

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

**INVITATION TO BID
Bidder Acknowledgement**

Vendor Name: One Call Florida, Inc.

**Vendor Mailing Address: 6650 W Indiantown Road
Ste 210-23
Jupiter, FL 33458**

E-Mail Address: Brent@onecallflorida.com

Area Code / Telephone Number: 772-223-8400

Toll-Free Telephone Number: N/A

Fax Number: 772-409-8620

Web Address: www.onecallflorida.com

FEID No. or SS #: 20-3566260

Delivery calendar days after receipt of order: TBD per contract

ANTI-COLLUSION

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

BID CERTIFICATION

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

Name of Representative Submitting Bid: Brent Martin

Title of Company Representative: President of Construction

Date: 3/29/19

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

REQUIRED RESPONSE FORM

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

Anti-Collusion Statement / Public Domain

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

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

Information Package Certification

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

RESPONDER(S) (firm name): One Call Florida, Inc.

STREET ADDRESS: 6650 W Indiantown Road Ste 210-23

CITY & STATE: Jupiter FL 33458

ELECTRONIC SIGNATURE OF AUTHORIZED REPRESENTATIVE: Brent Martin

TITLE: President of Construction DATE: 3/29/19

CONTACT PERSON: Brent Martin

CONTACT PERSON'S ADDRESS: 6650 W Indiantown Road Ste 210-23 Jupiter, FL 33458

TELEPHONE: 772-324-1146 FAX: 772-409-8620 TOLL FREE: N/A

E-MAIL ADDRESS: Brent@onecallflorida.com INTERNET URL: www.onecallflorida.com

RESPONDER(S) TAXPAYER IDENTIFICATION NUMBER: 20-3566260



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Beneficial Interest and Disclosure of Ownership Affidavit

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

Corporate Name One Call Florida, Inc.

Tax FEIN No. 20-3566260

Before me, the undersigned authority, personally appeared, Brent Martin, ("Corporate Representative") this 29th day of March, 2019, who, first being duly sworn, as required by law, subject to the penalties prescribed for perjury, deposes and says:

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

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

Name	Address	Percentage
Robert Ambrosius	6650 W Indiantown Rd, Jupiter, FL 33458	100%

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

Name	Address	Percentage
Robert Ambrosius	6650 W Indiantown Rd, Jupiter, FL 33458	100%

C. Stock held for others and for whom held:

1. Name / 2. From Whom Held	Address	Percentage
1. <u> </u>		
2. <u> </u>		
1. <u> </u>		
2. <u> </u>		
1. <u> </u>		
2. <u> </u>		

CORPORATE REPRESENTATIVE

By: Brent Martin / 

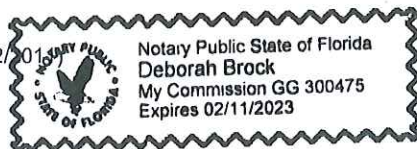
SWORN TO and subscribed before me this 29th day of March, 2019, by Brent Martin Such person(s) (Notary Public must check applicable box).

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

(NOTARY PUBLIC SEAL)


 Notary Public

Deborah Brock
 (Print, Type or Stamp Name of Notary Public)





April 5, 2019

The School District of Palm Beach County, Florida
Palm Beach County, Florida
Construction Purchasing Department
3300 Forest Hill Blvd., Suite A323
West Palm Beach, FL 33406

SOLICITATION: 19C-24T
RE: CONFLICT OF INTEREST

One Call Florida, Inc. confirms **no conflict of interest with any officer, director, or agent employed with the School District of Palm Beach County. Also, no occurrences** have occurred or taken place in which a complaint has been filed against the Bidder, litigation has been filed or is pending against the Bidder, or the Bidder is currently involved in a legal or administrative proceeding alleging the Bidder discriminated on the basis of race, gender, gender identity or expression, religion, national origin, ethnicity, sexual orientation, age, or disability against any of its sub-consultants, vendors suppliers, or commercial customers.

