Attachment D

Cost Worksheet - Schedule A E-Bid #20200104

Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

Line #								
1	Description of Mandatory Services	Quantity	Unit of Measure		Unit Price	То	Total Amou	
	Mobilization, Including Preconstruction Video of Project Manhole Interiors and Above Grade Conditions and post rehabilitation video log of manhole interiors.		LS	\$	2,500.00	\$	2,500	
	Manhole & Lift Station surface Prep	Sec. 1979				11111-150		
2	Dry abrasive blasting and removal of existing coating material	150	SF	\$	5.00	\$	750	
3	Demolition and removal of preexisting mechanically fastened or embedded liner materials including GU liner Systems	150	SF	\$	12.00	\$	1,800	
	High pressure water blasting (minimum 5000 psi) of existing substrate	150	SF	\$	2.50	\$	375	
	Liner Application (As directed by CPSL USD) including plugging, patching and v	vali repairs.					10 Year	
5	Cementitious	150	SF	\$	14.00	l s	2,100	
6	Composite Cementitious & Epoxy	1	SF	\$	35.00	_	35	
7	Cementitious-Palymer	1	SF	\$	30.00	1 -	30	
	Supplemental 0.5 inch thick layer(s) of cementitious build-back	150	SF	\$	12.00	\$	1,800	
	Supplemental 50 mil thick layer(s) of epoxy top coated	150	SF	\$	10.00	\$	1,500	
	Manhole Bypass Pumping - 8 inch Quite Flow (500 gpm)	1	Per Day	\$	800.00	\$	800	
	Resetting of existing manhole cover frame assembly & Chimney Repair	1	Each	\$	1,200.00	\$	1,200	
	Rebuild existing manhole bench & invert channel (4-foot diameter manhole)	1	Each	\$	350.00	\$	350	
	Chemical grouting of manholes	100	Per Gal.	\$	25.00	\$	2,500	
14	Sodding	50	SY	\$	5.00	\$	250	
15	Total Amount for Mandatory Services			1		\$	15,990	
	7 N. N. Wang and the first of the second control of the second con							
			Unit of					
	Additional Required Services or Products	Quantity			Unit Price			
1	Additional Required Services or Products Epoxy	Quantity 1	Measure SF	\$	Unit Price 20.00			
16 I	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm)		Measure	7500				
16 I	Ероху	1	Measure SF	\$	20.00			
16 I 17 I 18 I 19 I	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Lift Station Bypass Pumping (3000 gpm)	1	Measure SF Per Day	\$	20.00			
16 I 17 I 18 I 19 I	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm)	1 1 1	Measure SF Per Day Per Day	\$ \$	20.00 500.00 1,200.00			
16 17 18 19 L 20 S	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Lift Station Bypass Pumping (3000 gpm) Supply materials and labor for Installation of new manhole cover and frame	1 1 1	Measure SF Per Day Per Day Per Day Each	\$ \$ \$ \$	20.00 500.00 1,200.00 800.00 1,400.00			
16 II 17 II 18 II 19 II 20 S	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Lift Station Bypass Pumping (3000 gpm)	1 1 1 1 1	Measure SF Per Day Per Day Per Day Each	\$ \$ \$ \$ \$	20.00 500.00 1,200.00 800.00 1,400.00 450.00			
16 17 18 19 19 20 5 21 F 22 F	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Ift Station Bypass Pumping (3000 gpm) Supply materials and labor for Installation of new manhole cover and frame Rebuild existing manhole bench & invert channel (5-foot diameter manhole)	1 1 1 1 1	Measure SF Per Day Per Day Per Day Each	\$ \$ \$ \$ \$	20.00 500.00 1,200.00 800.00 1,400.00 450.00 600.00			
16 17 18 19 12 12 14 15 15 15 15 15 15 15	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Lift Station Bypass Pumping (3000 gpm) Supply materials and labor for Installation of new manhole cover and frame Rebuild existing manhole bench & invert channel (5-foot diameter manhole) Rebuild existing manhole bench & invert channel (6-foot diameter manhole)	1 1 1 1 1	Measure SF Per Day Per Day Per Day Each Each Each	\$ \$ \$ \$ \$ \$	20.00 500.00 1,200.00 800.00 1,400.00 450.00 600.00 50.00			
16 17 18 19 19 20 3 5 22 F 22 F 23 F 24 25 7	Epoxy Manhole Bypass Pumping – 6-inch Quiet Flow (500 gpm) Manhole Bypass Pumping – 10-inch Quiet Flow (500 gpm) Lift Station Bypass Pumping (3000 gpm) Supply materials and labor for Installation of new manhole cover and frame Rebuild existing manhole bench & invert channel (5-foot diameter manhole) Rebuild existing manhole bench & invert channel (6-foot diameter manhole) Removal of existing manhole steps	1 1 1 1 1	Measure SF Per Day Per Day Per Day Each Each	\$ \$ \$ \$ \$	20.00 500.00 1,200.00 800.00 1,400.00 450.00 600.00			

