Solicitation No: 20240047

#### **Project Management Plan (PMP)**

#### Replace Emergency Generator at Building B - City of Port St. Lucie

#### Phase 1

Upon award of the contract the Contractor will immediately begin work on the project. Initial work will include Submittals of electrical commodities, procurement planning of site work, coordination with the City, Electrical Power Utility as well as the Owners representative Project Manager to interface with the generator manufacturer, equipment suppliers to provide shop drawings, cut sheets and submittals, for the Owner Supplied Equipment. Crew scheduling and general mobilization anticipated April 1 – April 30.

#### Phase 2

On or about May 1 the Contractor will be on site to begin installation of the temporary generator and Branch Circuits installed to the two (2) existing ATS LS-OP

A Shutdown will be coordinated and scheduled with Owners Representative, the existing generator ATS feeders will be phase orientation tested and disconnected, the temporary feeders will be terminated phase orientation tested and the standby generator will be placed in service.

Once the temporary generator is operational the Contractor will remove the fuel and begin removal and demolition of the existing equipment. Phase 2 will also include the demolition and disposal of the existing concrete slab, noted equipment for disposal of generator and ancillary equipment as identified in the contract documents.

#### Phase 3

Beginning June 1 or about the Contractor will install the associated underground electrical power and controls conduits, working in conjunction with the new equipment pads and generator, foundation Extension of the generator CMU walls will be performed during this phase, basis for design per Addendum 1 Dwg. S-3

The Completion of the civil work, equipment Pads and Generator foundation is critical to receiving the Owner supplied Generator, fuel cell, stairs and associated ATS (2), electrical equipment panels and setting upon receipt will negate the cost of three mobilizations for Rigging sub-contractor.

#### Phase 4

July 1, 2024, the Contractor will receive rig, set, and assemble the Owner supplied Generator, fuel cell, and maintenance platforms in conjunction with Kohler Power Systems. This phase will also include installation of Power and Control Equipment as identified in electrical one-line Dwg. E-7. The conduit system will be cleaned conductors installed as per the Contract drawings, terminated, and tested.

#### Phase 5

This phase will include start up and testing and commissioning of new equipment. A Shutdown will be coordinated and scheduled with Owners Representative, the existing ATS will be removed from service the temporary feeders will be removed, the standby generator will be removed. Remedial work concluded.



Solicitation No: 20240047

#### Crew(s) will include:

Master Electrician – Project Manager. 1 ea. Concrete Foreman

1 ea. Electrician – Foreman

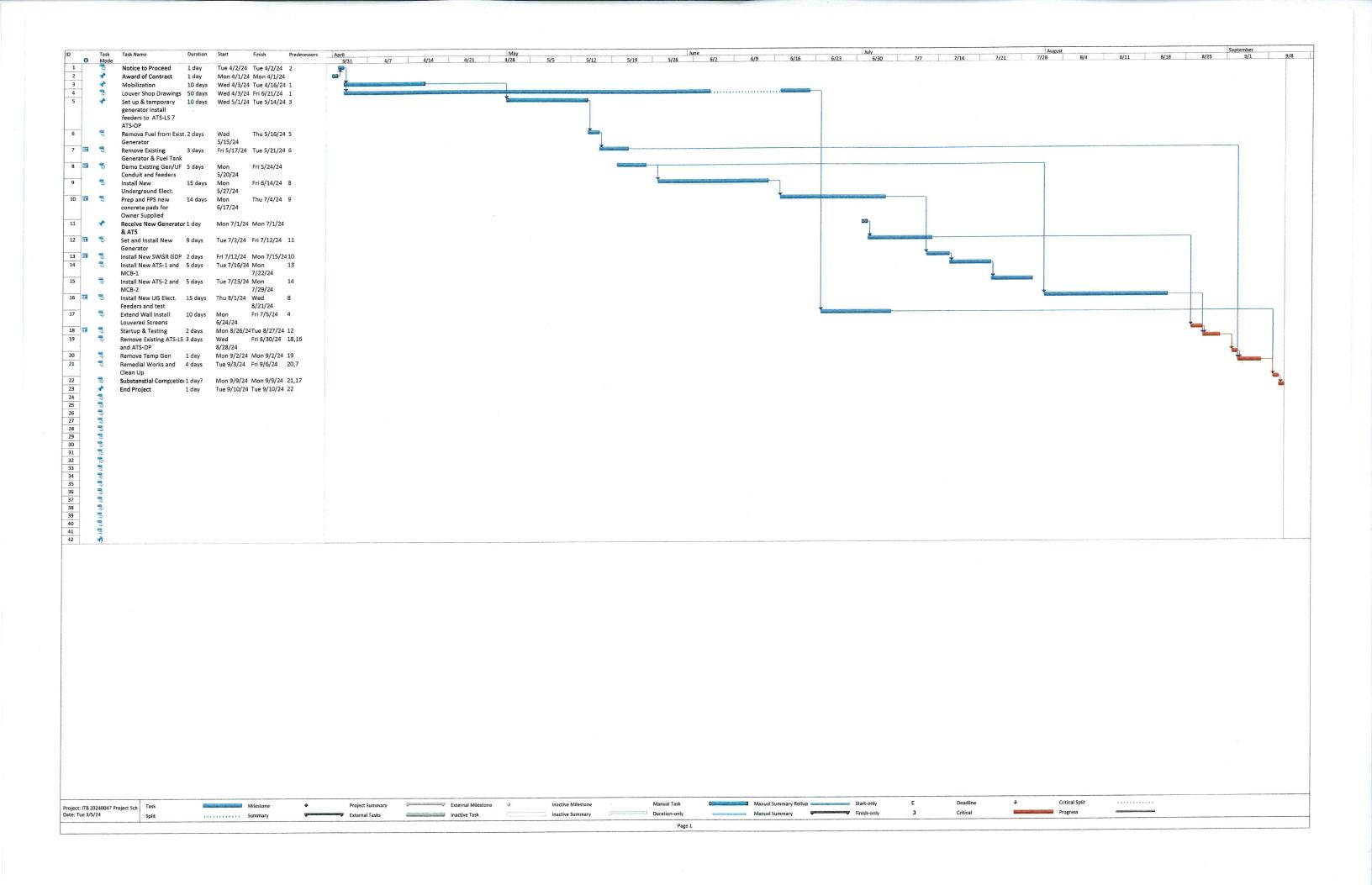
1 ea. Skilled Laborer

1 ea. Electrician – Journeyman

1 ea. Concrete Finisher

Electrical Crew as show is base, the manpower will fluctuate with the work being performed





### Addendum #3 E-Bid #20240047 "Revised"Attachment C E-Bid Reply Form

## Replacement of Emergency Generator at Bldg. B

**Price** 

Supply and Install City owned generator and all related equipment including all MEP connections and equipment required for complete installation in accordance with provided drawings and specifications.

