

## Attachment A - Mandatory Questions

### Mandatory Questions

These questions are Pass/Fail. To be considered responsive, responsible and eligible for award, you must answer all questions in this section.

**DO NOT INCLUDE ANY COST INFORMATION IN YOUR RESPONSE TO THIS WORKSHEET.**

Question #	Questions per Proposal Factors/Categories	Response by Offeror. Only Yes or No	Upload Attachments ?	Attachment Name
<b>Proposal Factors</b>				
1	List any criminal violations and/or convictions of the Proposer and/or any of its principals: (N/A is not an acceptable answer).	NO	IF YES	
2	Complete and upload PSL Location Form	YES	YES	PJSI PSL Fountian FILE 3
3	Is firm a minority business?	NO	IF YES	
4	Is the firm incorporated? Yes--No If yes, in what state?	YES	NO	Florida
5	List any judgements from lawsuits in the last five (5) years: (N/A is not an acceptable answer).	NO	IF YES	
6	List any lawsuits pending or completed within the past five (5) years involving the corporation, partnership or individuals with more than ten percent (10%) interest: (N/A is not an acceptable answer).	NO	IF YES	
7	Has the Proposer or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into receivership?	NO	IF YES	
8	Proposers are required to submit all licenses and certifications required to perform this project.	YES	YES	PJSI PSL Fountian FILE 3
9	Proposers are required, to submit a copy of their Insurance Certificate for the type and dollar amount of insurance they <u>currently maintain</u>	YES	YES	PJSI PSL Fountian FILE 3
10	Complete and upload E-Verify Form	YES	YES	PJSI PSL Fountian FILE 3
11	Complete and upload Drug Free Workplace Form	YES	YES	PJSI PSL Fountian FILE 3
12	Complete and upload Contractor Code of Ethics	YES	YES	PJSI PSL Fountian FILE 3
13	Complete and upload Non-Collusion Affidavit	YES	YES	PJSI PSL Fountian FILE 3
14	Submit W-9	YES	YES	PJSI PSL Fountian FILE 3
15	Upload and submit three (3) projects similar in size and scope to this Bid completed by your firm within the past five (5) years along with a brief description of the project, location of project, client name, client phone number, email, and value of contract.		YES	
16	Complete and upload Cone of Silence Form	YES	YES	PJSI PSL Fountian FILE 3
17	Complete and upload Cost Proposal Worksheet in EXCEL FORMAT ONLY. Upload attachments as required.	YES	YES	
18	Contractor must agree to provide Equipment Startup, commissioning, training, programming and testing prior to Florida Health Inspection to City Staff.	YES	NO	
19	Contractor must agree to provide resources and documents for the State of Florida Health Department final inspection for the operating permit.Participation and documentation required for City permit application to the State of Florida Health Department and all punch list items resulting from the Florida Health Department inspection.	YES	NO	
20	Contractor must agree to provide and deliver to the City signed and sealed As-Built Survey.	YES	NO	
21	Contractor must agree to establish and maintain clean site conditions DAILY due to the High Visibility of this project.	YES	NO	
22	Contractor must agree to restore work areas and site to a pre-construction condition approved by the City of PSL, sod all disturbed areas and water until stabilized, repair any and all damaged areas and utilities to an approved status.	YES	NO	

**Attachment B - Cost Proposal Worksheet  
Solicitation No. 20210036  
City of Port St. Lucie, Florida**

**Contractor must provide their cost information in this spreadsheet. Failure to complete this spreadsheet will result in disqualification from the Solicitation. The Contractor's figure submitted below must include all costs associated with and in support of the Contractor's technical proposal.**

**Offeror must submit the "Cost Proposal Mandatory Worksheet" as part of the response. The cost proposal will be evaluated in accordance with the solicitation documentation.**