eBID NO. <u>20200104 – Attachment L</u> PROJECT TITLE: Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

CONTRACTOR INFORMATION / VERIFICATION FORM

THE FOLLOWING IS TO COMPLETED BY PRIME BIDDER:

Name of Firm: Hinterland Group Inc.	**
Corporate Title: Hinterland Group Inc.	
Address: 955 SE Parkway	
Stuart, FL.	34994
By: Chase Rogers , Project Director RPORTS	(Zip Code)
(Print name) ESEAL O	(Print title)
(Authorized signature)	
Telephone: () (561) 640-3503	
Fax: () (561) 640-3504	
Contact Person: Chase Rogers Email Address:	info@hinterlandgroup.com
CGC1520354 State License # CUC1224634	_(ATTACH COPY)
County License # 27495 / 31841	_(ATTACH COPY)
City License: (ATTACH PROOF OF REGISTRATION WITH	THE CITY) See attached
Type of License:Certified General Contractor / Certified Und	lerground Utility & Excavation Contracto
Unlimited Yes (yes/no)	
If "NO", Limited to what trade? N/A	



Subcontractor's List

Project No.: Ebid No. 20200104

Bid Name: Rehabilitation of City Sewer Structures, Manholes and Lift Station Wet

Wells

HG Job No.: 21-0037-00

1. Name:

Utility Technicians, Inc / Plastic Composites, Inc.

Address:

630 Goodbar Ave., Umatilla, FL 32784

Phone:

352-669-5822

License No.:

CUC1225516 and CUC052605

Description of Work: Coating of manholes with Raven 405

DRUG-FREE WORKPLACE FORM eBid # 20200104 - Attachment H

Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

The undersigned Contractor in accordance v	with Florida Statute 287.087 hereby certifies that
Hinterland Group Inc.	does:
A -	0-

(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 Chase Rogers, Project Director

03/02/2021

Date:

ATTACHMENT I - eBID #20200104

	Mandatory Questions			
	These questions are Pass/Fail. To be considered responsive, responsible and eligible for award, you must answer all questions in this section.	enswer all questic	ons in this sec	tion.
	DO NOT INCLUDE ANY COST INFORMATION IN YOUR RESPONSE TO THIS WORKSHEET.	KSHEET.		
Ouestion #	Ouestions per Proposal Factors/Categories	Response by Contractor. Some Answers may be Answered by a Yes or No; However, Some Ouestions May Require a Detailed	Upload Attachments with Additional Information?	Attachment File Name (Must Reference Page Number of Answer to Corresponding Question)
	Proposal Factors	STATE TO SELECT	中心 日本 日本	
П	Provide a list of subcontractors.	See attachment	Yes	Yes
2	Attach all certifications from the liner systems manufacturers held by the firm.	See attachment	Yes	Yes
m	List five (5) rehabilitation of manholes, lift stations an wet well projects similar to this project completed by your firm along with a brief description of project, location of project, client name, client phone number, value of contract, your firm's percentage of the total contract value, as well as the number of change orders and the total change order value.	See attachment	Yes	Yes
4	Has the Company received a cure notice from a government entity in the past 3 years?	No		
5	Does the Company have a drug-free workplace program?	Yes		
9	Is the Company claiming Local Preference under City Ordinance 35.12?	Yes		
7	Does the Bidder accept the Purchasing Card (Visa)?	No		
c	Has the Proposer or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into			
×	receiversnip?	No		
	Does the Company have any lawsuits pending or completed within the past five (5) years involving the corporation,			
6	partnership or individuals with more than ten percent (10%) interest?	No		
10	Does the Company have any judgments from lawsuits in the last five (5) years?	No		
11	Does the Company have any criminal violations and/or convictions of the Proposer and/or any of its principals?	No		