Provide Guaranteed Completion Date including all permits signed off on and 100% operational system.

1) Guaranteed Completion Date:	9/30/24	
2) Total Project Bid Price: \$948,9	00.00	
Offer's Full Legal Name as listed on W-9: _ Printed Name & Title of Person/Signing:	GLF Construction Corporation  (Francesco Senis, President & CEO	
Authorized Signature:	' eun Date: _3	3/5/24

NOTE: In accordance with Section 5-PRICING, a breakdown can be provided upon request.

## **Document A310<sup>™</sup> – 2010**

Conforms with The American Institute of Architects AIA Document 310

#### **Bid Bond**

CONTRACTOR:

(Name, legal status and address) **GLF Construction Corporation** 

1 SE 3rd Avenue, Suite 1600 Miami, FL 33131

OWNER:

(Name, legal status and address) City of Port St. Lucie 121 SW Port St. Lucie Boulevard Port St. Lucie, FL 34984-5099

SURETY:

(Name, legal status and principal place of business) United States Fire Insurance Company 305 Madison Avenue Morristown, NJ 07960 **Mailing Address for Notices** 

305 Madison Avenue Morristown, NJ 07960 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.

BOND AMOUNT: \$ Five Percent Of The Total Amount Bid (5%)

PROJECT:

(Name, location or address, and Project number, if any) 20240047 - Replacement of Emergency Generator at Building B

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

Signed and scaled this 5th

(Witness) William Drayton

day of March, 2024

(Witness)

Pasquale Giustino, CFO

GLF Construction Corporation

(Principal)

Francesco Senis,

President/CEO

United States Fire Insurance Company

(Seal)

Stravato, Attorney-in-Fact

#### ACKNOWLEDGEMENT OF CONTRACTOR - IF A CORPORATION

STATE OF	FLORIDA									
COUNTY OF _	MIAMI-DADE									
ON THE 5th DA	AY OF March, 2024 BEFORE ME	PERSONAL	LY APF	PEARED_	Fr	ances	sco S	enis		TO
BE KNOWN,	WHO, BEING BY ME DULY	SWORN,	DID D	DEPOSE	AND	SAY;	THAT	<b>∕</b> €}HE	IS	THE
Presiden	t & CFO OF GLF Cons	truction Cor	poration	THE CO	RPORA	ATION	THAT	EXECU.	TED	THE
FOREGOING I	INSTRUMENT, AND ACKNOWL	EDGED TO	ME TH	HAT SUC	H COF	RPORA	TION	EXECUT	ΓED	THE
	WHEREOF, I HAVE HEREUNTO				FIXED	MY O	FFICIA	L SEAL	., AT	MY
OFFICE IN THE	E ABOVE COUNTY, THE DAY AN	ID YEAR WI	RIITEN	ABOVE.						
• • •	THELMA E. GARCIA Notary Public - State of Florida	J	ho	lmo	6 .,	He	e	v		

#### **ACKNOWLEDGEMENT OF SURETY COMPANY**

My Comm. Expires Dec 19, 2025

Bonded through National Notary Assn.

STATE OF New Jersey

COUNTY OF Morris

ON THE 5th DAY OF March, 2024 BEFORE ME PERSONALLY APPEARED Krystal L. Stravato TO ME KNOWN, WHO BEING BY ME DULY SWORN, DID DEPOSE AND SAY; THAT (S)HE IS THE ATTORNEY-IN-FACT OF United States Fire Insurance Company, THE CORPORATION THAT EXECUTED THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO ME THAT SUCH CORPORATION EXECUTED THE SAME.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY OFFICIAL SEAL, AT MY OFFICE IN THE ABOVE COUNTY, THE DAY AND YEAR WRITTEN ABOVE.

Notary Public

Notary Public

Ursula Jakubiak A Notary Public of New Jersey My Commission Expires March 8, 2026

akulan

#### POWER OF ATTORNEY UNITED STATES FIRE INSURANCE COMPANY PRINCIPAL OFFICE - MORRISTOWN, NEW JERSEY

06446

KNOW ALL MEN BY THESE PRESENTS: That United States Fire Insurance Company, a corporation duly organized and existing under the laws of the state of Delaware, has made, constituted and appointed, and does hereby make, constitute and appoint:

Krystal L. Stravato, Kevin T. Walsh, Jr., Thomas MacDonald, Edward Reilly, Marisol Mojica, Jaclyn Thomas

each, its true and lawful Attorney(s)-In-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver: Any and all bonds and undertakings of surety and other documents that the ordinary course of surety business may require, and to bind United States Fire Insurance Company thereby as fully and to the same extent as if such bonds or undertakings had been duly executed and acknowledged by the regularly elected officers of United States Fire Insurance Company at its principal office, in amounts or penalties: Unlimited

This Power of Attorney limits the act of those named therein to the bonds and undertakings specifically named therein, and they have no authority to bind United States Fire Insurance Company except in the manner and to the extent therein stated.

This Power of Attorney is granted pursuant to Article IV of the By-Laws of United States Fire Insurance Company as now in full force and effect, and consistent with Article III thereof, which Articles provide, in pertinent part:

Article IV, Execution of Instruments - Except as the Board of Directors may authorize by resolution, the Chairman of the Board, President, any Vice-President, any Assistant Vice President, the Secretary, or any Assistant Secretary shall have power on behalf of the Corporation:

- (a) to execute, affix the corporate seal manually or by facsimile to, acknowledge, verify and deliver any contracts, obligations, instruments and documents whatsoever in connection with its business including, without limiting the foregoing, any bonds, guarantees, undertakings, recognizances, powers of attorney or revocations of any powers of attorney, stipulations, policies of insurance, deeds, leases, mortgages, releases, satisfactions and agency agreements;
- (b) to appoint, in writing, one or more persons for any or all of the purposes mentioned in the preceding paragraph (a), including affixing the seal of the Corporation.