<b>Line Item</b>	<b>Description</b>	<b>Unit of Measure</b>	<b>Total Price</b>
1	<b>GENERAL CONDITIONS OF THE WORK</b> General conditions of the work that include but are not limited to; the Contractors home office support to the project, small tools, temporary facilities, continual site clean-up, off-site clean-up (spoil area), temporary fencing and signs, temporary toilets, temporary utilities, site protection, safety equipment, general expenses for site office, management and supervision of the work performed, coordination with the Owner, subcontractor management, material procurement and permit applications.	LS	\$ 104,812.00
2	<b>LAY-DOWN AREA, STAGING, SECURITY</b> Lay-down area and staging prep, truck access rubble strip per FDOT standard, silt fencing for soils retention areas, drainage structure protection at dewatering discharge points, fencing, signs and security measures to keep the public from the site activities	LS	\$ 6,885.00
3	<b>LOCK-OUT, TAG-OUT SYSTEMS-DISCONNECT POWER IN WORK AREAS</b> Lock-out, Tag-out Systems and disconnect power, water, low voltage sources in work areas along with any other utilities running within the work zone.	LS	\$ 2,065.00
4	<b>CAMERA EXISTING PIPING</b> Camera existing pipes from the existing equipment vaults to the main vault in the center of the fountain. Provide a video to the City of PSL and the DOR of each pipe by description included in these drawings and with detailed information on any damages noted in the pipes and their location. Video all pipes 3" and larger.	LS	\$ 13,528.00
5	<b>DEMOLITION</b> Demolition of slabs, saw cutting of door opening, infill of west door area, removal of interior wall and concrete, demo of plumbing systems and electrical systems, removal and storage of pavers in designated work area	LS	\$ 23,738.00
6	<b>SAFE-OFF, REMOVAL OF SEWER SYSTEM</b> Closure and removal of sewer system and safe-off use of restrooms (locked) until they are fully functioning at the end of the project with all systems operational-removal includes all of sewer system piping and structures as shown on the drawings	LS	\$ 2,478.00
7	<b>DEWATERING ACTIVITIES, PERMITS, MAINTENANCE OF SITE</b> De-watering systems as required (see Soils Report). Acquire all permits, etc. for discharges along with providing all of the environmental requirements to not allow sediments into the surface water collection systems. This is the cost for dewatering and all associated costs to maintain and operate for the entire time of the work in which it is required to be operational along with the maintenance of the discharge points and reclamation of any sediment discharges that may occur.	LS	\$ 16,523.00
8	<b>POTHOLING AND STABILIZATION</b> Potholing and stabilization of excavation area including the engineering and work plan for stabilization review and approval by the City of PSL (Port St. Lucie) and the DOR (Designer of Record) This includes the trench areas and the areas adjacent to the buildings. The work plan shall include the building stabilization for areas adjacent to buildings and foundations. Costs shall include any and all items required or necessary to guarantee stabilization of the building foundations from any damage due to the work being performed. This guarantee shall extend into the warranty period of the work for a minimum of 1 (one) year beyond the date of final payment and close-out of the construction contract.	LS	\$ 12,805.00
9	<b>EXCAVATION, VAULT AND PIPE REMOVAL</b> Excavation for pipe removal and new pipe installation area including, stockpiling of soils, disposal of waste soils per the direction of the City of PSL designated authority. (No waste soils or debris to be stockpiled on site)	LS	\$ 140,491.00