Subcontractor's List

Project No.: Ebid No. 20200104

Bid Name: Rehabilitation of City Sewer Structures, Manholes and Lift Station Wet

Wells

HG Job No.: 21-0037-00

1. Name:

Utility Technicians, Inc / Plastic Composites, Inc.

Address:

630 Goodbar Ave., Umatilla, FL 32784

Phone:

352-669-5822

License No.:

CUC1225516 and CUC052605

Description of Work: Coating of manholes with Raven 405





April 28, 2020

Hinterland Group Inc. 2051 W. Blue Heron Blvd Riviera Beach, FL 33404 561-640-3503

Subject: Refratta Application Status

This letter serves to verify that Hinterland Group Inc personnel have demonstrated commensurate skill, training, and safety protocol to be considered competent and qualified installers of Refratta HAC 100 materials (as manufactured by Global Materials Company). Hinterland Group Inc personnel have installation experience with the wet shotcrete spray installation method and have successfully installed Refratta HAC 100 in manholes, lift stations, and wet well rehabilitation applications.

With Refratta HAC 100 being a specialty construction product with specific installation methods and equipment requirements and Global Materials Company being selective in assessing and qualifying any contractor wishing to be considered as competent and qualified. Hinterland Group Inc is included among the contractors that have been selected as competent and qualified.

If you have questions or comments, please contact me directly.

Bruce Sellers

General Manager GLOBAL MATERIALS COMPANY 992 West 15th Street Riviera Beach, FL 33404 888-797-3736 - Office bsellers@globalmaterialscompany.com



Coating References

Palm Beach County
Duane Palumbo
561-906-4551
dpalumbo@pbcwater.com
Coated 15 existing wet wells (5,250 SF), 15 valve vaults (1,875 SF)

Palm Beach County
Vincent Riccobonno
(561) 493-6143

VMriccobonno@pbcwater.com
Coated 30 existing wet wells (10,500 SF), 30 valve vaults (3,750 SF)

City of Weston
Dave Bochenek
954-275-5819
dbochenek@westonfl.org
Coated 36 lift stations (942vf), 19,000 square feet

City of Cocoa
Gary Parker
321-848-4273
gparker@cocoafl.org
Coated 22 manholes (154 vf), 2 lift stations (44vf), 2,200 square feet

City of Ft. Lauderdale
Steve Roberts Jr.
954-828-7869
srobertsjr@fortlauderdale.gov
Coated 6 manholes (52 vf), 600 square feet



City of Port St. Lucie
Mike Jolly
772-344-4121
mjolly@cityofpsl.com
Coated 1 wet well (137 vf), 1171 square feet

City of Wellington
Corey Robinson
561-753-2464
crobinson@wellingtonfl.gov
Coated 6 lift stations (132vf), 4,800 square feet

City of Deerfield Beach
Fred Scott
954-410-4336
fscott@deerfield-beach.com
Coated 1 manhole (12 vf), 144 square feet

City of St. Pete Beach
Renee Cooper
727-363-9254
r.cooper@stpetebeach.com
Coated 1 lift station, 49 manholes (249 vf), 4,775 square feet