Article III, Officers, Section 3.11, Facsimile Signatures. The signature of any officer authorized by the Corporation to sign any bonds, guarantees, undertakings, recognizances, stipulations, powers of attorney or revocations of any powers of attorney and policies of insurance issued by the Corporation may be printed, facsimile, lithographed or otherwise produced. In addition, if and as authorized by the Board of Directors, dividend warrants or checks, or other numerous instruments similar to one another in form, may be signed by the facsimile signature or signatures, lithographed or otherwise produced, of such officer or officers of the Corporation as from time to time may be authorized to sign such instruments on behalf of the Corporation. The Corporation may continue to use for the purposes herein stated the facsimile signature of any person or persons who shall have been such officer or officers of the Corporation, notwithstanding the fact that he may have ceased to be such at the time when such instruments shall be issued.

IN WITNESS WHEREOF, United States Fire Insurance Company has caused these presents to be signed and attested by its appropriate officer and its corporate seal hereunto affixed this 28th day of September, 2021.

UNITED STATES FIRE INSURANCE COMPANY



Matthew E. Lubin, President State of New Jersey} County of Morris }

On this 28th day of September, 2021, before me, a Notary public of the State of New Jersey, came the above named officer of United States Fire Insurance Company, to me personally known to be the individual and officer described herein, and acknowledged that he executed the foregoing instrument and affixed the seal of United States Fire Insurance Company thereto by the authority of his office.

MELISSA H. D'ALESSIO NOTARY PUBLIC OF NEW JERSE Commission # 50125833 My Commission Expires 4772025

Melissa & D'dassio Melissa H. D'Alessio (Notary Public)

I, the undersigned officer of United States Fire Insurance Company, a Delaware corporation, do hereby certify that the original Power of Attorney of which the foregoing is a full, true and correct copy is still in force and effect and has not been revoked.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of United States Fire Insurance Company on the day of March 2024

UNITED STATES FIRE INSURANCE COMPANY



Michael C. Fay, Senior Vice President

## UNITED STATES FIRE INSURANCE COMPANY 1209 ORANGE STREET, WILMINGTON, DELAWARE 19801

#### STATEMENT OF ASSETS, LIABILITIES, SURPLUS AND OTHER FUNDS

AT DECEMBER 31, 2022

ASSETS	
Bonds (Amortized Value)	1,905,252,232
Preferred Stocks (Market Value)	114,529,067
Common Stocks (Market Value)	1,762,084,603
Mortgage Loans (Market Value)	796,032,009
Cash, Cash Equivalents, and Short Term Investments	626,020,353
Derivatives	10,695,142
Other Invested Assets	337,125,033
Investment Income Due and Accrued	19,572,352
Premiums and Considerations.	340,327,513
Amounts Recoverable from Reinsurers.	
Funds Held by or Deposited with Reinsured Companies	61,688,599
Net Deferred Tax Asset.	70,688,033
Electronic Data Processing Equipment.	140,619,760
Receivables from Parent, Subsidiaries and Affiliates.	1,507,891
Other Assets	158,857,542
Other Assets.	145,928,507
TOTAL ASSETS§	6,490,928,636
LIABILITIES, SURPLUS & OTHER FUNDS	
EMBERTES, GORT EGS & OTHER PORDS	
Losses (Reported Losses Net of Reinsurance Ceded and Incurred	
But Not Reported Losses)	0.010.006.050
Reinsurance Payable on Paid Losses and Loss Adjustment Expenses.	2,212,036,852
Loss Adjustment Expenses.	68,359,436
Commissions Payable Continuent Commissions of Other St. 11. Other	374,380,070
Commissions Payable, Contingent Commissions and Other Similar Charges	10,899,929
Other Expenses (Excluding Taxes, Licenses and Fees)	95,863,911
Taxes, Licenses and Fees (Excluding Federal Income Taxes)	30,559,093
Current Federal and Foreign Income Taxes. Unearned Premiums	197,142,687
Unearned Premiums	
	999,534,655
Advance Premium	999,534,655 12,896,716
Advance Premium	
Advance Premium	12,896,716
Advance Premium Ceded Reinsurance Premiums Payable Funds Held by Company under Reinsurance Treaties Amounts Withheld by Company for Account of Others.	12,896,716 99,545,135
Advance Premium  Ceded Reinsurance Premiums Payable  Funds Held by Company under Reinsurance Treaties  Amounts Withheld by Company for Account of Others  Provision for Reinsurance	12,896,716 99,545,135 42,360,469
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.  TOTAL LIABILITIES.  S	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.  TOTAL LIABILITIES.  S	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186 4,445,110,813
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.  TOTAL LIABILITIES.  S  Common Capital Stock.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186 4,445,110,813
Advance Premium. Ceded Reinsurance Premiums Payable. Funds Held by Company under Reinsurance Treaties. Amounts Withheld by Company for Account of Others. Provision for Reinsurance. Payable to Parent, Subsidiaries and Affiliates. Other Liabilities.  TOTAL LIABILITIES.  S  Common Capital Stock. Gross Paid In and Contributed Surplus.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186 4,445,110,813 18,780,000 1,502,074,940
Advance Premium. Ceded Reinsurance Premiums Payable. Funds Held by Company under Reinsurance Treaties. Amounts Withheld by Company for Account of Others. Provision for Reinsurance. Payable to Parent, Subsidiaries and Affiliates. Other Liabilities.  TOTAL LIABILITIES.  S  Common Capital Stock. Gross Paid In and Contributed Surplus. Unassigned Funds (Surplus).	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186 4,445,110,813 18,780,000 1,502,074,940 524,962,883
Advance Premium.  Ceded Reinsurance Premiums Payable.  Funds Held by Company under Reinsurance Treaties.  Amounts Withheld by Company for Account of Others.  Provision for Reinsurance.  Payable to Parent, Subsidiaries and Affiliates.  Other Liabilities.	12,896,716 99,545,135 42,360,469 133,940,889 2,638,135 91,545,650 73,407,186 4,445,110,813 18,780,000 1,502,074,940

I, Carmine Scaglione, Senior Vice President and Controller of UNITED STATES FIRE INSURANCE COMPANY, certify that the foregoing is a fair statement of Assets, Liabilities, Surplus and Other Funds of this Company, at the close of business, December 31, 2022, as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of Delaware.

