **ENDING SEPTEMBER 30 2019**

WEHLE, JOHN (OWNER & QUALIFIER)  
DIVERSIFIED ELECTRICAL  
SYSTEMS, INC.  
4283 SW HIGH MEADOW AVE  
PALM CITY, FL 34990

91 2017 7538.0001 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS  
SUBJECT TO A \$250 FINE. IF NOT PAID BY SEPT. 30th, A DELINQUENT PENALTY OF 10%  
FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER  
UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

NOTE: A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT  
EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000058992

**Entity Name:** DIVERSIFIED ELECTRICAL SYSTEMS, INC.

**Current Principal Place of Business:**

4283 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990

**Current Mailing Address:**

4283 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990 US

**FEI Number: 65-0681453**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ECCLESTON, SCOTT B  
4283 SW HIGH MEADOW AVE.  
PALM CITY, FL 34990 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: SCOTT ECCLESTON**

**01/26/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BRYAN, MICHAEL  
Address        4241 SW HIGH MEADOW AVE.  
City-State-Zip: PALM CITY FL 34990

Title            STD, CEO, CFO  
Name            ECCLESTON, SCOTT  
Address        4241 SW HIGH MEADOW AVE.  
City-State-Zip: PALM CITY FL 34990

Title            VP, DIRECTOR  
Name            WEHLE, JOHN  
Address        4241 SW HIGH MEADOW AVE.  
City-State-Zip: PALM CITY FL 34990

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SCOTT ECCLESTON**

**CEO**

**01/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date

## Request for Taxpayer Identification Number and Certification

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

Print or type  
 See Specific Instructions on page 2.

Name (as shown on your income tax return) <b>Diversified Electrical Systems, Inc.</b>	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <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) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
Address (number, street, and apt. or suite no.) <b>4283 SW High Meadows Avenue</b>	Requester's name and address (optional)
City, state, and ZIP code <b>Palm City, FL 34990</b>	
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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									
6	5	-	0	6	8	1	4	5	3

### 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 on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>2/18/19</b>
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### General Instructions

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

**Future developments.** The IRS has created a page on [IRS.gov](http://IRS.gov) for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



4/4/2019

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April 4, 2019

RE: 19C-24T Special Conditions X  
CONFLICT OF INTEREST STATEMENT

To Whom It May Concern:

Diversified Electrical Systems Incorporated Does not have any officers, directors or agents who are employees of the Palm Beach County School District and therefore does not have a Conflict of Interest.

*Roy Cullipher*

Respectfully Submitted,  
**Diversified Electrical Systems, Inc.**  
Roy Cullipher – VP Operations

4283 SW High Meadows Ave • Palm City, FL 34990  
Phone (772) 219-9942 • Fax (772) 287-8098  
E-mail: [rcullipher@diversified-electrical-sys.com](mailto:rcullipher@diversified-electrical-sys.com)





## Diversified Electrical Systems

### Corporate Resume

4283 SW High Meadows Ave.  
Palm City, FL 34990

Phone: 772-219-9942



## CONTENTS

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Structure	Corporation, Incorporated in the State of Florida
Headquarters	4283 SW High Meadows Avenue Palm City, Florida 34990 P: 772-219-9942/ F: 772-219-8471
Year Established	1996
Licensed In	Florida: EC #13004826
Surety	Fidelity & Deposit Company of Maryland. Agent: Michael Holmes 561-686-2266
Bonding Capacity	\$35 Million, \$14 Million Single Project
Type of Service	Electrical & Low Voltage
Bank Reference	Bank United Kristina Moylan
Principals	Michael G. Bryan, President Scott B. Eccleston, CFO John P. Wehle, Executive VP of Operations



## References

School Board of Brevard County  
2700 Judge Fran Jamieson Way  
Viera, FL 32940  
(321) 633-1000

School Board of Palm Beach  
3354 Forest Hill Blvd.  
West Palm Beach, FL 33406  
(561) 434-8694

Palm Beach State College

4200 Congress Ave  
Lake Worth, FL 33461  
(561) 868-3059

West Construction, Inc.  
820 N. 4<sup>th</sup> Street  
Lantana, FL. 33462

James A. Cummings, Inc.  
1 E. Broward Blvd  
Fort Lauderdale, FL 33301  
(954)733-4211