Brevard County
Bill Cowan
321-455-1338
Bill.cowan@brevardcounty.us
Coated 2 lift stations (35vf), 829 square feet

Florida Governmental Utility Authority
Ray Mann
239-229-3026
rmann@stes.com
Coated 24 manholes (168vf), 1,600 square feet



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/29/2021

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 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	CONTACT NAME:					
South Shore Insurance Inc.	PHONE (A/C, No, Ext): (772) 426-9973 FAX (A/C, No): (772) 8	372-5870				
955 SE Central Parkway	E-MAIL ADDRESS:					
Stuart FL 34994	INSURER(S) AFFORDING COVERAGE					
	INSURER A: Zurich American Insurance Company	16535				
INSURED	INSURER B: Travelers Property Casualty Company of Amer	25674				
Hinterland Group Inc.	INSURER C: American Guarantee & Liability Insurance Co.	26247				
2051 West Blue Heron Blvd	INSURER D:					
Riviera Beach, FL 33404	INSURER E:					
COVERAGEO	INSURER F :					

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	TY	E OF INS	URA	NCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)		LIMIT	rs
A	X COMMERC	s-MADE	x	Cluded	x	x	GLO 4956332-01	01/31/2021	01/31/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY	\$1,000,000 \$300,000 \$5,000 \$1,000,000
	GEN'L AGGREG POLICY OTHER:			PLIES PER:						GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ 2,000,000 \$ 2,000,000 \$
A	X ANY AUTO ALL OWNE AUTOS X HIRED AUT	, [. 1	SCHEDULED AUTOS AON-OWNED AUTOS	x	x	BAP 4956334-01	01/31/2021	01/31/2022	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$ 1,000,000 \$ \$ \$
В	X UMBRELLA EXCESS LI		X	OCCUR CLAIMS-MADE			ZUP81N2525921	01/31/2021	01/31/2022	EACH OCCURRENCE AGGREGATE	\$2,000,000 \$2,000,000
С	WORKERS COM AND EMPLOYER ANY PROPRIETO OFFICER/MEMBI (Mandatory In NII If yes, describe un DESCRIPTION O	' LIABIL RIPARTN REXCLU	ITY IER/E IDED)? N	N/A	x	WC 4956333-01	01/31/2021	01/31/2022	X PER OTH- E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$1,000,000 \$1,000,000 \$1,000,000
A	Inland Marii	9	11				CPP667426001	01/31/2021	01/31/2022	Installation Floater Rented/Leased Equi	\$2,000,000 \$500,000

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

Should any of the above policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. Certificate Holder is as an additional insured on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. A Waiver of Subrogation is provided on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. Coverage is primary/noncontributory when required by written contract agreement.

CERTIFICATE HOLDER	CANCELLATION
FOR BIDDING PURPOSES ONLY	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 Jumu Janman JNL

CITY OF PORT ST. LUCIE, FLORIDA SEALED BID NO. 20200104 – Attachment J

PROJECT TITLE: Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

TRENCH SAFETY ACT COMPLIANCE STATEMENT

Project Name: Throughout Port St. Lucie, Florida

Instructions:

Tan

Chapter 90-96 of the Laws of Florida requires all Contractors' engaged by The City of Port St. Lucie, Florida to comply with Occupational Safety and Health Administration Standard 29 C.F.R. s. 1926.650 Subpart P. All prospective Contractors are required to sign the compliance statement and provide compliance cost information where indicated below. The costs for complying with the Trench Safety Act must be incorporated into this project's base bid.

Certify this form in the presence of a notary public or other officer authorized to administer oaths.