IN TESTIMONY WHEREOF, I have set my hand and affixed the seal of the Company, this 23rd day of March, 2023. UNITED STATES FIRE INSURANCE COMPANY

Ron DeSantis, Governor

Melanie S. Griffin, 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

## SENIS, FRANCESCO

GLF CONSTRUCTION CORPORATION

1 SE 3RD AVENUE

SUITE 1600

MIAMI

FL 33131

**LICENSE NUMBER: CGC059669** 

**EXPIRATION DATE: AUGUST 31, 2024** 

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# STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

#### **ELECTRICAL CONTRACTORS' LICENSING BOARD**

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

Additional Business Qualification

## NIENABER, THOMAS FRANCIS

GLF CONSTRUCTION CORPORATION

1 SE 3RD AVENUE

SUITE 1600

MIAMI FL 33131

LICENSE NUMBER: EC13005362

**EXPIRATION DATE: AUGUST 31, 2024** 

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#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/29/2024

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	CONTACT AG FL Insurance Team				
American Global LLC 900 S Pine Island Road	PHONE (A/C, No, Ext): (305) 351-9150 FAX (A/C, No):				
Suite 210	E-MAIL ADDRESS: certsFL@americanglobal.com				
lantation, FL 33324	INSURER(S) AFFORDING COVERAGE	NAIC #			
	INSURER A : Executive Risk Indemnity Inc.	35181			
INSURED	INSURER B : Federal Insurance Company	20281			
GLF Construction Corp. 1 SE 3rd Avenue	INSURER C:				
Suite 1600	INSURER D :				
Miami, FL 33131	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.

		DSIONS AND CONDITIONS OF SUCH						•		
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBF	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs	
Α	X	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	2,000,000
		CLAIMS-MADE X OCCUR	Х	X	54326392-02	12/31/2023	12/31/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
					ä		4	MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	2,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	4,000,000
		POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$	4,000,000
		OTHER:							\$	
В	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO	Х	Х	54326391	12/31/2023	12/31/2024	BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
		HIRED AUTOS ONLY NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
									\$	
В		UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	5,000,000
	X	EXCESS LIAB CLAIMS-MADE	X	X	5671-7347	12/31/2023	12/31/2024	AGGREGATE	\$	5,000,000
		DED RETENTION\$							\$	
В	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH-		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE 7.1	N/A	X	54326393	12/31/2023	12/31/2024	E.L. EACH ACCIDENT	\$	1,000,000
		datory in NH)	11/7					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DES(	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
		92								
										~

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) RE: Replacement of Emergency Generator at Building B

City of Port St. Lucie, a municipality of the State of Florida, its officers, employees, agents, and Contract #20240047 – Replacement of Emergency Generator at Building B are included as Additional Insured in accordance with the policy provisions of the General Liability, Auto Liability, and Umbrella Liability Policies. General Liability and Auto Liability Policies evidenced herein are Primary Noncontributory to other insurance available to the Additional Insureds, but only in accordance with the Policy Provisions. A Waiver of Subrogation is granted in favor of the Additional Insureds in accordance with the policy provisions of the General Liability, Auto Liability, Umbrella Liability and Worker's Compensation Policies and if permissible by law. There are no exclusions for explosion, collapse & underground (XCU) in accordance with the policy provisions of the General Liability Policy. Contractual Liability applies to the General Liability Policy in accordance with the policy provisions. Notice of cancellation subject to the terms and conditions of the Policies.

CERTIFICATE HOLDER	CANCELLATION
City of Port St. Lucie 121 S.W. Port St. Lucie Blvd Port Saint Lucie, FL 34984	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
1 311 Suint Euslis, 1 E 54554	AUTHORIZED REPRESENTATIVE
	American Global LSC

CERTIFICATE USI DEF

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
WHERE REQUIRED BY WRITTEN CONTRACT	ALL LOCATIONS WHERE REQUIRED BY WRITTEN CONTRACT
Information required to complete this Schedule, if not s	nown above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
  - 1. Your acts or omissions; or
  - The acts or omissions of those acting on your behalf:

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

#### However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:
  - If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:
  - 1. Required by the contract or agreement; or

Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

#### **SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
WHERE REQUIRED BY A WRITTEN CONTRACT THAT SPECIFIES COVERAGE FOR COMPLETED OPERATIONS IN THE COVERAGE PERIOD	ALL LOCATIONS WHERE REQUIRED BY WRITTEN CONTRACT
Information required to complete this Schedule, if not sho	own above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

#### However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## DESIGNATED CONSTRUCTION PROJECT(S) GENERAL AGGREGATE LIMIT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **SCHEDULE**

#### **Designated Construction Project(s):**

ALL OF YOUR DESIGNATED CONSTRUCTION PROJECTS WHERE REQUIRED BY CONTRACT

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I Coverage A, and for all medical expenses caused by accidents under Section I Coverage C, which can be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:
  - A separate Designated Construction Project General Aggregate Limit applies to each designated construction project, and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.
  - 2. The Designated Construction Project General Aggregate Limit is the most we will pay for the sum of all damages under Coverage A, except damages because of "bodily injury" or "property damage" included in the "productscompleted operations hazard", and for medical expenses under Coverage C regardless of the number of:
    - a. Insureds;
    - b. Claims made or "suits" brought; or
    - c. Persons or organizations making claims or bringing "suits".

- 3. Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the Designated Construction Project General Aggregate Limit for that designated construction project. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Designated Construction Project General Aggregate Limit for any other designated construction project shown in the Schedule above.
- 4. The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expense continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Designated Construction Project General Aggregate Limit.

