

#20210025 - SANDIA DRIVE SIDEWALK CONSTRUCTION PROJECT
 HALF CENT SALES TAX FUNDED
 Cost Worksheet - Schedule A
 Attachment F



Company Name:

Line #	Pay Item No.	Description	Unit	Plan	Unit Price	Total Amount
1	0101 1	Mobilization	LS	1	\$ 17,406.50	\$ 17,406.50
2	0101 18	Construction Video	LS	1	\$ 850.00	\$ 850.00
3	0101 99	Survey Staking & Record Drawings	LS	1	\$ 33,000.00	\$ 33,000.00
4	0102 1	Maintenance of Traffic (including Pedestrian M.O.T.)	LS	1	\$ 9,000.00	\$ 9,000.00
5	0104 10 3	Sediment Barrier	LF	5481	\$ 1.55	\$ 8,495.55
6	0104 11	Floating Turbidity Barrier	LF	204	\$ 11.00	\$ 2,244.00
7	0104 18	Inlet Protection System	EA	3	\$ 50.00	\$ 150.00
8	0110 1 1	Clearing & Grubbing	AC	2.12	\$ 11,500.00	\$ 24,380.00
9	0110 4 10	Removal of Existing Concrete	SY	512	\$ 10.00	\$ 5,120.00
10	0120 1	Regular Excavation	CY	308	\$ 23.25	\$ 7,161.00
11	0120 6	Embankment	CY	802	\$ 18.00	\$ 14,436.00
12	0425 1521	Inlets, DT BOT, Type C, <10'	EA	1	\$ 3,200.00	\$ 3,200.00
13	0425 1541	Inlets, DT BOT, Type C, <10'	EA	1	\$ 3,350.00	\$ 3,350.00
14	*included in pay item above	Concrete Apron	CY	0.55		\$ -
15	0425 1910	Inlets, Closed Flume	EA	1	\$ 2,700.00	\$ 2,700.00
16	0430 174 215	Pipe Culvert, Optional Material, Ellip, 15" SD	LF	128	\$ 65.50	\$ 8,384.00
17	*included in pay item above	Concrete Class NS, Pipe End Treatment	CY	7		\$ -
18	0430 174 218	Pipe Culvert, Optional Material, Ellip, 18" SD	LF	95	\$ 66.25	\$ 6,293.75
19	*included in pay item above	Concrete Class NS, Pipe End Treatment	CY	6.9		\$ -
20	0430 174 224	Pipe Culvert, Optional Material, Ellip, 24" SD	LF	63	\$ 103.00	\$ 6,489.00
21	*included in pay item above	Concrete Class NS, Pipe End Treatment	CY	3.4		\$ -
22	0430 175 115	Pipe Culvert, Optional Material, Round, 15" S/CD	LF	8	\$ 56.50	\$ 452.00
23	0430 175 130	Pipe Culvert, Optional Material, Round, 30" S/CD	LF	18	\$ 159.00	\$ 2,862.00
24	0430 984 629	Mitered End Section Optional - Ellip, 24" SD	EA	2	\$ 1,200.00	\$ 2,400.00
25	0514 72	Impermeable Polyethylene Liner (Swale Install)	LF	2033	\$ 5.00	\$ 10,165.00
26	0520 1 10	Concrete Curb & Gutter, Type F	LF	173	\$ 22.75	\$ 3,935.75
27	0522 1	Concrete Sidewalk 4" Thick	SY	2872	\$ 31.00	\$ 89,032.00
28	0522 2	Concrete Sidewalk 6" Thick (Sidewalk / Driveway)	SY	832	\$ 43.00	\$ 35,776.00
29	*included in pay item above	Concrete Class NS, Driveway Footer	CY	11.7		\$ -
30	0527 2	Detectable Warnings	SF	449	\$ 23.75	\$ 10,663.75
31	0570 1 2	Performance Turf, Sod	SY	7040	\$ 5.30	\$ 37,312.00
32	0700 1 11	Single Post Sign, F&I, Ground Mount, Up to 12 SF	AS	5	\$ 545.00	\$ 2,725.00
33	0700 1 12	Single Post Sign, F&I, Ground Mount, 12-20 SF	AS	15	\$ 675.00	\$ 10,125.00
34	0700 1 60	Single Post Sign, Remove	AS	18	\$ 27.00	\$ 486.00
35	0710 90	Painted Pavement Markings - Final Surface (5%)	LS	1	\$ 2,300.00	\$ 2,300.00
36	0711 11 123	Thermoplastic, STD., White, Solid, Crosswalk, 12"	LF	1280	\$ 2.20	\$ 2,816.00
37	0711 11 125	Thermoplastic, STD., White, Solid, Stop Line, 24"	LF	214	\$ 4.50	\$ 963.00
38	0711 14 125	Thermoplastic, Preformed., White, Solid, 24" Crosswalk	LF	1000	\$ 34.00	\$ 34,000.00
39	0711 16 101	Thermoplastic, STD. - Other Surfaces, White, Solid, 6"	GM	0.259	\$ 5,800.00	\$ 1,502.20
40	0711 16 201	Thermoplastic, STD. - Other Surfaces, Yellow, Solid, 6"	GM	0.285	\$ 5,700.00	\$ 1,624.50
41	1080 21 400	Utility Fixture, Valve/Meter Box, Relocate	EA	9	\$ 750.00	\$ 6,750.00
42	1080 21 500	Utility Fixture, Valve/Meter Box, Adjust	EA	21	\$ 250.00	\$ 5,250.00
43	2000 1	Utility Coordination	LS	1	\$ 1,200.00	\$ 1,200.00
44					TOTAL	\$ 415,000.00