Sincerely,

A handwritten signature in blue ink, appearing to read "Brent Martin", with a long horizontal flourish extending to the right.

Brent Martin / President of Construction

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

AREA REPRESENTATIVE

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

Vendor Name:	One Call Florida, Inc.
Area Representative:	Brent Martin
Address:	6650 W Indiantown Road Ste 210-23
City/Zip Code:	Jupiter, FL 33458
Email Address:	Brent@onecallflorida.com
Telephone:	772-223-8400
Cell Phone	772-324-1146
Fax Number:	772-409-8620
Emergency Number:	772-223-8400

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

DEBARMENT CERTIFICATION

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

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

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

Organization Name: One Call Florida, Inc.

Solicitation Number or Project Name: 19C-24T Cabling Contractor Services

Name of Authorized Representative: Brent Martin

Title of Representative: President of Construction

Date: 3/29/19

INSTRUCTION CERTIFICATIONS

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

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



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

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

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

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

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

VENDOR'S SIGNATURE

DATE

One Call Florida, Inc.
COMPANY NAME



PBSD 0580 (Rev. 4/8/2003)

ORIGINAL - Purchasing Department

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

EARLY PAYMENT TERMS

Bid number/Name: Bid 19C-24T - Cabling Contractor Services

Vendor Name: One Call Florida, Inc.

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

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

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

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

The School District of Palm Beach County

SMALL BUSINESS ENTERPRISE (SBE)
CERTIFICATION INFORMATION

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

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

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

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

YES*

NO

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

Certification Expiration Date: **5/22/20**

Ethnicity Classification: **SBE, Caucasian**

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

<u>Vendor</u>	<u>Estimated Dollar Value</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

					Yes No		
					Yes No		
					Yes No		
					Yes No		
					Yes No		

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

Name of Proposer: **One Call Florida, Inc.**

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

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

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

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

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

LEGAL OPINION ABOUT STATE BIDDING PREFERENCES

(Please Select One)

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

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

LEGAL OPINION ABOUT POLITICAL SUBDIVISION BIDDING PREFERENCES

(Please Select One)

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

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

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

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

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

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

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

Attorney's states of bar admission:

Proposer's Printed Name: **Brent Martin** Signature **Brent Martin**

Company Name: **One Call Florida, Inc.**

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

REFERENCES

Vendor Name: One Call Florida, Inc.

Bid number/Name: Bid 19C-24T - Cabling Contractor Services

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

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

Reference 1 – New Customer (one year or less)

Name of Firm:	Palm Beach County
Scope of Work:	Analog to digital camera change out for three bus depots
Cost of Service:	797,945.00
Date of Service:	6/5/2018-11/23/2018
Contact Person:	Chris Eaton
Email:	Ceaton@pbcgov.org
Phone #:	561-252-7445
Address:	38601 James Wheeler Way, Belle Glade, FL 33430 20 South Military Trail, West Palm Beach, FL

Reference 2 – Past Customer (currently not doing business)

Name of Firm:	Martinique Country Club - Club House
Scope of Work:	Camera System & Equipment Relocation FOB Access Network Phone System
Cost of Service:	65,000
Date of Service:	11/20/15-4/18-15
Contact Person:	Christine DiRenzo
Email:	cdirenzo@campbellproperty.com
Phone #:	561-203-7910
Address:	1812 Dakota Dr. Jupiter, FL 33458

Reference 3 – Repeat or Long Term Customer

Name of Firm:	School District of Palm Beach County
Scope of Work:	Renovation of a school cafeteria including electrical, audio, video distribution & digital signage.
Cost of Service:	131,560.00

Date of Service:	3/10/18 - 11/5/18
Contact Person:	Ian Esplin
Email:	ian.esplin@palmbeachschools.org
Phone #:	561-882-1919
Address:	4701 10th Ave N, Green acres, FL 33463