School Board of St. Lucie  
329 N.W. Commerce Park Drive  
Port St. Lucie, FL 34953  
(772) 336-6980  
(561)-588-2027

Heard Construction  
95 E. Hall Rd  
Merritt Island, FL 32953  
(321) 537-2116

Gilbane Building Company  
661 University Blvd. #107  
Jupiter, FL. 33458  
(407) 422-7691



## Staff Experience

Executive Mgt	Title	Yrs of Exp	Capacity
Michael G. Bryan	President	52 Years	18 w/ International, 8 w/ DES
Scott B. Eccleston	CFO	25 Years	10 w/ Various, 8 w/ DES
John P. Wehle	Exec VP of Op	34 Years	5 w/ Various, 8 w/ DES
Roy Cullipher	VP of Op	22 Years	9 w/ Various, 1 w/ DES

Supervisory	Title	Yrs of Exp	Capacity
Junar Vinoya	Lead Tech	19 Years	4 w/ Various, 1 w/ DES
Eric Mackey	Lead Tech	10 Years	1 w/ Universal, 1 w/ DES

Estimating	Title	Yrs of Exp	Capacity
Tim Byrnes	Estimator	10 Years	3 w/ Diversified

Service	Title	Yrs of Exp	Capacity
CAD	Title	Yrs of Exp	Capacity
Reinhard Schuster	Design	30 Years	18 w/ Various, 12 w/ Stryker



## Projects

### **Completed Projects: Educational**

Indialantic Elementary School

Brevard, FL

General Contractor: Heard Construction

Approximate Electrical Contract: \$717,330.00

Cambridge Elementary School

Brevard, FL

General Contractor: Heard Construction

Approximate Electrical Contract: \$301,611.37

Stone Middle School

Brevard, FL

General Contractor: Heard Construction

Approximate Electrical Contract: \$591,576.79

Eau Gallie High School

Brevard, FL

General Contractor: Heard Construction

Approximate Electrical Contract: \$814,319.00

Andersen Elementary School

Brevard, FL

General Contractor: Heard Construction

Approximate Electrical Contract: \$167,870.49

Quest Elementary School

Brevard County, FL

General Contractor: Diversified Electrical Systems, Inc.

Approximate Electrical Contract: \$31,590.00



Riviera Elementary School  
Brevard County, FL  
General Contractor: Advantage Integrated Technology  
Approximate Electrical Contract: \$49,665.00

Riverwalk Dock  
City Of Stuart, FL  
Approximate Electrical Contract: \$42,415.00

Christa Mcauliffe  
Palm Beach County, FL  
General Contractor: Brevard County, FL  
Approximate Electrical Contract: \$16,466.00

Hoover Middle School A/V  
Brevard, FL  
General Contractor: Brevard County, FL  
Approximate Electrical Contract: \$25,296.00

Roosevelt Elementary School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$24,805.85

Jackson Middle School  
Brevard, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$28,312.00

NorthMore  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$14,279.00



West Gate  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$45,985.00

Woodlands  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$18,899.00

Hoover Middle School  
Brevard, FL  
General Contractor: Heard Construction  
Approximate Electrical Contract: \$218,990.00

Jefferson Middle School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$28,050.00

FHESC IDF Emergency Power  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$32,155.00

Southwest  
Brevard, FL  
General Contractor: Brevard County, FL  
Approximate Electrical Contract: \$38,639.00

Jefferson Middle School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$25,392.40





Kennedy Middle School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$25,429.40

Glades Central High School  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$5,922.00

Morikami Park Elementary School  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$7,736.00

Palm Beach State College  
Palm Beach County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$105,000.00

Viera High School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$8,101.35

Andersen Elementary School  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$4,527.60

WAP Cabling Designs  
Brevard County, FL  
General Contractor: Diversified Electrical Systems, Inc.  
Approximate Electrical Contract: \$22,000.00



## Projects in Progress

Apollo Elementary School  
Titusville, FL  
General Contractor: Gilbane Building Company  
Approximate Electrical Contract: \$ 169,020

Andrew Jackson Elementary School  
Titusville, FL  
General Contractor: Gilbane Building Company  
Approximate Electrical Contract: \$467,108

Pinewood Elementary School  
Mims, FL  
General Contractor: Gilbane Building Company  
Approximate Electrical Contract: \$221,262