Note: Unit prices are limited to 2 decimals.

Example: \$5.2555 is not acceptable - \$5.25 is acceptable.

Document A310™ – 2010

Conforms with The American Institute of Architects AIA Document 310

Bid Bond

CONTRACTOR:

(Name, legal status and address)

Heavy Civil Inc.

150 East Sample Road, Suite 310

Pompano Beach, FL 33064

SURETY:

(Name, legal status and principal place of business)

Frankenmuth Mutual Insurance Company

One Mutual Avenue

Frankenmuth, MI 48787-0001

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

OWNER:

(Name, legal status and address)

City of Port St Lucie

121 SW Port St Lucie Blvd

Port St Lucie, FL 34984-5099

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

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

PROJECT:

(Name, location or address, and Project number, if any)

Sandia Drive Sidewalk Construction Project

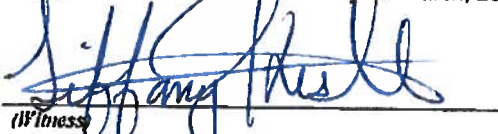
aBid (Event) Number: 20210025

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

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

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

Signed and sealed this 23rd day of March, 2021



(Witness)

Heavy Civil Inc.

(Principal)

(Seal)

President

(Title)

Frankenmuth Mutual Insurance Company

(Surety)

(Seal)

(Title) Warren M. Alter, Attorney-in-Fact



(Witness) Doreen Sheerin, CSR

FRANKENMUTH MUTUAL INSURANCE COMPANY

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that Frankenmuth Mutual Insurance Company (the "Company"), a corporation duly organized and existing under the laws of the State of Michigan, having its principal office at 1 Mutual Avenue, Frankenmuth, Michigan 48787, does hereby nominate, constitute and appoint:

Warren M. Alter, Jonathan A. Bursevich, David T. Satine, Dawn Auspitz

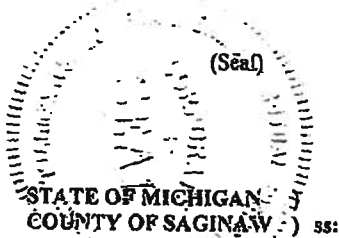
Their true and lawful attorney(s)-in-fact, each in their separate capacity if more than one is named above, to make, execute, seal, acknowledge and deliver any and all bonds, contracts and undertakings of suretyship, with the exception of Financial Guaranty Insurance, provided, however, that the penal sum of any one such instrument shall not exceed the sum of:

Fifty Million and 00/100 Dollars (\$50,000,000)

This Power of Attorney is granted pursuant to the following Resolution duly adopted at a meeting of the Board of Directors of Frankenmuth Mutual Insurance Company:

"RESOLVED, that the President, Senior Vice President or Vice President and each of them under their respective designations, hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer of the Company, qualifying the attorney(s) named in the given power of attorney, to execute on behalf of, and acknowledge as the act and deed of Frankenmuth Mutual Insurance Company on all bonds, contracts and undertakings of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, the Company has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 10th day of September, 2018.



Frankenmuth Mutual Insurance Company
By [Signature]
Frederick A. Edmond, Jr.,
President and Chief Operating Officer

Sworn to before me, a Notary Public in the State of Michigan, by Frederick A. Edmond, Jr., to me personally known to be the individual and officer described in, and who executed the preceding instrument, deposed and said the Corporate Seal and his signature as Officer were affixed and subscribed to said instrument by the authority of the Company.

IN TESTIMONY WHEREOF, I have set my hand, and affixed my Official Seal this 10th day of September, 2018.

[Signature] (Seal)
Dianne L. Voss, Notary Public
Saginaw County, State of Michigan
My Commission Expires July 23, 2024

I, the undersigned, Vice President of Frankenmuth Mutual Insurance Company, do hereby certify that the foregoing is a true, correct and complete copy of the original Power of Attorney; that said Power of Attorney has not been revoked or rescinded and is in full force and effect as of this date.

IN WITNESS WHEREOF, I have set my hand and affixed the Seal of the Company, this 23rd day of March, 2021

[Signature]
Andrew H. Knudsen, Vice President

ALL CORRESPONDENCE RELATED TO BOND VALIDATION AND/OR A CLAIM SHOULD BE DIRECTED TO THE DIRECTOR OF SURETY, 701 US ROUTE ONE, SUITE 1, YARMOUTH, ME 04096



HEAVCIV-01

SANDYL

CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)
3/18/2021

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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 License # 958967 Johnston Lewis Associates, Inc. 5600 New King, Ste. 210 Troy, MI 48098	CONTACT NAME: Amy Blackmer PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: amyb@jlains.com
INSURER(S) AFFORDING COVERAGE	
INSURER A: Ohio Security Insurance Company	NAIC # 24082
INSURER B: _____	
INSURER C: _____	
INSURER D: _____	
INSURER E: _____	
INSURER F: _____	

INSURED
 Heavy Civil, Inc.
 150 East Sample Road
 Suite 310
 Pompano Beach, FL 33064

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: _____			BKS58347963	3/26/2020	3/26/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BKS58347963	3/26/2020	3/26/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			USO58347963	3/26/2020	3/26/2021	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	XWS58347963	3/26/2020	3/26/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Equipment Floater			BKS58347963	3/26/2020	3/26/2021	Equipment Floater \$ 500,000
A	General Liability			BKS58347963	3/26/2020	3/26/2021	Rented Equipment \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Job Name: Sandia Drive Sidewalk
 Job Number: E-Bid #20210025
 Job Address: Sandia Drive

CERTIFICATE HOLDER City of Port St. Lucie 121 SW Port St. Lucie Blvd. Port Saint Lucie, FL 34984	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
--	--

Blanket Primary & Non Contributory COMMERCIAL GENERAL LIABILITY
CG 20 01 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PRIMARY AND NONCONTRIBUTORY -
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

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

The following is added to the **Other Insurance Condition** and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

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Blanket Additional Insured

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - AUTOMATIC STATUS WHEN
REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU -
CONTRACTORS - COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Paragraph 2. of Section II - Who Is An Insured is amended to include as an Insured any person or organization whom you have agreed to add as an additional insured in a written contract or written agreement. Such person or organization is an additional Insured but only with respect to liability for "bodily injury" or "property damage":

1. Caused by "your work" performed for that additional insured that is the subject of the written contract or written agreement; and
2. Included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. 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.