Reference 4 – Repeat or Long Term Customer

Name of Firm:	School District of Palm Beach County
Scope of Work:	Installation of New Equipment for Data Center
Cost of Service:	212,750.00
Date of Service:	3/6/2017-9/21/2017
Contact Person:	Dorothy Banaszewski
Email:	dorothy.banaszewski@palmbeachschools.org
Phone #:	561-723-9165
Address:	3661 Interstate Park Rd North, Riviera Beach, FL 33404

Reference 5 – Repeat or Long Term Customer

Name of Firm:	Martin County
Scope of Work:	various jobs around martin county
Cost of Service:	25,000 +
Date of Service:	12/2012-2/2019
Contact Person:	Jeff Dougherty
Email:	jdougher@martin.fl.us
Phone #:	772-320-3032
Address:	various sites in Martin County

Building Industry Consulting Service International

THE PROFESSIONAL DESIGNATION OF

REGISTERED COMMUNICATIONS DISTRIBUTION DESIGNER®

IS AWARDED TO

Moncef Hadiji

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

Designation Number: 164145
Registration Start Date: 01/01/2019
Registration End Date: 12/31/2021



Bicsi
RCDD
Since
09/23/2006

Chair, Registrations & Credentials Supervision Committee

Director of Credentialing

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: USI Insurance Services, LLC, 500 Columbia Drive, Ste 102, West Palm Beach, FL 33409-2718, 561 693-0500. CONTACT NAME: Kandi Schmitz, PHONE: 561-693-0504, FAX: 855-420-6662, E-MAIL ADDRESS: kandi.schmitz@usi.com. INSURER(S) AFFORDING COVERAGE: INSURER A: Everest Indemnity Insurance Company (NAIC # 10851), INSURER B: Bridgefield Casualty Insurance Company (NAIC # 10335), INSURER C: Federal Insurance Company (NAIC # 20281), INSURER D: Auto Owners Insurance Company (NAIC # 18988), INSURER E: , 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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSR, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Umbrella Liab, Workers Compensation, Pollution Liab, Professional Liab, and Equipment Floater.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Automatic Additional Insured on General Liability, Pollution and Professional when required by contract. Pollution Liability: \$2,000,000 Aggregate / \$1,000,000 Occurrence / \$5,000 Deductible Professional Liability: \$2,000,000 Aggregate / \$1,000,000 Occurrence / \$5,000 Deductible Equipment Floater Deductible: \$1,000

CERTIFICATE HOLDER 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: B. M. Carl



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, 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

AMBROSIUS, ROBERT C

ONE CALL FLORIDA, INC
6650 WEST INDIANTOWN ROAD
BUILDING 230 - SUITE 23
JUPITER FL 33458

LICENSE NUMBER: CGC1519002

EXPIRATION DATE: AUGUST 31, 2020

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.

RICK SCOTT, GOVERNOR



JONATHAN ZACHEM, SECRETARY



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

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

FLANAGAN, JAMES ALBERT

ONE CALL FLORIDA, INC
7804 SW ELLIPSE WAY
STUART FL 34997

LICENSE NUMBER: EC13001239

EXPIRATION DATE: AUGUST 31, 2020

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.



ANNE M. GANNON
 CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****
 6650 W INDIANTOWN RD Ste 230-23
 JUPITER, FL 33458

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0051 GENERAL CONTRACTOR	AMBROSIUS ROBERT C	CGC1519002	U18.724239 - 09/19/18	\$5.95	B40190418

This document is valid only when receipted by the Tax Collector's Office.

**STATE OF FLORIDA
 PALM BEACH COUNTY
 2018/2019 LOCAL BUSINESS TAX RECEIPT**

**LBTR Number: 2018111285
 EXPIRES: SEPTEMBER 30, 2019**

ONE CALL FLORIDA INC
 ONE CALL FLORIDA INC
 6650 W INDIANTOWN RD SUITE 230-23
 JUPITER, FL 33458

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.