- B. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I Coverage A, and for all medical expenses caused by accidents under Section I Coverage C, which cannot be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:
  - Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products-completed Operations Aggregate Limit, whichever is applicable; and
  - Such payments shall not reduce any Designated Construction Project General Aggregate Limit.
- C. When coverage for liability arising out of the "products-completed operations hazard" is provided, any payments for damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard" will reduce the Products-completed Operations Aggregate Limit, and not reduce the General Aggregate Limit nor the Designated Construction Project General Aggregate Limit.
- D. If the applicable designated construction project has been abandoned, delayed, or abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the project will still be deemed to be the same construction project.
- **E.** The provisions of Section III Limits Of Insurance not otherwise modified by this endorsement shall continue to apply as stipulated.

#### E-Bid #20240047 - Attachment E

## CONTRACTOR'S GENERAL INFORMATION WORKSHEET / QUESTIONNAIRE

It is understood and agreed that the following information is to be used by the City to determine the qualifications of prospective Contractor to perform the work required. The Contractor waives any claim against the City that might arise with respect to any decision concerning the qualifications of the Contractor.

The undersigned attests to the truth and accuracy of all statements made on this questionnaire. Also, the undersigned hereby authorizes any public official, Engineer, Surety, bank, material or equipment manufacturer, or distributor, or any person, firm or corporation to furnish the City any pertinent information requested by the City deemed necessary to verify the information on this questionnaire.

Dated at Miami, Florida 33131 , this 5th day of March, 2024 (Location)
Name of Organization/Contractor: GLF Construction Corporation
By: Francesco Senis, President/CEO  Name and Title
1. Corporation, Partnership, Joint Venture, Individual or other? Corporation
2. Firm's name and main office address, telephone and fax numbers
Name: GLF Construction Corporation
Address: 1 SE 3rd Avenue Suite 1600 Miami, Florida 33131
Telephone Number: 305-371-5228
Fax Number: 305-371-9201
3. Contact person: Ms. Thelma Garcia Assist. V.P. Email: TEGarcia@glfusa.com
4. Firm's previous names (if any). N/A
5. How many years has your organization been in business?31
6. List the license(s) that qualifies your firm to construct this project:
Florida CGC #059669 Mr Francesco Senis / Florida EC13005263 Mr. Thomas Nienaber

#### E-Bid #20240047 - Attachment E

7. **ADDENDUM ACKNOWLEDGMENT** - Bidder acknowledges that the following addenda have been received and are included in its proposal/bid:

Addendum Number	Date Issued	Addendum Number	Date Issued
1	02-21-2024		
2	03-01-2024		
3	03-04/2024		

8,	The Contractor will comply with all applicable federal and state laws and regulations, to include 2 C.F.R. 200.318 through 200.326 as well as Appendix II to 2 C.F.R. Part 200 entitled "Contract Provisions for Non-Federal Entity Contracts Under Federal Awards.
	Yes X No
9.	List five (5) emergency/regular generator replacement/new installations 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.
	Project Number 1
	Project Name: Charlotte County Backup Generator Installation Port Charlotte, Florida
	Description & Size: Installation of 100kw 277/480V backup generator, Automatic
	Transfer Switch, structural slab associated conduits, wiring and underground services
	at a Charlotte County pump station #028, Elect. & Structural design and permitting.
	Location: Port Charlotte, Florida Bryan Hatfield PMP 941-769-4054
	Client Name, Phone Number & Email: Bryan.Hatfield@charlottecountyfl.gov
	Value of Total Contract: \$48,650.00
	Date of Completion: September 2023
	Firm's Percentage of Total Contract: 100%
	Number of Change Orders: 1 EA. No cost change - time extension due to equipment delivery
	Value of Change Orders: \$0.00
	Was Project Completed on Schedule: Yes
	Was Project Completed within Budget? Yes
	Duning A Number 2
	Project Number 2 Project Name: FDOT D-6 SW 1st Bascule Bridge Replacement Miami, Florida
	Description: Procurement, shop drawings for installation of complete electrical system for SW
	1st Street Bascule Bridge in Miami. Total electrical work \$2.3M including 2 backup generators
	and 2 ATS systems (350kw & 60kw), MCC, MTS, fuel tanks, M&E complete exhaust systems
	Location: SW 1st Street & Miami River Miami, Florida
	Client Name, Phone Number & Email: Mr. Al Banz, PE Pinnacle Consultants CEI
	Value of Total Contract: Project \$73.4M Electrical \$2.3M
	rate of Total Contract. Floject \$75.4W Electrical \$2.5W

E-Bid #20240047 - Attachment E	
Date of Completion: December 2021	
Firm's Percentage of Total Contract: 75%	
Number of Change Orders: 49	
Value of Change Orders: \$10,416,557.50	
Was Project Completed on Schedule: Yes	
Was Project Completed within Budget? Yes	_
Project Number 3	
Project Name: Gasparilla Island Causeway Swing Bridge Replacement - Electrical	
Description & Size: Procurement and installation of complete electrical system for Gasparilla	i
swing bridge. Total electrical installations \$2.1M including 150kw backup generator & ATS sys	_ stem
fuel tanks and M&E, exhaust systems, 300kw temporary generator, conduits & underground. Te	— sting
Location: Gasparilla Island Causeway Pineda, Florida (Gasparilla Island Bridge Authority G	ĪBA)
Client Name, Phone Number & Email: GIBA Ms. Kathy Banson-Verrico Director 941-697-	2271
Value of Total Contract: \$18,7M kathy@giba.us \$2.1M Electrical	_
Date of Completion: May 2016	_
Firm's Percentage of Total Contract: 80%	
Number of Change Orders: 52 (most CO's were Owner direct purchases ODP reductions to	– contrac
Value of Change Orders: (-\$5,090,764 ODP reduced the contract amount)	_
Was Project Completed on Schedule: Yes (contract completed early)	_
Was Project Completed within Budget? Yes	_
Duning the Number of	_
Project Number 4  Project Name: Capital Cascades Connector Bridge - Electrical	-
2 2100011001	_
Description & Size: Construction of pedestrian bridge, electrical service, conduit, conductors, lighting, solar panels, inverters, aesthetic lighting	_
Cost of electrical work \$640,000.00	_
Location: Tallahasse, Florida	-
Client Name, Phone Number & Email: Blueprint Intergovernmental Agency Tallaha	-
	-
Daniel Sheer@hluenrintIA org	-
Date of Completion: September 2016	-
Firm's Percentage of Total Contract: 90%	-
Number of Change Orders: 6	-
Value of Change Orders: \$410,792.69	-
Was Project Completed on Schedule: Yes	-
Was Project Completed within Budget? Yes	-
Project Number 5	_
Project Name: Ocean Avenue Bridge - Lantana Florida	_
Description & Size: Complete Replacement of Ocean Avenue Bascule Bridge	_