The insurance provided by this endorsement applies only if the written contract or written agreement is signed prior to the "bodily injury" or "property damage".

We have no duty to defend an additional insured under this endorsement until we receive written notice of a claim or "suit" by the additional insured as required in Paragraph b. of Condition 2. Duties In The Event Of Occurrence, Offense, Claim Or Suit under Section IV - Commercial General Liability Conditions.

B. With respect to the insurance provided by this endorsement, the following are added to Paragraph 2. Exclusions of Section I - Coverage A - Bodily Injury And Property Damage Liability:

This insurance does not apply to:

1. "Bodily injury" or "property damage" that occurs prior to you commencing operations at the location where such "bodily injury" or "property damage" occurs.
2. "Bodily injury" or "property damage" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services including:
 - a. The preparing, approving or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawing and specifications; and
 - b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional services.

Blanket Waiver of Subrogation

P. EXTENDED PROPERTY DAMAGE

Exclusion a. of **COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY** is replaced by the following:

a. Expected Or Intended Injury

"Bodily injury" or "property damage" expected or intended from the standpoint of the Insured. This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect persons or property.

Q. WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US - WHEN REQUIRED IN A CONTRACT OR AGREEMENT WITH YOU



Under **Section IV - Commercial General Liability Conditions**, the following is added to **Condition 8. Transfer Of Rights Of Recovery Against Others To Us**:

We waive any right of recovery we may have against a person or organization because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard" provided:

1. You and that person or organization have agreed in writing in a contract or agreement that you waive such rights against that person or organization; and
2. The injury or damage occurs subsequent to the execution of the written contract or written agreement.

GL per Location

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EACH LOCATION GENERAL AGGREGATE LIMIT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

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- A. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under **Section I - Coverage A - Bodily Injury And Property Damage Liability**, and for all medical expenses caused by accidents under **Section I - Coverage C Medical Payments**, which can be attributed only to operations at a single "location" owned by or rented to you:
1. A separate Each Location General Aggregate Limit applies to each "location", and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.
 2. The Each Location 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 "products-completed 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 Each Location General Aggregate Limit for that "location". Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Each Location General Aggregate Limit for any other "location".
 4. The limits shown in the Declarations for Each Occurrence, Fire Damage 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 Each Location 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 - Bodily Injury And Property Damage Liability**, and for all medical expenses caused by accidents under **Section I - Coverage C Medical Payments**, which cannot be attributed only to operations at a single "location" owned by or rented to you:
1. 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
 2. Such payments shall not reduce any Each Location 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 Each Location General Aggregate Limit.
- D. For the purposes of this endorsement, the following definition is added to **Section V - Definitions**:
"Location" means premises involving the same or connecting lots, or premises whose connection is interrupted only by a street, roadway, waterway or right-of-way of a railroad.
- E. The provisions of **Section III - Limits Of Insurance** not otherwise modified by this endorsement shall continue to apply as stipulated.