10	TESTING LAB, QUALITY CONTROL ACTIVITY COST Testing Lab costs for soils testing, concrete testing, pipe pressure testing prior to backfilling at joints or connections, flowable fill testing, and all other tests as required by the documents or for Quality Control by the Contractor. The City shall require all tests and test reports be presented at the time of the test and the results presented to the City's representative and the DOR. The Contractor shall allow for testing on each element of work that would require a test to confirm a quality installation and conformance with the documents, whether a test is specifically indicated or not by the documents.	LS	\$ 3,855.00
11	CONCRETE PAD FOR VAULT Installation of the concrete pad for the precast vault.	LS	\$ 3,373.00
12	PROVIDE AND INSTALL PRECAST VAULT Installation of the pre-cast vault with the waterproofing and retainage anchors to the concrete pad.	LS	\$ 27,538.00
13	INSTALL WATER PROOFING EPDM AT THE VAULT AND ALL BUILDING ACCESS POINTS Install waterproofing membrane to the vault and secure waterproofing for backfill operations	LS	\$ 3,442.00
14	INSTALL PIPE IN LAYERS WITH FLOWABLE FILL Installation of Piping per layer as prescribed by the drawings with flowable fill installed after successful testing is achieved for each pipe to the vault.	LS	\$ 110,181.00
15	INSTALL ELECTRICAL CONDUITS AND ACCESSORIES Installation of electrical conduits and wiring in trenches as shown on the drawings, including the low voltage control systems from the mechanical room to actuators in the vaults or in the pad.	LS	\$ 122,822.00
16	ELECTRICAL SWITCH GEAR AND PANELS INSTALLED Install electrical switch gear and panels required in all locations as indicated	LS	\$ 17,625.00
17	INSTALL PIPING AND FLOWABLE FILL FOR EQUIP ROOM Installation of piping and flowable fill for the equipment room from the exterior vault, does not include the equipment in the equipment room, does include the flowable fill around the vault.	LS	\$ 35,800.00
18	INSTALL SEWER AND ASSOCIATED CONNECTIONS Install the sewer pipe and all associated components to re-activate the sewer connection to the restrooms. Verify slopes etc. on the required as built survey along with locations, etc. of all associated components (clean outs, etc.)	LS	\$ 4,960.00
19	PUCHASE AND DELIVER ALL FOUNTAIN EQUIPMENT, INCLUDING THE EQUIPMENT ROOM AND ALL VAULTS Furnish and deliver all equipment for the equipment room, vaults, and the fountain pad systems, store in a secure location and provide insurance adequate for damage or loss with the City as co-insured in order to be paid for the equipment prior to installation.	LS	\$ 109,915.00
20	INSTALLATION OF FOUNTIAN EQUIPMENT, INCLUDING THE EQUIPMENT ROOM AND ALL VAULTS Installed equipment, fully operational and ready for commissioning and startup and FI Health Dept. Final Inspection.	LS	\$ 34,423.00
21	FINAL GRADING AND INSTALLATION OF PAVERS Final installation of compacted fill material and installation of pavers. Includes cost of all materials and labor for the installation of the pavers in this project. Compact fill to 100% Standard Proctor. Obtain a minimum QC density of 100% of the Standard Proctor maximum density as determined by AASHTO T-99, Method C. Provide stabilized base material for pavers and install per FDOT specification Section 526-1 through 526-3.2, Architectural Pavers	LS	\$ 42,478.00
22	INSTALL COATINGS AND PAINTS IN ALL VAULTS AND EQUIPMENT ROOM Coatings for vaults, floors, ceilings, walls, and exterior painting of stucco, doors, etc. Does not include paints or coatings for the Equipment room.	LS	\$ 13,494.00
23	CAMERA VIDEO COMPLETED PIPING PRIOR TO START-UP Camera video all installed pipes 3" and larger from the precast vault to the main vault in the center of the fountain. Provide the City of PSL and the DOR with a copy of the video per pipe by description and with the information relative to the pipe being in sound working condition prior to startup.	LS	\$ 8,606.00
24	EQUIPMENT ROOM SPRINKLER SYS CHANGES-FIRE ALARM MODIFICATIONS Equipment room sprinkler modifications and fire alarm connections as required	LS	\$ 688.00

25	INTERIOR FINISHES FOR EQUIPMENT ROOM Interior drywall ceiling assembly and steel door installation, mechanical room. Includes all finishes, paints, coatings other than coatings included in other bid items.	LS	\$ 10,056.00
26	EXHAUST SYSTEM AND HVAC FOR EQUIPMENT ROOM Exhaust system and HVAC system furnish and install complete for mechanical room, including any work to modify gable vent for exhaust and balance of HVAC controls with exhaust system.	LS	\$ 20,379.00
27	FLUSHING, TESTING AND DISINFECTION Flushing, disinfection, and testing prior to start-up. Verification of clean required by lab tests	LS	\$ 1,377.00
28	PROVIDE AND INSTALL SIGNS, ALSO REINSTALL EXISTING SIGNS, PROVIDE HAZARD SIGNS WHERE REQUIRED Provide and install signs as required by the documents	LS	\$ 688.00
29	REPAINT ELECTRICAL ROOM WALLS, CEILINGS, DOORS	LS	\$ 3,442.00
30	<b>TOTAL BID AMOUNT</b>		<b>\$ 898,467.00</b>

# 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>Paul Jacquin &amp; Sons, 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>PO Box 4343</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Fort Pierce, FL 34948</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.