E-Bid #20240047 - Attachment E Complete electrical installation of new system	
wiring, conduits, MCC, ATS, backup generator, lighting and power and con	trols.
Incuding MEP and fuel tank, exhaust system. Cost of electrical approximate	ely \$1.6M.
Location: County of West Palm Beach, Lantana Florida	
Client Name, Phone Number & Email: WPB Public Works David Ricks Dir.	561-355-2006
Value of Total Contract: \$30,664,623.00	
Date of Completion: January 2014	
Firm's Percentage of Total Contract: 70%	
Number of Change Orders: 8	
Value of Change Orders: \$1,249,067.00	
Was Project Completed on Schedule: Yes	
Was Project Completed within Budget? Yes	
sheets if necessary. All subcontractors listed must complete a "Certification Re and is to be included in the bid package. Attach all licenses and certification perform the work.  To be determined	
	-
	· · · · · · · · · · · · · · · · · · ·
Provide a Project Management Plan & Proposed Schedule for this project. T requirement to show how the contractor can meet the required completion da 2024. See attached PMP and Microsoft Project Schedule.  Has the Contractor or any principals of the applicant organization failed to Contractor; refused to enter into a contract after an award has been made; failed to the past five (5) years or been declared to be in default in any contract or been ass in the last five (5) years? List the name of project, location, client, engineer, date a pages if needed.	qualify as a respo
requirement to show how the contractor can meet the required completion da 2024. See attached PMP and Microsoft Project Schedule.  Has the Contractor or any principals of the applicant organization failed to Contractor; refused to enter into a contract after an award has been made; failed to the past five (5) years or been declared to be in default in any contract or been ass in the last five (5) years? List the name of project, location, client, engineer, date as	qualify as a respo
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requirement to show how the contractor can meet the required completion da 2024. See attached PMP and Microsoft Project Schedule.  Has the Contractor or any principals of the applicant organization failed to Contractor; refused to enter into a contract after an award has been made; failed to the past five (5) years or been declared to be in default in any contract or been ass in the last five (5) years? List the name of project, location, client, engineer, date a pages if needed.  Total Number of Projects where Failure to Complete Work Occurred:  None  Project Number 1	qualify as a respondent of the complete a contract consisted liquidated darks
requirement to show how the contractor can meet the required completion da 2024. See attached PMP and Microsoft Project Schedule.  Has the Contractor or any principals of the applicant organization failed to Contractor; refused to enter into a contract after an award has been made; failed to the past five (5) years or been declared to be in default in any contract or been ass in the last five (5) years? List the name of project, location, client, engineer, date a pages if needed.  Total Number of Projects where Failure to Complete Work Occurred:  Project Number 1  Project Name:	qualify as a respondent of the complete a contract consisted liquidated darks
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requirement to show how the contractor can meet the required completion da 2024. See attached PMP and Microsoft Project Schedule.  Has the Contractor or any principals of the applicant organization failed to Contractor; refused to enter into a contract after an award has been made; failed to Contract five (5) years or been declared to be in default in any contract or been ass in the last five (5) years? List the name of project, location, client, engineer, date a pages if needed.  Total Number of Projects where Failure to Complete Work Occurred:  Project Number 1  Project Name:  Project Location:  Client Name and Phone Number:	qualify as a respo

E-Bid #20240047 - Attachment E Insert additional projects if need	led.	
Has the Contractor or any of its Chapter 11 or put into receivers	hip?	been declared bankrupt or reorganized under
If yes, please explain:	Yes ( )	No (x)
List any lawsuits pending or con	npleted within t	the past five (5) years involving the corporation,
partnership or individuals with n None	nore than ten pe	ercent (10 %) interest:
(N/A is not an acceptable answer	- insert lines it	f needed)
List any judgments from lawsuits None	s in the last five	e (5) years:
(N/A is not an acceptable answer	- insert lines if	needed)
List any criminal violations and/o	or convictions o	of the Proposer and/or any of its principals:
(N/A is r ) an acceptable answer	- insert lines if	needed)
tancesso ( lus		President & CEO
Signature		Title

#### 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 <a href="mailto:rholder@cityofpsl.com">rholder@cityofpsl.com</a>, or by phone 772-281-9284. 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 <u>DemandStar's Website</u> for retrieval. All notice of intent to award documentation will be published on the <u>City Clerk's Website</u>. 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 for the Cone Of Silence.

Typed Name	Franceso	o Senis
Signed:	rancesso l	lus
Company and		GLF Construction Corp. Pres./CEO
Date:03/0	02/2024	

## CITY OF PORT ST. LUCIE, FLORIDA PROJECT TITLE: Replacement of the Emergency Generator at Building B

#### TRENCH SAFETY ACT COMPLIANCE STATEMENT

Project Name: 121 SW Port St. Lucie Blvd.

Nine hundred forty eight thousand

Project Location: City of Port St. Lucie, State of Florida

#### **Instructions:**

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:

	nine hundred and 00/100.	_ Dollars		\$948,900	0.00
		(Written)			(Figures)
3.	The amount listed above	e has been i	ncluded within the B	ase Bid.	
	Certified:		Corporation		
	By: tavesso	( lus	Contractor)		
	Francesco Senis	(President's (President's	Signature) Typed or Printed Na	ıme)	1
Swori day o	n to and subscribed before f March 5th . 202	ore me in 24 _·	Miami-Dade	Pmaxe	County, Florida on the
			NOTARY	Notary F	HELMA E. GARCIA Public - State of Florida hission # HH 168494
			OF.	My Comm	h. Expires Dec 19, 2025 h National Notary Assn.