City of Tamarac Fire Station 78 Cellular DAS  
Tamarac, FL  
General Contractor: West Construction  
Approximate Electrical Contract: \$10,000

La Posada Assisted Living Facility  
Palm Beach Gardens, FL  
General Contractor: Clancy Theys  
Approximate Electrical Contract: \$225,000



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



**STATE OF FLORIDA**  
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**ELECTRICAL CONTRACTORS LICENSING BOARD**

THE ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE  
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

Additional Business Qualification

**WEHLE, JOHN P**

DIVERSIFIED ELECTRICAL SYSTEMS, INC.  
4283 SW HIGH MEADOWS AVE  
PALM CITY FL 34990

**LICENSE NUMBER: EC13004826**

**EXPIRATION DATE: AUGUST 31, 2020**

Always verify licenses online at [MyFloridaLicense.com](http://MyFloridaLicense.com)



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

**SCHOOL DISTRICT OF PALM BEACH COUNTY**

**PURCHASING DEPARTMENT**

**AREA REPRESENTATIVE**

Please list the contact for this contract Add additional forms if necessary

Vendor Name:	<b>Diversified Electrical Systems Inc.</b>
Area Representative:	<b>Roy Cullipher</b>
Address:	<b>2121 N. Ocean Blvd 103W</b>
City/Zip Code:	<b>Boca Raton/33431</b>
Email Address:	<b>rcullipher@diversified-electrical-sys.com</b>
Telephone:	<b>561-774-3838</b>
Cell Phone	<b>772-203-1456</b>
Fax Number:	<b>772-219-3242</b>
Emergency Number:	<b>561-808-4809</b>

**SCHOOL DISTRICT OF PALM BEACH COUNTY**

**PURCHASING DEPARTMENT**

**DEBARMENT CERTIFICATION**

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY  
AND VOLUNTARY EXCLUSION  
LOWER TIER COVERED TRANSACTIONS**

**This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency with which this transaction originated. (Before Completing Certification, Read Instructions on Following Page)**

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.**
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to this proposal.**

**Organization Name: Diversified Electrical Systems Inc.**

**Solicitation Number or Project Name: 19C-24T**

**Name of Authorized Representative: Roy Cullipher**

**Title of Representative: Vice President of Operations**

**Date: 04/01/2019**

**INSTRUCTION CERTIFICATIONS**

- 1. By electronic submission of this the prospective lower tier participant is providing the certification set out on the reverse side in accordance with these instructions.**
- 2. The certification in this clause is a material representation of fact upon reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.**
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.**

4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage section so rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this that it will include this clause titled, "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Non-procurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.



**THE SCHOOL DISTRICT OF PALM BEACH COUNTY**  
**Drug-Free Workplace Certification**

Preference must be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

**IDENTICAL TIE BIDS** - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program, a business shall:

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 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.

*VENDOR'S SIGNATURE*

*DATE*

**Diversified Electrical Systems Inc.**  
*COMPANY NAME*



PBSD 0580 (Rev. 4/8/2003)

ORIGINAL - Purchasing Department



SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

EARLY PAYMENT TERMS

**Bid number/Name:**

**Vendor Name:**

If vendor chooses not to participate in Early Payment Terms, please acknowledge by placing N/A here → NA.

<b>EARLY PAYMENT:</b> Specify terms and discount for early payment. Check which terms you will be willing to provide for the duration of this contract to the School District.
0.5% 10 net 30 *
0.75% 5 net 30 *

\* Upon receipt of invoice by the School District of Palm Beach County Accounts Payable Department.

**Note:** Updating to these terms will affect all of your District payments. If you choose to revise these terms at a later date, the terms will affect all of your payments from the District.