Certification

- 1. I understand that Chapter 90-96 of the Laws of Florida (The Trench Safety Act) requires me to comply with OSHA Standard 29 C.F.R. s. 1926.650 Subpart P. I will comply with The Trench Safety Act and I will design and provide trench safety systems at all trench excavations in excess of five feet in depth for this project.
- 2. The estimated cost imposed by compliance with The Trench Safety Act will be:

D 11

Expires 11/12/2021

	1011	Dollars (Written)	\$10.00	(Figures)
3.	The amount lis	, ,	luded within the Base Bid.	ND GRO
	Certified: Hin	nterland Group Inc.		Z
	Ву:	(Company-Co	ontractor)	SEAL
			ignature) Daniel Duke III, P yped or Printed Name)	resident
Swo	rn to and subscri	ibed before me in, 20 <u>21</u> .	St. Lucie	County, Florida on the 2nd
		Mayra C. Aguiar Notary Public State of Florida Comm# GG125233	NOTARY PUBLIC	

NON-COLLUSION AFFIDAVIT

Solicitation 20200104 - Attachment G Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

State of Florida	
County of St. Lucie	_}
Chase Rogers	, being first duly sworn, disposes and says that:
(Name/s)	
1. They are Project Director o	f Hinterland Group Inc. the Proposer that
(Title)	(Name of Company)

- 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;

has submitted the attached PROPOSAL:

- Neither the said Proposer nor any of its officers, partners, owners, agents, representatives. 4. 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
- 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) Chase Rogers, Project Director

County Certification Number:

31841

St. Lucie County

Planning & Development Services
Building & Code Regulation Division
2300 Virginia Ave
Fit Pierce, FL. 34982
Phone: (772) 462-1672 Fext: (772) 462-1148
http://www.stlucleco.org/planning/contract_licen.htm

Duke lii, Daniel A. Hinterland Group Inc 2051 W Blue Heron Blvd Riviera Beach, FL 33404

Class Code:

UNDERGROUND UTILITY

- CERTIFIED

License Type:

COUNTY CERTIFICATION

This Competency Card, issued by the St. Lucie County Contractor Certification Division, authorizes work for the Class Code stated, for the unincorporated areas of St. Lucie County. It does not authorize work for the City of Ft. Pierce, St. Lucie Village or the City of Port St. Lucie. It is the Contractor's responsibility to maintain this card in a current status by providing a Certificate of Insurance, current address and telephone Information, and renewing this card annually as required.

Expiration Date:

8/31/2022

Danielle Williams

Wallet Contractor ID Card

Cut to fit, then fold in half

IDENTIFICATION CARD

St. Lucie County

County Certification Number 31841 Class Code: UNDERGROUND UTILITY - CERTIFIED

This is to certify that DUKE III, DANIEL A., HINTERLAND GROUP INC has been issued a County Certificate in St. Lucie County, beginning on 7/31/2020 and ending on 8/31/2022, unless license is revoked.

Danielle Williams

Authorized Licensing Official

Contractor Licensing: (772) 462-1672
Contractor Fax Line: (772) 462-1148
Automated Inspection Line: (866) 284-1280
Inspection Line: (772) 462-2172

County Certification Number:

27494

St. Lucie County

Planning & Development Services
Building & Code Regulation Division
2300 Virginia Ave
Ft Pierce, FL 34982
Phone: (772) 462-1572 Fax: (772) 462-1148
http://www.stlucieco.org/planning/contract_licen.htm

Breig, Charles J Hinterland Group Inc 2051 W Blue Heron Blvd Riviera Beach , FL 33404

Class Code:

ELECTRICAL -

CERTIFIED

License Type:

COUNTY CERTIFICATION

This Competency Card, issued by the St. Lucle County Contractor Certification Division, authorizes work for the Class Code stated, for the unincorporated areas of St. Lucle County. It does not authorize work for the City of Ft. Pierce, St. Lucle Village or the City of Port St. Lucle. It is the Contractor's responsibility to maintain this card in a current status by providing a Certificate of Insurance, current address and telephone information, and renewing this card annually as required.