#### **NON-COLLUSION AFFIDAVIT**

State of	FLORIDA	_		
County o	fMIAMI-DADE	_}		
	Francesco Senis	, being first duly sworn, disposes and says that:		
1. T		GLF Construction Corp. the Proposer that		
	(Title)	(Name of Company)		
has subm	itted the attached PROPOSAL;			
2. H pertinent	le is fully informed respecting the percure that it is fully informed respecting such PRC	preparation and contents of the attached proposal and of all POSAL;		
3. S	uch Proposal is genuine and is not a	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				
collusion, epresenta	conspiracy, connivance or unlawful atives owners, employees, or partie			
Title)	resident / CEO	<del></del>		



"A City for All Ages"

#### 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

#### E-Bid #20240047 - Attachment E

must conform their practices to any published standards for their industry. <u>Compliance with laws, regulations and practices include, but are not limited to the following:</u>

- 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.

Name of Organization/Proposer GLF Construction Corporation
Signature tanasse ( lus
Printed Name and Title Francesco Senis, President & CEO
DateMarch 5, 2024

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.

## CITY OF PORT ST. LUCIE, FLORIDA PROJECT TITLE: Replacement of Generator at Building B

#### CERTIFICATION REGARDING LOBBYING

The undersigned Contractor certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for making lobbying contacts to an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions [as amended by "Government wide Guidance for New Restrictions on Lobbying", 61 Fed. Reg. 1413 (1/19/96). Note: Language in paragraph (2) herein has been modified in accordance with Section 10 of the Lobbying Disclosure Act of 1995 (P.L. 104-65, to be codified at 2 U.S.C. 1601, et seq.)]
- (3) The undersigned shall require that the language of this certification be included in the awards documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. 1352 (as amended by the Lobbying Disclosure Act of 1995). Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

[Note: Pursuant to 31 U.S.C. 1352 (1)-(2)(A), any person who makes a prohibited expenditure of fails to file or amend a required certification or disclosure form shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure or failure]

The Contractor, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. A 3801, *et seq.*, *apply* to this certification and disclosure, if any.

Company Name: GLF Constructi	on Corporation
Authorized By: Tanass ( Curs (Sign)	Francesco Senis
(Sign)	(Print Name)
Title:President & CEO	Date:

\*\*\*ALL SUBCONTRACTORS ARE REQUIRED TO FILL OUT THIS FORM AND SUBMIT WITH BID PACKAGE\*\*\*

## CITY OF PORT ST. LUCIE, FLORIDA PROJECT TITLE: Replacement of the Emergency Generator at Building B

## Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Primary Covered Transactions

The Contractor certifies that, the firm or any person associated therewith in the capacity of owner, partner, director, officer, principal, investigator, project director, manager, auditor, and/or position involving the administration of federal funds:

- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions, as defined in 49 CFR s29.110(a), by any federal department or agency;
- (b) have not within a three-year period preceding this certification been convicted of or had a civil judgment rendered against it for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or public contract; violation of federal or state antitrust statutes; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property
- (c) are not presently indicted for or otherwise criminally or civilly charged by a federal, state, or local governmental entity with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- (d) have not within a three-year period preceding this certification had one or more federal, state, or local government public transactions terminated for cause or default.

The Contractor certifies that it shall not knowingly enter into any transaction with any subcontractor, material supplier, or vendor who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this project by any federal agency unless authorized by the Florida Department of Transportation."

Company Name: GLF Construction	on Corporation
Authorized By: Tanesso ( Pun (Sign)	Francesco Senis
(Sign)	(Print Name)
Title:President & CEO	Date: March 5, 2024

## CITY OF PORT ST. LUCIE, FLORIDA Replacement of the Emergency Generator at Building B

#### **BUY AMERICA CERTIFICATE OF COMPLIANCE**

#### **CERTIFICATE OF COMPLIANCE**

#### **COMPLIANCE**

The Bidder hereby certifies that it will comply with the requirements of 23 C.F.R. 635.410, as amended, and utilize only iron or steel manufactured in the United States, or components made with iron or steel that meet the Buy America requirements. Bidder acknowledges that it will be required to produce Buy America certification(s) from the producer(s) of the steel or iron or components prior to incorporating any such materials into the work or project.

Company Name: GLF Construction Con	rporation
Authorized By: Tavess ( Purs (Sign)	Francesco Senis
(Sign)	(Print Name)
Title:President & CEO	Date: March 5, 2024

#### **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	454034
Date of Authorization	October 5, 2011
Name of Contractor	GLF Construction Corporation
Name of Project	Replace Emergency Generator Bld. B
Solicitation Number (If Applicable)	20240047
I hereby declare under penalty of perjury that  March  Executed on  January L  Signature of Authorized Officer	5 24 Miami FL
SUBSCRIBED AND SWORN BEFORE ME  ON THIS THE 5th DAY OF March  NOTARY PUBLIC HE MARCH	THELMA E. GARCIA Notary Public - State of Florida Commission # HH 168494 My Comm. Expires Dec 19, 2025 Bonded through National Notary Assn.
My Commission Expires: 12/19/25	

## DRUG-FREE WORKPLACE FORM Replacement of Emergency Generator at Building B

The undersigned	Contr	ractor in accordance Construction	with Florida Statute Corporation	287.087 hereby does:	certifies that
		(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.

March 5, 2024

Date:

STATE OF FLORIDA } COUNTY OF ST. LUCIE} SS:		
The foregoing instrument was acknow	vledged be	fore me this (Date)
by:Francesco Senis		who is personally known to me or who has produced
		as identification and who did (did not) take an oath.
Commission No		
Notary	Print:	
Thelma E. Garcia	Notary	THELMA E. GARCIA  Notary Public - State of Florida  Commission # HH 168494  My Comm. Expires Dec 19, 2025
Notary Thelma E. Garcia	Print:	THELMA E. GARCIA Notary Public - State of Florida

#### VENDOR CERTIFICATION REGARDING SCRUTINIZED COMPANIES' LISTS

Vendor Name:	GLF Construction Corporation		
Vendor FEIN:	65–0394050		
Authorized Representative's Name:	Thelma Garcia		
Authorized Representative's Title:	Assistant Vice President		
Address:	1 SE 3rd Ave Suite 1600		
City, State and Zip Code:	Miami, Florida 33131		
Phone Number:	305-371-5228		
Email Address:	TEGarcia@glfusa.com		

Sections 287.135 and 215.473, Florida Statutes, prohibit Florida municipalities from contracting with companies, for goods or services over \$1,000,000 that are on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or to engage in any Business operations with Cuba or Syria. Sections 287.135 and 215.4725 also prohibit Florida municipalities from contracting with companies, for goods or services in any amount that are on the list of Scrutinized Companies that Boycott Israel.