**The School District of Palm Beach County**

**SMALL BUSINESS ENTERPRISE (SBE)**  
**CERTIFICATION INFORMATION**

Certification applications are available through the Office of Diversity in Business Practices:

<http://www.palmbeachschools.org/diversityinbusiness>

Office of Diversity in Business Practices  
School District of Palm Beach County  
3300 Summit Boulevard  
West Palm Beach, FL 33406  
Phone: (561) 681-2403

**Are you an SBE vendor certified by the School District of Palm Beach County?**

**YES\***

**NO**

\* If yes, please provide your certification information below and attach a copy of your certification:

Certification Expiration Date:

Ethnicity Classification:

If you are not a certified SBE vendor and intend to sub-contract with a certified SBE firm(s), please list the vendors and the estimated dollar value below:

Vendor

Estimated Dollar Value

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_







					Yes No		
					Yes No		
					Yes No		
					Yes No		

**PROPOSER'S STATEMENT OF PRINCIPAL PLACE OF BUSINESS**  
**(Must be completed & submitted with each competitive solicitation)**

Name of Proposer: **Diversified Electrical Systems Inc.**

Identify the state in which the Proposer has its principal place of business: **Florida**

**Proceed as follow: IF your principal place of business above is located within the State of Florida, the Proposer may sign below and attach to your solicitation. No further action is required. IF your principal place of business is outside of the State of Florida the following must be completed by an attorney and returned with your solicitation. Failure to comply shall be considered to be non-responsive to this solicitation.**

**OPINION OF OUT-OF-STATE BIDDER'S ATTORNEY ON BIDDING PREFERENCES**

*(To be completed by the Attorney for an Out-of-State Proposer)*

**NOTICE:** Section 287.084(2), Fla. Stat., provides that "a vendor whose principal place of business is outside this state must accompany any written bid, proposal, or reply documents with a written opinion of an attorney at law licensed to practice law in that foreign state, as to the preferences, if any or none, granted by the law of that state [or political subdivision thereof] to its own business entities whose principal places of business are in that foreign state in the letting of any or all public contracts." See also: Section 287.084(1), Fla. Stat.

**LEGAL OPINION ABOUT STATE BIDDING PREFERENCES**

*(Please Select One)*

The Proposer's principal place of business is in the State of and it is my legal opinion that the laws of that state do not grant a preference in the letting of any or all public contracts to business entities whose principal places of business are in that state.

The Proposer's principal place of business is in the State of and it is my legal opinion that the laws of that state grant the following preference(s) in the letting of any or all public contracts to business entities whose principal places of business are in that state: [Please describe applicable preference(s) and identify applicable state law(s)]:

**LEGAL OPINION ABOUT POLITICAL SUBDIVISION BIDDING PREFERENCES**

*(Please Select One)*

The Proposer's principal place of business is in the political subdivision of and it is my legal opinion that the laws of that political subdivision **do not grant a preference** in the letting of any or all public contracts to business entities whose principal places of business are in that political subdivision.

The Proposer's principal place of business is in the political subdivision of and the laws of that political subdivision **grant the following preference(s)** in the letting of any or all public contracts to business entities whose principal places of business are in that political subdivision: [Please describe applicable preference(s) and identify applicable authority granting preference(s)]:

Signature of out-of-state Proposer's attorney:

Printed name of out-of-state Proposer's attorney:

Address of out-of-state bidder's attorney:

Telephone Number of out-of-state bidder's attorney: ()

Email address of out-of-state bidder's attorney:

Attorney's states of bar admission:

Proposer's Printed Name: Signature

Company Name:

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

REFERENCES

**Vendor Name: Diversified Electrical Systems Inc.**

**Bid number/Name:**

**This information will be used in the evaluation of this bid.**

List a minimum number of required references as stated in the Special Conditions which show experience in similar work, to include nature and scope of work, which demonstrates an expertise in providing the services as stated herein. Provide scope of work, contact name, addresses, telephone numbers and dates of service.

**Reference 1 – New Customer (one year or less)**

Name of Firm:	<b>Palm Beach State College</b>
Scope of Work:	<b>Fiber Optic Multi and Single Mode. CAT.6A, CAT.6 and CAT.5e Installation. Valcom PA Speaker installation, Electrical</b>
Cost of Service:	<b>\$8,214.00</b>
Date of Service:	<b>10/02/2018</b>
Contact Person:	<b>David Suarez</b>
Email:	<b>suarezd@palmbeachstate.edu</b>
Phone #:	<b>561-868-3059</b>
Address:	<b>4200 Congress Avenue Lake Worth, Florida 33461-4796</b>

**Reference 2 – Past Customer (currently not doing business)**

Name of Firm:	<b>City of Lakeworth</b>
Scope of Work:	<b>Fiber Optic Installation</b>
Cost of Service:	<b>\$2,426.00</b>
Date of Service:	<b>08/10/2018</b>
Contact Person:	<b>Brenton Farr</b>
Email:	<b>bfarr@lakeworth.org</b>
Phone #:	<b>561-586-1688</b>
Address:	<b>120 North G Street Lake Worth, FL 33460</b>