State of Florida



Department of State

I certify from the records of this office that ONE CALL FLORIDA, INC is a corporation organized under the laws of the State of Florida, filed on September 29, 2005.

The document number of this corporation is P05000133724.

I further certify that said corporation has paid all fees due this office through December 31, 2017, that its most recent annual report/uniform business report was filed on April 28, 2017, and its status is active.

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

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Second day of March, 2018



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State



ORGANIZATION PROFILE

History

One Call Property Services, Inc. is a general contracting company located in Palm Beach County and provides a full range of exterior and interior, commercial and residential, renovations services. One Call has been partnering with the School Board of Palm Beach County for the past 11 years, the same amount of time we have been business. We pride ourselves for our expertise in educational construction.

We offer a variety of contracting services: General contracting, Construction Management, Design Build, LEED, Remodeling, Roofing, HVAC, Low Voltage, and Electrical throughout South and Central Florida. Locations include, but are not limited to: Miami-Dade, Broward, Palm Beach, Martin, St. Lucie County, Indian River, Volusia, and Flagler County including the cities of Ft. Lauderdale, Miami Beach, West Palm Beach, Palm Beach Gardens, Jupiter, Jupiter Island, Hobe Sound, Stuart, Jensen Beach, Port St. Lucie, Fort Pierce, Vero Beach.

Vision Statement

We understand how important trust is in a contractor / client relationship. As a relationship- based company, we promote communication and are dedicated to long-term client and team commitments. Our ability to deliver on our commitments is evident in our exceptional level of repeat business. Our clients value the relationship we build with them and recognize our

In fact, over 80% of our customers are repeat customers for all construction remodels, general contracting, building remodeling, additions, bath remodel, kitchen remodel and commercial roofing. This is the true measure of our team - a team with the proven strength and spirit to take challenges head on, get the tough jobs done, the buildings built and our customers genuinely satisfied. To our clients, we have a responsibility to provide a superior product & our strength is our team. With a team-based approach and dedication they meet any challenge with a smile. As a general construction based company, we must be responsible for the client's interests and be driven to detail on their behalf. As a relationship-based company, we promote communication and are dedicated to long-term client and team commitments.

Corporate Name: One Call Florida, Inc.

Corporate Address: 6650 W. Indiantown Road, Suite 230-23, Jupiter, FL 33458

Authorized Personal

Name:	Brent Martin	Name:	Robert Ambrosius
Title:	President of Construction	Title:	Owner
Address:	6650 W. Indiantown Road, Suite 230-23, Jupiter, FL 33458	Address:	6650 W. Indiantown Road, Suite 230-23, Jupiter, FL 33458
Email:	brent@onecallflorida.com	Email:	Robert@onecallflorida.com
Telephone:	772-324-1146	Telephone:	772-223-8400

6650 W. Indiantown Road, Suite 230-23, Jupiter, FL 33458

(561)-692-6277 | www.onecallflorida.com

CGC1519002 | MRSR1701 | CCC1327836 | CFC1429700 | EC13001239 | CAC057582



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
OFFICE OF DIVERSITY IN BUSINESS PRACTICES

Participation Letter of Intent

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

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

BID/RFP or Project Name 19C-24T - Cabling Contractor Services

Name of Bidder/Construction Manager One Call Florida, Inc.

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

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

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

- Subcontractor Subconsultant Manufacturer Supplier

One Call Florida, Inc. will self perform as an SBE Contractor.

- The undersigned is: Certified with the School District of Palm Beach County as a M/WBE Vendor.
 Certified with the School District of Palm Beach County as a SBE Vendor.
 Certified with the State of Florida, Department of General Services (Provisional).