Expiration Date:

8/31/2022

Danielle Williams

Wallet Contractor ID Card

Cut to fit, then fold in half

IDENTIFICATION CARD

St. Lucie County

County Certification Number 27494 Class Code: ELECTRICAL - CERTIFIED

This is to certify that BREIG, CHARLES J, HINTERLAND GROUP INC has been issued a County Certificate in St. Lucle County, beginning on 1/9/2013 and ending on 8/31/2022, unless license is revoked.

Danlelle Williams

Authorized Licensing Official

Contractor Licensing: (772) 462-1672 Contractor Fax Line: (772) 462-1148 Automated Inspection Line: (866) 284-1280 Inspection Line: (772) 462-2172 County Certification Number:

27495

St. Lucie County

Planning & Development Services
Building & Code Regulation Division
2300 Virginia Ave
Fit Pierce, FL 34982
Phone: (772) 462-1672 Fax: (772) 462-1148
http://www.stlucleco.org/planning/contract_licen.htm

Duke III, Daniel Hinterland Group Inc 2051 W Blue Heron Blvd Riviera Beach, FL 33404

Class Code:

GENERAL - CERTIFIED

License Type:

COUNTY CERTIFICATION

This Competency Card, issued by the St. Lucie County Contractor Certification Division, authorizes work for the Class Code stated, for the unincorporated areas of St. Lucie County. It does not authorize work for the City of Ft. Pierce, St. Lucie Village or the City of Port St. Lucie. It is the Contractor's responsibility to maintain this card in a current status by providing a Certificate of Insurance, current address and telephone information, and renewing this card annually as required.

Expiration Date:

8/31/2022

Danielle Williams

Wallet Contractor ID Card

Cut to fit, then fold in half

IDENTIFICATION CARD

St. Lucie County

County Certification Number 27495 Class Code: GENERAL - CERTIFIED

This is to certify that DUKE III, DANIEL, HINTERLAND GROUP INC has been Issued a County Certificate In St. Lucie County, beginning on and ending on 8/31/2022, unless license is revoked.

Danleile Williams

Authorized Licensing Official

Contractor Licensing: (772) 462-1672
Contractor Fax Line: (772) 462-1148
Automated Inspection Line: (866) 284-1280
Inspection Line: (772) 462-2172

CITY OF PORT ST. LUCIE BUILDING DEPARTMENT COMPUTER SERVICE MEMBER

EXPIRE: 9/30/21

DUKE III, DANIEL HINTERLAND GROUP INC 2501 W BLUE HERON BLVD RIVIERA BEACH, FL 33458

SIGNATURE

GENERAL CONTRACTOR

FL#: CGC1520354

PSL * 15349

35602

35599

35598



CITY OF PORT ST. LUCIE BUILDING DEPARTMENT COMPUTER SERVICE MEMBER

EXPIRE: 9/30/21

DUKE III, DANIEL HINTERLAND GROUP INC 2501 W BLUE HERON BI VD RIVIERA BEACH, FL 33494

SIGNATURE

UNIVERGROUND UTILITY

FL#: CUC1224634

PSL * 15348



CITY OF PORT ST. LUCIE BUILDING DEPARTMENT COMPUTER SERVICE MEMBER

EXPIRE: 9/30/21

BREIG, CHARLES HINTERLAND GROUP INC 2501 W BLUE HERON BLVD RIVIERA BEACH, FL 33404

SIGNATURE

ELECTRICAL CONTRACTOR

FL#: EC13003615

PSL * 15347



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN SCERTIFIED UNDER THE PROVISIONS OF CH



LICENSE NUMBERICGC1520354

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at 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.



Halsey Beshears, Secretary



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE UNDERGROUND UTILITY & EXCANDING OF PEREN IS CERTIFIED UNDER THE PROVISIONS OF CIT



LICENSE NUMBERICUCI224634

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at 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.



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS LICENSING BOARD

THE ELECTRICAL CONTRACTION HEREINGS CERTIFIED UNDER THE PROVISIONS OF CHA



LICENSE NUMBERRECT 3003615

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at 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.