**Reference 3 – Repeat or Long Term Customer**

Name of Firm:	<b>MGM General Contractors</b>
Scope of Work:	<b>Fiber, CAT.6A, CAT.6, CAT.5e, CCTV Camera, CATV, DAS, WIFI WAP Installations, Electrical.</b>
Cost of Service:	<b>\$175,000.00</b>



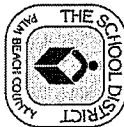
Date of Service:	<b>06/19/2019</b>
Contact Person:	<b>Thomas McCormack</b>
Email:	<b>tom.mccormack@mngmc.com</b>
Phone #:	<b>954-532-9620</b>
Address:	<b>1500 West Cypress Creek Road, Suite 415 Ft Lauderdale, FL 33309</b>

**Reference 4 – Repeat or Long Term Customer**

Name of Firm:	<b>Centennial Bank</b>
Scope of Work:	<b>Fiber, CAT.6A, CAT.6, CAT.5e, CCTV Camera, CATV, DAS, WIFI WAP Installations, Electrical.</b>
Cost of Service:	<b>\$7,699.00</b>
Date of Service:	<b>Currently</b>
Contact Person:	<b>Chase Smith</b>
Email:	<b>MCSmith@my100bank.com</b>
Phone #:	<b>501.339.2894</b>
Address:	<b>719 Harkrider Ste. 300 Conway, AR 72032</b>

**Reference 5 – Repeat or Long Term Customer**

Name of Firm:	<b>Tutor Perini</b>
Scope of Work:	<b>Fiber, CAT.6A, CAT.6, CAT.5e, CCTV Camera, CATV, DAS, WIFI WAP Installations, Electrical.</b>
Cost of Service:	<b>\$4,503.00</b>
Date of Service:	<b>12/18/2018</b>
Contact Person:	<b>Tim Parido</b>
Email:	<b>tim.parido@tutorperini.com</b>
Phone #:	<b>(954) 733-4211</b>
Address:	<b>1 E Broward Blvd #1300 Fort Lauderdale, FL 33301</b>



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
 OFFICE OF DIVERSITY IN BUSINESS PRACTICES  
**Participation Letter of Intent**

Minority/Women Business Enterprise (M/WBE)     Small Business Enterprise (SBE)

Submit completed form to the Senior Project Administrator (SPA). Direct all questions to (561) 681-2403.  
 Form must be submitted to [Bidsync.com](http://Bidsync.com)

BID/RFP or Project Name 19C-24T

Name of Bidder/Construction Manager Diversified electrical systems LLC

The undersigned intends to perform work with the above project as (check one):

- Individual     Partnership     Corporation     Joint Venture\* *If a joint venture, attach letterhead or other documentation proving relationship.*

The undersigned intends to perform work with the above project as (check one):

- Subcontractor     Subconsultant     Manufacturer     Supplier

The undersigned is:     Certified with the School District of Palm Beach County as a M/WBE Vendor.

- Certified with the School District of Palm Beach County as a SBE Vendor.
- Certified with the State of Florida, Department of General Services (Provisional).

N/A

The undersigned is: (M/WBE or SBE must check one in Column 1 and Column 2; Column 3, if applicable)

- |   |                 |  |
|---|-----------------|--|
| <u>Column 1</u>   | <u>Column 2</u> | <u>Column 3</u>                              |
| <input type="checkbox"/> African American <input type="checkbox"/> Native American <input type="checkbox"/> Female <input type="checkbox"/> Male<br><input type="checkbox"/> Asian American <input type="checkbox"/> American<br><input type="checkbox"/> Hispanic American |                 | <input type="checkbox"/> Physically Impaired |

**PARTICIPATION** The undersigned intends to perform the following work in connection with the above project:

Item No.	Division No.	Contract (Trade) Items (Description/Division)	Amount
		<u>N/A</u>	

If the undersigned intends to sub-contract any portion of this subcontract to a non-certified M/WBE or SBE subcontractor, the amount of any such subcontract must be stated: \$ N/A

Name of M/WBE or SBE Subcontracting Firm N/A

Name and Position (type or print) Roy Culipher VP operations

**INTERNAL USE ONLY - ROUTING DISPOSITION**  
 All executed originals of the form must be submitted to the  
 Office of Diversity in Business Practices

Roy Culipher  
4/6/19  
 Date

Building Industry Consulting Service International

THE PROFESSIONAL DESIGNATION OF

**REGISTERED COMMUNICATIONS  
DISTRIBUTION DESIGNER®**

IS AWARDED TO

**Roy D Cullipher**

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements.