The list of "Scrutinized Companies" is created pursuant to Section 215.473, Florida Statutes. A copy of the current list of "Scrutinized Companies" can be found at the following link: <a href="https://www.sbafla.com/fsb/FundsWeManage/FRSPensionPlan/GlobalGovernanceMandates/QuarterlyReports.aspx">https://www.sbafla.com/fsb/FundsWeManage/FRSPensionPlan/GlobalGovernanceMandates/QuarterlyReports.aspx</a>

As the person authorized to sign on behalf of the Respondent Vendor, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies with Activities in Sudan List; or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; is not participating in a boycott of Israel; and does not have any business operations with Cuba or Syria. I understand that pursuant to Sections 287.135 and 215.473, Florida Statutes, the submission of a false certification may subject the Respondent Vendor to civil penalties, attorney's fees, and/or costs.

I understand and agree that the City may immediately terminate any contract resulting from this solicitation upon written notice if the company referenced above are found to have submitted a false certification or any of the following occur with respect to the company or a related entity: (i) for any contract for goods or services in any amount of monies, it has been placed on the Scrutinized Companies that Boycott Israel List, or is engaged in a boycott of Israel, or (ii) for any contract for goods or services of one million dollars (\$1,000,000) or more, it has been placed on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or it is found to have been engaged in business operations in Cuba or Syria.

Authorized Signature								
Francesco	Senis,	President						
Print Name								
	raverso l	lus						
Signature								

(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.											
	GLF CONSTRUCTION CORPORATION											
	2 Business name/disregarded entity name, if different from above											
oage 3.	3 Check appropriate box for federal tax classification of the person whose no following seven boxes.	me is entered on line 1. Check only <b>one</b> of the certain entities, not indivinstructions on page 3):				ndividu						
s on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC											
ype	Limited liability company. Enter the tax classification (C=C corporation,	S-S corporation P-Partnership)										
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classified LLC if the LLC is classified as a single-member LLC that is disregarded another LLC that is not disregarded from the owner for U.S. federal tax	n of the single-member owner. Do not check om the owner unless the owner of the LLC is			Exemption from FATCA reporting code (if any)							
ifi P	is disregarded from the owner should check the appropriate box for the	tax classification of its owner.										
ec .	Other (see instructions) ▶		(Applies to accounts maintained outside the U.S.)									
S	5 Address (number, street, and apt. or suite no.) See instructions.	Reque	ster's name a	nd ac	ddress (o	otional)						
Š	1 SE 3rd Avenue, Suite 1600											
	6 City, state, and ZIP code											
	Miami, Florida 33131											
	7 List account number(s) here (optional)											
Part												
Enter y	our TIN in the appropriate box. The TIN provided must match the na	me given on line 1 to avoid	Social sec	urity	number							
	withholding. For individuals, this is generally your social security nut alien, sole proprietor, or disregarded entity, see the instructions for											
	it is your employer identification number (EIN). If you do not have a			-		-						
TIN, lat	er.		or	-		_						
Note: I	the account is in more than one name, see the instructions for line	1. Also see What Name and	Employer	denti	ification	number	r					
Numbe	To Give the Requester for guidelines on whose number to enter.											
			6 5 -	- 0	3 9	4 0	0   5	0				
Part	Certification								_			
Under	enalties of perjury, I certify that:							-				
1. The i	umber shown on this form is my correct taxpayer identification num	ber (or I am waiting for a numb	er to be iss	ued t	o me); a	.nd						
2. I am	not subject to backup withholding because: (a) I am exempt from ba	ckup withholding, or (b) I have	not been no	tified	d by the	Interna	al Rev	enue				
no lo	ce (IRS) that I am subject to backup withholding as a result of a failunger subject to backup withholding; and	re to report all interest or divide	ends, or (c) t	he IF	RS has r	otified	me th	nat I an	ח			
	a U.S. citizen or other U.S. person (defined below); and											
4. The F	ATCA code(s) entered on this form (if any) indicating that I am exem	pt from FATCA reporting is cor	rect.									
Certific	ation instructions. You must cross out item 2 above if you have been r	otified by the IRS that you are co	urrently subje	ect to	backup	withho	lding	becaus	е			
you hav	e failed to report all interest and dividends on your tax réturn. For real e on or abandonment of secured property, cancellation of debt, contribut	state transactions, item 2 does no	ot apply. For	mort	tgage int	erest p	aid,	onto				
other th	an interest and dividends, you are not required to sign the certification,	out you must provide your correct	ct TIN. See th	ne ins	struction	s for Pa	art II, I:	ater.				
Sign												
Here	Signature of U.S. person ► Paullolo ( O	Date ►	March	15,	2024							
Gen	eral Instructions	<ul> <li>Form 1099-DIV (dividends funds)</li> </ul>	, including t	hose	from st	ocks o	r muti	ual				
Section references are to the Internal Revenue Code unless otherwise noted.		<ul> <li>Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)</li> </ul>										
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted		Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)										
after they were published, go to www.irs.gov/FormW9.		Form 1099-S (proceeds from real estate transactions)										
Purpose of Form		Form 1099-K (merchant card and third party network transactions)										
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer dentification number (TIN) which may be your social security number		• Form 1098 (home mortgage interest), 1098-E (student loan interest),										
		1098-T (tuition)  • Form 1099-C (canceled debt)										
SSN), individual taxpayer identification number (ITIN), adoption				ent d	of secure	ed pror	nerty)					
axpayer identification number (ATIN), or employer identification number		Form 1099-A (acquisition or abandonment of secured property)  Line Form W. 9 only if you are a LLS, person (including a resident)										
amount	report on an information return the amount paid to you, or other reportable on an information return. Examples of information nolude, but are not limited to, the following.	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.										
	099-INT (interest earned or paid)	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,										