DRUG-FREE WORKPLACE FORM

eBid # 20200104 - Attachment H

Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells

The undersigned Contractor in accordance v	with F	lori	da Statut	te 287.087 hereby certifies	that
Hinterland Group Inc.				does:	
	0-				

(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 Chase Rogers, Project Directo

03/02/2021

Date:

BID BOND

Bond

KNOW ALL BY THESE PRESENTS, that we, the undersigned, Hinterland Group Inc
2051 West Blue Heron Boulevard Riviera Beach FL 33404 as Principal, a
(Name and Address of CONTRACTOR) Hartford Accident and Indemnity Company, One Hartford Plaza. Hartford, CT 06155 as Surety, are here
(Name and Address of Surety)
held and firmly bound unto City of Port St. Lucie 121 SW Port St. Lucie Blvd., Port St. Lucie FL 34984
(Name of OWNER) as OWNER in the penal sum of One Thousand Dollars 00/100
Dollars (\$ 1,000.00) for the payment of which, well and truly to be made, we hereby jointly and severally bind ourselve successors, and assigns.
Signed this 1st day of March , 2021 .
The Condition of the above obligation is such that whereas the Principal has submitted to City of Port St. Lucie
121 SW Port St. Lucie Blvd., Port St. Lucie FL 34984 a certain BID, attached hereto and hereby made a part hereof to enter a contra
in writing, for the construction of Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells
RFP/Contract: 20200104
NOW THEREFORE

NOW, THEREFORE,

- (a) If said BID shall be rejected, or
- (b) If said BID shall be accepted and the Principal shall execute and deliver a contract in the Form of Contract attached hereto (properly completed in accordance with said BID) and shall furnish a BOND for his faithful performance of said contract, and for the payment of all persons performing labor or furnishing materials in connection therewith, and shall in all other respects perform the agreement created by the acceptance of said BID,

then this obligation shall be void, otherwise the same shall remain in force and effect; it being expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.

The Surety, for value received, hereby stipulates and agrees that the obligations of said Surety and its BOND shall be in no way impaired or affected by an extension of the time within which the OWNER may accept such BID; and said Surety does hereby waive notice of any such extension.

E-Verify Form

Supplier/Consultant acknowledges and agrees to the following:

- 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
- 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	1579646
Date of Authorization	August 2020
Name of Contractor	Hinterland Group Inc.
Name of Project	Rehabilitation of City Sewer Structures, Manholes & Lift Station Wet Wells
Solicitation Number (If Applicable)	EBID 20200104-0-2021/RH
I hereby declare under penalty of perjury tha Executed on March	t the foregoing is true and correct. 20 21 in Port St. Lucie (city), FL (state).
/ Ly	Chase Rogers, Project Director
Signature of Authorized Officer	Printed Name and Title of Authorized Officer or Agent
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 02 DAY OF March NOTARY PUBLIC LA CALLA CALLA	ANDREA KATHLEEN MCTEER Notary Public-State of Florida Commission # HH 38193 My Commission Expires August 31, 2024
My Commission Expires: August 31	2024

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 Ms. Robyn Holder, Issuing Officer, for the procurement of these services.

All questions regarding this Solicitation are to be submitted in writing to Robyn Holder, Procurement Manager with the Procurement Management Department via e-mail rholder@cityofpsl.com, or by phone 772-344-4293. 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: Chase Rogers	W. 05
Signed:	≧ CEA-
Company and Jeb Title: Hinterland Group Inc	Project Director
Date: 03/02/2021	FLOR



"A City for All Ages"

eBID #20200104 - ATTACHMENT K CONTRACTOR'S CODE OF ETHICS

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

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

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

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

	10 G6 30
Name of Organization/Proposer Hinterland Group Inc.	W. ORPORA/
Signature	SEAL
Printed Name and Date Chase Rogers, Project Director	FLORIDA
	The state of the s
Date03/02/2021	**************************************

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 contract or contract, the law, regulatory provision(s) and/or vendor contract shall prevail.