Social security number	
[ ][ ] - [ ][ ] - [ ][ ][ ][ ]	
or	
Employer identification number	
5 9 - 1 6 4 0 4 4 1	

## 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 ▶ 5/25/21
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## General Instructions

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

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

### Purpose of Form

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

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/30/2020

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

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

PRODUCER <b>Post Insurance &amp; Financial, Inc.</b> 146 NW Central Park Plaza, Ste 102 Port St. Lucie, FL 34986 License #: www.InsureWithPost.	CONTACT NAME: <b>Suzanne Holt</b>	FAX (A/C, No): <b>(772)878-8292</b>	
	PHONE (A/C, No, Ext): <b>(772)878-8184</b>	E-MAIL ADDRESS: <b>suzanne@insurewithpost.com</b>	
INSURED <b>Paul Jacquin &amp; Sons Inc</b> P O Box 4343 Fort Pierce, FL 34948-4343	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A:	<b>Valley Forge Insurance Company</b>	
	INSURER B:	<b>National Fire Insurance of Hartford</b>	
	INSURER C:	<b>Continental Insurance Company</b>	
	INSURER D:		
	INSURER E:		

COVERAGES      CERTIFICATE NUMBER: 00007455-4005956      REVISION NUMBER: 1

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 type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		7011818382	01/01/2021	01/01/2022	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>500,000</b> MED EXP (Any one person) \$ <b>15,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COM/OP AGG \$ <b>2,000,000</b> \$
B	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		7011843069	01/01/2021	01/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$		7011818401	01/01/2021	01/01/2022	EACH OCCURRENCE \$ <b>3,000,000</b> AGGREGATE \$ <b>3,000,000</b> \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y / <input checked="" type="checkbox"/> N / A	7011818396	01/01/2021	01/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>
A	Equipment/Rented		7011818382	01/01/2021	01/01/2022	<b>100,000</b>

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

### CERTIFICATE HOLDER

**City of Port St Lucie**  
Contractor Licensing Division  
121 SW Port St Lucie Blvd  
Port St Lucie, FL 34984-5099

### CANCELLATION

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  
*Katherine E. Post*  
(MSH)

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Ron DeSantis, Governor

Halsey Beshears, Secretary



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

**CONSTRUCTION INDUSTRY LICENSING BOARD**

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

**JACQUIN, MICHAEL EDWARD**

PAUL JACQUIN & SONS INC  
POST OFFICE BOX 4343  
FORT PIERCE FL 34948-4343

**LICENSE NUMBER: CGC060473**

**EXPIRATION DATE: AUGUST 31, 2022**

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.



"A City for All Ages"

**E-Verify Form**  
Attachment O - 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.

**E-Verify Company Identification Number** 1696790

**Date of Authorization** 5/27/2021

**Name of Contractor** Paul Jacquin & Sons, Inc.

**Name of Project** Alterations to the City of PSL Interactive Water Fountain

**Solicitation Number (If Applicable)** \_\_\_\_\_

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

Executed on May, 27, 2021 in Fort Pierce (city), FL (state).

  
Signature of Authorized Officer

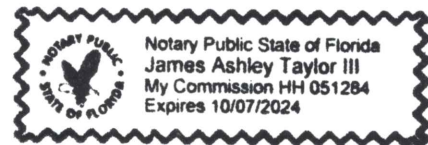
Chris D. Singley  
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE 27 DAY OF May, 2021

NOTARY PUBLIC James A. Taylor, III

My Commission Expires: 10/07/2024





Attachment M - Drug Free Workplace Form  
**DRUG-FREE WORKPLACE FORM**  
**eBID # 20210036**  
**Alterations to the City of PSL Interactive Water Fountain**

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

Paul Jacquin & Sons, 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.

  
\_\_\_\_\_  
Bidder's Signature

May 26th, 2021  
Date:



**SUPPLIER LOCATION CERTIFICATION**  
Attachment P - PSL Location Form

The undersigned, as a duly authorized representative of the Supplier listed herein, certifies to the best of their knowledge and belief, that the Supplier's location is correctly reflected based upon the below information. For purposes of this section, "Location" shall mean a business which:

- a) How far is the Supplier's fixed office or distribution point located from City Hall; and
- b) Is the principal offeror who is a single offeror; a business which is the prime contractor and not a subcontractor; or a partner or joint venturer submitting an offer in conjunction with other businesses.