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

Column 1

- African American Native American
 Asian American American
 Hispanic American

Column 2

- Female Male

Column 3

- Physically Impaired

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

Item No.	Division No.	Contract (Trade) Items (Description/Division)	Amount
1	26	All Work Per Plans and Specifications, 100% SBE self performed by One Call Florida, Inc.	N/A

If the undersigned intends to sub-contract any portion of this subcontract to a non-certified M/WBE or SBE subcontractor, the amount of any such subcontract must be stated: \$ _____ 0 / N/A

Name of M/WBE or SBE Subcontracting Firm One Call Florida, Inc. (Prime)

Name and Position (type or print) Brent Martin / President of Construction

INTERNAL USE ONLY - ROUTING DISPOSITION
All executed originals of the form must be submitted to the Office of Diversity in Business Practices
3300 Summit Blvd., West Palm Beach, FL 33406-5813

[Signature]
Signature _____ **Date** 3/29/19

The Prime vendor understands and agrees to inform the Office of Diversity in Business Practices (ODBP) of any changes to the information contained in this form within five (5) business days.

STATE OF FLORIDA)
) SS
COUNTY OF Martin)

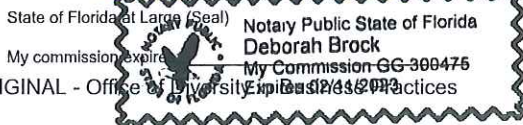
BEFORE ME, the undersigned authority, personally appeared Brent Martin who, being first duly sworn, on oath deposes and says that the information provided on PBS D 1525 Participation Letter of Intent is true and correct and that he or she has read the information provided on PBS D 1525 Participation Letter of Intent and knows the contents thereof.

Brent Martin
AFFIANT

The foregoing instrument was acknowledged before me this 29 day of March, 2019, by Brent Martin

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

NOTARY PUBLIC: Signature: [Signature] Print Name: Deborah Brock



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
PURCHASING DEPARTMENT

Supplier Information

Solicitation 19C-24T

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

For questions on this form, please contact DENNIS MESSERLI at

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

ORDER TO:

Business Name **One Call Florida, Inc.**

Business Name, if different than above

Street Address **6650 W Indiantown Road**

City **Jupiter** State **FL** Zip Code **33458**

Company Email Address for Electronic Purchase Orders **brent@onecallflorida.com**

Fax Number **772-409-8620**

Taxpayer ID Number **20-3566260**

Contact Name **Brent Martin**

Phone **772-223-8400** Ext.

REMIT PAYMENT TO:

Same as above

Business Name

Street Address

City State Zip Code

COMPLETED BY Brent Martin

Title **President of Construction**

Date **3/29/19**

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

Supplier Information for Divisions or Subsidiary Companies

Check here if this section does not apply

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

Parent Company Name

ORDER TO: One Call Florida, Inc.

Taxpayer ID Number **20-3566260**

Division/Subsidiary Name **One Call Florida, Inc.**

Street Address **6650 W Indiantown Road**

City **Jupiter** State **FL** Zip Code **33458**

Company Email Address for Electronic Purchase Orders **brent@onecallflorida.com**

Fax Number

Contact Name **Brent Martin**

Phone **772-223-8400** Ext.

REMIT PAYMENT TO:

Same as above

Division/Subsidiary Name

Street Address

City State Zip Code

COMPLETED BY **Brent Martin**

Title **President of Construction**

Date **3/29/19**

W-9

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

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific
Instructions on
page 2.

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

One Call Property Services, Inc.

Business name/disregarded entity name, if different from above

One Call Florida, Inc.

Check appropriate box for federal tax classification:

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

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)

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

Other (see instructions)

Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from FATCA reporting code (if any)
(Applies to accounts maintained outside the U.S.)

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

6650 W Indiantown Rd

Requester's name and address (optional)

School District of Palm Beach County

City, state, and ZIP code

Jupiter, FL 33458

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

20-3566260

Employer identification number

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

Part II Certification

Under penalties of perjury, I certify that:

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

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here

Signature of
U.S. person

Tammy Ambrosius

Date **3/29/19**

General Instructions

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

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

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

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

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.*

By signing the filled-out form, you:

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

Purpose of

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

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)