Form W-9

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

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

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

		,				_	_							
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.													
	Hinterland Group Inc. 2 Business name/disregarded entity name, if different from above											_		
	N/A													
oage 3.	The state of the s									only als; s	to ee			
e. Is on !	☐ Individual/sole proprietor or ☐ C Corporation ☑ S Corporation single-member LLC	on Partnership Trust/estate					instructions on page 3): Exempt payee code (if any)							
호	Limited liability company. Enter the tax classification (C=C corporation, §	S=S corporation, P=Partners	ship) ▶											
Print or type. Specific Instructions on page 3.	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that					1	Exemption from FATCA reporting code (if any)							
띃	is disregarded from the owner should check the appropriate box for the tax classification of its owner. Other (see instructions)						(Applies to accounts maintained outside the U.S.)							
Sp	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name					and address (optional)							
See	2051 W. Blue Heron Blvd. 6 City, state, and ZIP code													
	Riviera Beach, FL. 33404													
	7 List account number(s) here (optional)												—	
Par														
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid		oid	So	cial se	curi	ty nu	ımbe	r						
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		ora				_		7	Γ					
entitie	s, it is your employer identification number (EIN). If you do not have a		a		i_		L			L	L		<u></u>	
TIN, later.			1-1-	-110	- 41 -				_					
	If the account is in more than one name, see the instructions for line 1 or To Give the Requester for quidelines on whose number to enter.	, Also see what Name a	ana [Em	proyer	r identification number								
,		2	0	-	5	1 8	5 (6 8	4	4				
Par	II Certification						_		Щ.		1	Ш	<u> </u>	
Under	penalties of perjury, I certify that:						_							
2. I an Ser	number shown on this form is my correct taxpayer identification num not subject to backup withholding because: (a) I am exempt from ba vice (IRS) that I am subject to backup withholding as a result of a failuling result of a failuling result of a failuling.	ckup withholding, or (b)	I have n	ot b	een r	notif	ied l	hv th	e Ini	ternal	Rev	enue nat la	, am	
3. I an	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 exemp	pt from FATCA reporting	j is com	ect.										
you ha acquis	cation instructions. You must cross out item 2 above if you have been now falled to report all interest and dividends on your tax return. For real estion or abandonment of secured property, cancellation of debt, contribution in interest and dividends, you are not required to sign the cartification, but an interest and dividends, you are not required to sign the cartification, but are not required to sign the cartification, but are not required to sign the cartification.	tate transactions, item 2 ions to an individual retire	does no	t ap	ply. Fo	or m	ortg (A), á	age i	nter	est pa	iid, Javm	ents		
Sign Here	Signature of U.S. person ▶ Daniel Duk	e III - President p	ate ▶ 0	3/0	2/20)21								
Ger	eral Instructions	Form 1099-DIV (div	idends,	incl	uding	the	se f	rom :	stoc	ks or	mut	ual		
Sectio	n references are to the Internal Revenue Code unless otherwise	• Form 1099-MISC (v proceeds)	arious t	ype	s of ir	ncor	me, į	prize	s, a\	wards	s, or	gross	S	
related	developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted ey were published, go to www.irs.gov/FormW9.	Form 1099-B (stock transactions by broken)		ual	fund s	sale	s an	d ce	tain	othe	r			
	ose of Form	Form 1099-S (proceForm 1099-K (merce								•	eacti	nne)		
An individual or entity (Form W-9 requester) who is required to file an • Form 1098 (home mortgag).		
nformation return with the IRS must obtain your correct taxpayer 1098-T (t		1098-T (tuition) • Form 1099-C (canc	·											
SSN), individual taxpayer identification number (ITIN), adoption			•	abandonment of secured property)										
		if you are a U.S. person (including a resident												
returns include, but are not limited to, the following. If you do not return Form W-9 to the requester with a TIN, you				mial	ht									
Form	Form 1099-INT (interest earned or paid) be subject to backup withholding. See What is backup withhold later.						-							