Complete the following and upload this document and the Google Maps print out to the required sourcing platform:

Business Name: Paul Jacquin & Sons Inc	
Current Local Address: 7348 Commercial Circle, Fort Pierce, FL. 34951	Phone: 7724652475
Length of time at this address:	Fax: 7724662806
Please provide your prior business address if the above address has been for less than one (1) year, prior to the issuance of this solicitation.	
Length of time at this address: 30 Years	
Home Office Address: 7348 Commercial Circle, Fort Pierce, FL. 34951	Phone:
Length of time at this address: 30 Years	Fax:

(Signed) *Chris D. Singley*  
(Title) Sr. Project Manager

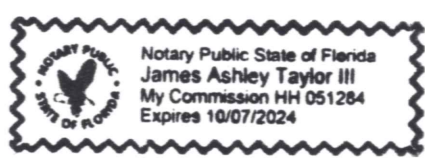
STATE OF FLORIDA }  
COUNTY OF ST. LUCIE} SS:

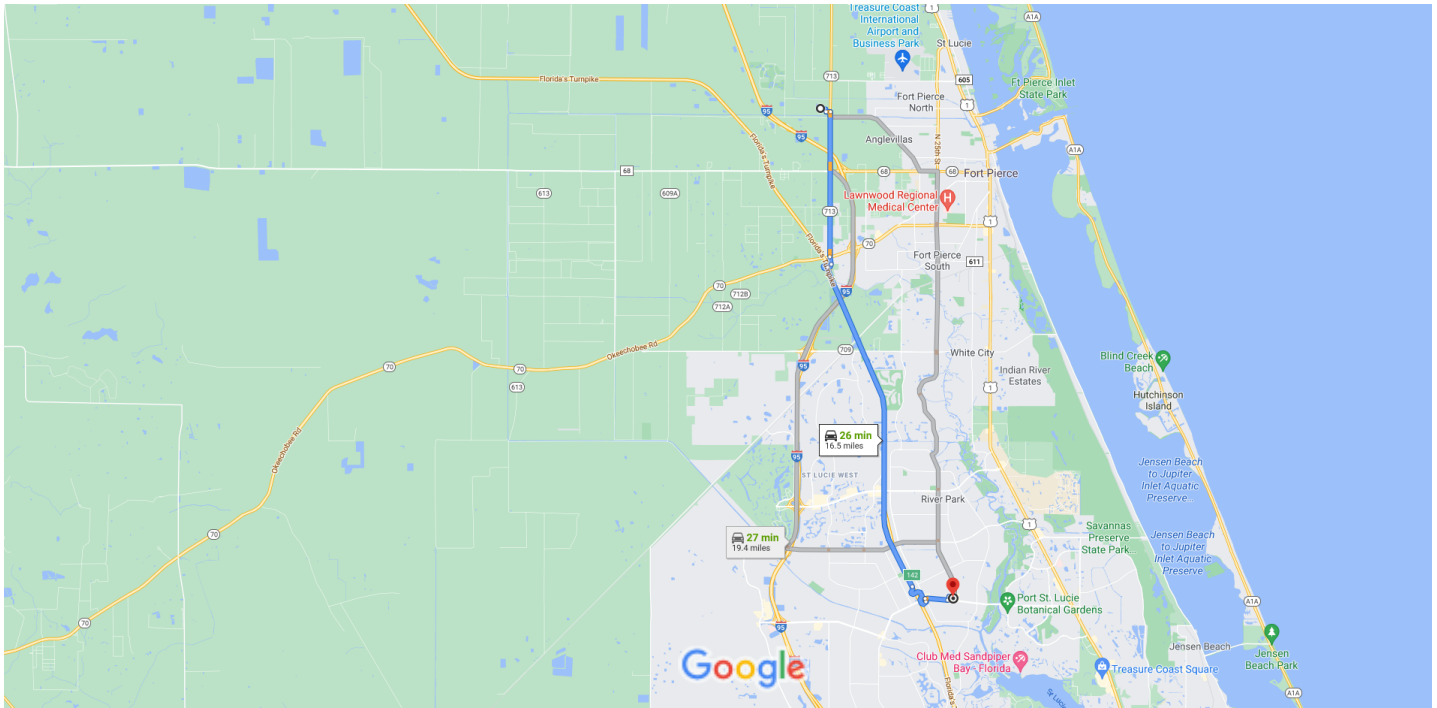
The foregoing instrument was acknowledged before me this (Date) 5/26/2021

by: *Chris Singley* who is personally known to me or who has produced  
\_\_\_\_\_ as identification and who did (did not) take an oath.