Designation Number: 192667R

Registration Start Date: 1/1/2017

Registration End Date: 12/31/2019



Chair, Registrations & Credentials Supervision Committee



**Bicsi**  
**RCDD**

Since

5/7/2001



Director of Credentialing

THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
PURCHASING DEPARTMENT

## Supplier Information

Solicitation 19C-24T

This form must be filled out along with the W9 Form. (Note: It is your responsibility to contact our office if any of this information should change. Any acquisition or changes in ownership are required on letterhead and a new W9 must be obtained). **Purchase orders are required for all purchases. No school district employee is authorized to place an order for merchandise or services without a purchase order.** Go to the following link to read the School District's Terms & Conditions:

<http://www.palmbeachschools.org/purchasing/bids/purch/info/index.asp>

**For questions on this form, please contact DENNIS MESSERLI at**

Phone 561-434-8507 (Email): [Dennis.Messerli@palmbeachschools.org](mailto:Dennis.Messerli@palmbeachschools.org) or Fax: 561-963-3823

### ORDER TO:

Business Name **Diversified Electrical Systems Inc.**

Business Name, if different than above

Street Address **4283 SW High Meadows Ave**

City **Palm City** State **FL** Zip Code **34990**

Company Email Address for Electronic Purchase Orders **rcullipher@diversified-electrical-sys.com**

Fax Number **772-219-3242**

Taxpayer ID Number **65-0681453**

Contact Name **Roy Cullipher**

Phone **772-219-3389** Ext. **103**

### REMIT PAYMENT TO:

Same as above

Business Name **Diversified Electrical Systems Inc.**

Street Address **4283 SW High Meadows Ave**

City **Palm City** State **FL** Zip Code **34990**

**COMPLETED BY Roy Cullipher**

Title **VP Operations**

Date **04/01/2019**

Use the attached form "**Divisions or Subsidiary Companies**" that fall under the parent company and use the same tax ID number (TIN) but they have different order to and remit to locations.

### **Supplier Information for Divisions or Subsidiary Companies**

**Check here** if this section does not apply

This part of the is used for Divisions or Subsidiary companies that fall under the parent company and use the same tax ID number (TIN) but have different order to and remit to locations, including fax numbers and email addresses for Purchase Orders, please complete the following:

Parent Company Name

#### **ORDER TO: NA**

Taxpayer ID Number **NA**

Division/Subsidiary Name **NA**

Street Address **NA**

City **NA**State **NA**Zip Code **NA**

Company Email Address for Electronic Purchase Orders **NA**

Fax Number **NA**

Contact Name **NA**

Phone **NA**Ext. **NA**

#### **REMIT PAYMENT TO:**

Same as above

Division/Subsidiary Name **NA**

Street Address **NA**

City **NA**State **NA**Zip Code **NA**

COMPLETED BY **NA**

Title **NA**

Date **NA**

# W-9

(Rev. December 2018)  
Department of the Treasury Internal  
Revenue Service

## Request for Taxpayer Identification Number and Certification

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

Print or type  
See Specific  
Instructions on  
page 2.

Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**Diversified Electrical Systems Inc.**

Business name/disregarded entity name, if different from above

**Diversified Electrical Systems Inc.**

Check appropriate box for federal tax classification:

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:** For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner

Other (see instructions)

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.)

Address (number, street, and apt. or suite no.)

**4283 SW High Meadows Ave**

Requester's name and address (optional)

City, state, and ZIP code

**Palm City, FL 34990**

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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

**123456789**

Employer identification number

**65-0681453**

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

### 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 on page 3.

Sign Here

Signature of  
U.S. person

Roy Cullipher

Date **04/01/2019**

### General Instructions

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

- 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?* on page 2.*

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

### Purpose of

A person 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)