*James Ashley Taylor III*  
Notary (print & sign name)  
**JAMES TAYLOR**  
eBID # 20210036

Commission No. HA 057264





Map data ©2021 2 mi



via Florida's Turnpike

26 min

Fastest route, the usual traffic

16.5 miles

⚠️ This route has tolls.



via I-95 S

27 min

19.4 miles



via S 25th St

35 min

16.9 miles

### Explore 121 SW Port St Lucie Blvd



Restaurants



Hotels



Gas stations



Parking Lots



Less

Attachment J - Cone of Silence Form



"A City for All Ages"

**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 Mr. Jason Bezak, Issuing Officer, for the procurement of these services.

All questions regarding this Solicitation are to be submitted in writing to Jason Bezak, Procurement Agent I with the Procurement Management Department via e-mail [JBezak@cityofpsl.com](mailto:JBezak@cityofpsl.com), or by phone 772-344-4068. 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: Chris Singley

Signed: 

Company and Job Title: Paul Jacquin & Sons Inc.

Date: May 26th 2021



"A City for All Ages"

**eBID #20210036**

## **ATTACHMENT L - CONSULTANT'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 Consultant's Code of Ethics.

- ◆ A Consultant's bid or proposal will be competitive, consistent and appropriate to the bid documents.
- ◆ A Consultant 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.
- ◆ Consultant 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.
- ◆ Consultant will completely perform any contract awarded to it at the contracted price pursuant to the terms set forth in the contract.
- ◆ Consultant will submit timely, accurate and appropriate invoices for goods and/or services actually performed under the contract.
- ◆ Consultant 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.
- ◆ Consultant 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.
- ◆ Consultant 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.
- ◆ Consultant 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, Consultant must require their suppliers (including temporary labor agencies) to do the same. Consultant 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, Consultant 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 anti-discrimination 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 Paul Jacquin & Sons, Inc

Signature 

Printed Name and Title Chris Singley, Sr. Project Manager

Date 5/26/2021

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.



"A City for All Ages"

**NON-COLLUSION AFFIDAVIT**

**Solicitation # 20210036**

**Alterations to the City of PSL Interactive Water Fountain**

State of Florida

County of S. Lucie }

Chris Singley, being first duly sworn, disposes and says that:

(Name/s)

1. They are Sr. Project Manager of Paul Jacquin & Sons, Inc. the Proposer that

(Title)

(Name of Company)

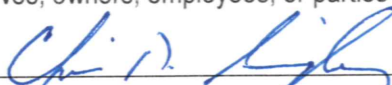
has submitted the attached PROPOSAL;

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) 

(Title) Sr. Project Manager



"A City for All Ages"

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

The foregoing instrument was acknowledged before me this (Date) 5/26/2021

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

Commission No. HH 051264

Notary Print: James A. Taylor

Notary Signature: 





# AIA Document A310™ – 2010

## Bid Bond

**CONTRACTOR:**  
(Name, legal status and address)  
Paul Jacquin & Sons, Inc.

**SURETY:**  
(Name, legal status and principal place of business) **Travelers Casualty and Surety Company of America**  
One Tower Square  
Hartford, CT 06183

7348 Commercial Circle  
Fort Pierce, FL 34951

**OWNER:**  
(Name, legal status and address)  
City of Port Saint Lucie  
121 SW Port Saint Lucie Blvd.  
Port Saint Lucie, FL 34984

BOND AMOUNT: ( 5% ) Five Percent of Amount Bid

**PROJECT:**  
(Name, location or address, and Project number, if any)  
Bid # 20210036, Civic Center Fountain, 9221 SW Civic Center Pl., Port Saint Lucie, FL 34952

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

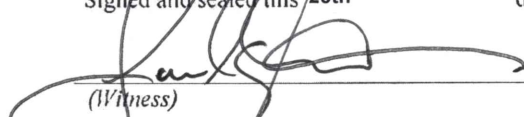
Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

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

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

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

Signed and sealed this 28th day of May 2021

  
(Witness)

Paul Jacquin & Sons, Inc.  
(Principal) \_\_\_\_\_ (Seal)

(Title)   
Travelers Casualty and Surety Company of America  
(Surety) \_\_\_\_\_ (Seal)

  
(Witness) Lisa Roseland

(Title) Jeffrey W. Reich, Attorney-in-Fact  
& Florida Licensed Resident Agent

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured. Inquiries: (407) 786-7770



**Travelers Casualty and Surety Company of America  
Travelers Casualty and Surety Company  
St. Paul Fire and Marine Insurance Company**

**POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS:** That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Jeffrey W. Reich, Kim E. Niv, Susan L. Reich, Gloria A. Richards, Teresa L. Durham, Cheryl Foley, Robert P. O'Linn, Sarah K. O'Linn, and Sonja Amanda Floree Harris of Maitland, Florida, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory 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, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February.

2017.

State of Connecticut

City of Hartford ss.



By:   
Robert L. Raney, Senior Vice President

On this the 3rd day of February, 2017, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

**RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

**FURTHER RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

**FURTHER RESOLVED**, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

**FURTHER RESOLVED**, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 28th day of May, 2021



Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.  
Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.

# AIA<sup>®</sup> Document A310<sup>™</sup> – 2010

## Bid Bond

**CONTRACTOR:**  
*(Name, legal status and address)*  
Paul Jacquin & Sons, Inc.

7348 Commercial Circle  
Fort Pierce, FL 34951

**OWNER:**  
*(Name, legal status and address)*  
City of Port Saint Lucie  
121 SW Port Saint Lucie Blvd.  
Port Saint Lucie, FL 34984

**BOND AMOUNT:** ( 5% ) Five Percent of Amount Bid

**PROJECT:**  
*(Name, location or address, and Project number, if any)*  
Bid # 20210036, Civic Center Fountain, 9221 SW Civic Center Pl., Port Saint Lucie, FL 34952

**SURETY:**  
*(Name, legal status and principal place of business)*  
Travelers Casualty and Surety Company of America  
One Tower Square  
Hartford, CT 06183

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

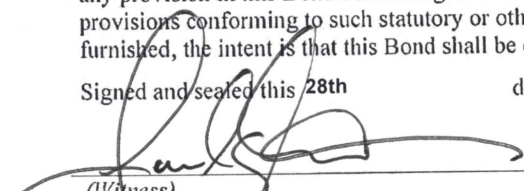

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.


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

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

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

Signed and sealed this 28th day of May 2021

  
*(Witness)*  
  
*(Witness)* Lisa Roseland

Paul Jacquin & Sons, Inc.  
*(Principal)*  *(Seal)*

*(Title)*  President  
Travelers Casualty and Surety Company of America  
*(Surety)*  *(Seal)*

*(Title)* Jeffrey W. Reich, Attorney-in-Fact  
& Florida Licensed Resident Agent

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured. Inquiries: (407) 786-7770



**Travelers Casualty and Surety Company of America  
Travelers Casualty and Surety Company  
St. Paul Fire and Marine Insurance Company**

**POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS:** That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Jeffrey W. Reich, Kim E. Niv, Susan L. Reich, Gloria A. Richards, Teresa L. Durham, Cheryl Foley, Robert P. O'Linn, Sarah K. O'Linn, and Sonja Amanda Floree Harris of Maitland, Florida, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory 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, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February.

2017.

State of Connecticut

City of Hartford ss.



By: *Robert L. Raney*  
Robert L. Raney, Senior Vice President

On this the 3rd day of February, 2017, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



*Marie C. Tetreault*  
Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

**RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

**FURTHER RESOLVED**, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

**FURTHER RESOLVED**, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

**FURTHER RESOLVED**, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 28th day of May, 2021



*Kevin E. Hughes*  
Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.  
Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.

Established. 1940



Commercial | Industrial | Residential

26 May 2021

City of Port St. Lucie Procurement Department  
Attn: Jeff Bezak  
121 SW Port St. Lucie Blvd  
Port St. Lucie, FL. 34984

RE: Alterations to the City of PSL Interactive Water Fountain  
EBID-20210036-0-2021/JBB

Dear Mr. Bezak;

Paul Jacquin & Sons Inc is preparing to submit a bid proposal for the above-mentioned project. We would like to address the project time frame that is being required by the City of Port St. Lucie.

It is our intention to complete the project in the timeliest manner possible within the requested 120 day contract period. However, due to the state of the economy and the availability of labor and materials it is conceivable that the project timeline will be pushed beyond the period because of these circumstances.

We anticipate the contract period to be approximately 180 days based on the state of the economy. We can determine a better timeframe once the contract and submittals are approved. Paul Jacquin & Sons is committed to the completing the project as quickly and safely as possible. Our bid proposal will reflect this updated timeline.

Thank you for your time and consideration in this matter.



Chris Singly  
Sr. Project Manager