GL Limit per project

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**CONSTRUCTION PROJECT(S) - GENERAL AGGREGATE LIMIT
(PER PROJECT)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

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- A. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under **Section I - Coverage A - Bodily Injury And Property Damage Liability**, and for all medical expenses caused by accidents under **Section I - Coverage C Medical Payments**, which can be attributed only to ongoing operations at a single construction project away from premises owned by or rented to you:
1. A separate **Construction Project General Aggregate Limit** applies to each construction project and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations .
 2. The 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 "products-completed 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 Construction Project General Aggregate Limit for that construction project. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Construction Project General Aggregate Limit for any other construction project.
 4. The limits shown in the Declarations for Each Occurrence, Fire Damage 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 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 - Bodily Injury And Property Damage Liability**, and for all medical expenses caused by accidents under **Section I - Coverage C Medical Payments**, which cannot be attributed only to ongoing operations at a single construction project away from premises owned by or rented to you:
1. 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
 2. Such payments shall not reduce any 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 Construction Project General Aggregate Limit.
- D. If the applicable 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.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

HIRED AUTO AND NON-OWNED AUTO LIABILITY

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Coverage

- A. Hired Auto Liability
- B. Non-Ownership Liability

A. Insurance is provided only for those coverages when an "X" is shown in the Declarations or in the Schedule.

1. Hired Auto Liability

The insurance provided under Section I - Coverage A - Bodily Injury And Property Damage Liability, applies to "bodily injury" or "property damage" arising out of the maintenance or use of a "hired auto" by you or your "employees" in the course of your business.

2. Non-Owned Auto Liability

The insurance provided under Section I - Coverage A - Bodily Injury And Property Damage Liability, applies to "bodily injury" or "property damage" arising out of the use of any "non-owned auto" in your business by any person.

B. For insurance provided by this endorsement only:

1. The exclusions, under Paragraph 2. Exclusion of Section 1 - Coverage A - Bodily Injury and Property Damage Liability, other than exclusions a., b., d., f., and i. and the Nuclear Energy Liability Exclusion, are deleted and replaced by the following:

a. "Bodily Injury" to:

- (1) An "employee" of the insured arising out of and in the course of:
 - (a) Employment by the insured; or
 - (b) Performing duties related to the conduct of the insured's business; or
- (2) The spouse, child, parent, brother or sister of that "employee" as a consequence of Paragraph (1) above.

This exclusion applies:

- (1) Whether the insured may be liable as an employer or in any other capacity; and
- (2) To any obligation to share damages with or repay someone else who must pay the damages because of the injury.

This exclusion does not apply to:

- (1) Liability assumed by the insured under an "insured contract"; or
- (2) "Bodily Injury" arising out of and in the course of domestic employment by the insured unless benefits for such injury are in whole or in part either payable or required to be provided under any workers compensation law.

b. "Property damage" to:



370

of 274

183

Ron DeSantis, Governor

Halsey Beshears, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

LICENSE NUMBER: CGC1528801

EXPIRATION DATE: AUGUST 31, 2022

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

**STEIER, THOMAS R SR
HEAVY CIVIL INC.
18158 NE19TH AVE
NORTH MIAMI FL 33162**



ISSUED: 08/14/2020

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.



Florida Department of Transportation

RON DESANTIS
GOVERNOR

605 Suwannee Street
Tallahassee, FL 32399-0450

KEVIN J. THIBAUT, P.E.
SECRETARY

October 16, 2020

HEAVY CIVIL INC
150 E. SAMPLE ROAD
POMPANO BEACH, FLORIDA 33064

REVISED
RE: CERTIFICATE OF QUALIFICATION

Dear Sir/Madam:

The Department of Transportation has qualified your company for the type of work indicated below. Unless your company is notified otherwise, this Certificate of Qualification will expire 6/30/2021. However, the new application is due 4/30/2021.

In accordance with S.337.14 (1) F.S. your next application must be filed within (4) months of the ending date of the applicant's audited annual financial statements.

If your company's maximum capacity has been revised, you can access it by logging into the Contractor Prequalification Application System via the following link:
[HTTPS://fdotwp1.dot.state.fl.us/ContractorPreQualification/](https://fdotwp1.dot.state.fl.us/ContractorPreQualification/)

Once logged in, select "View" for the most recently approved application, and then click the "Manage" and "Application Summary" tabs.

FDOT APPROVED WORK CLASSES:
DRAINAGE, FLEXIBLE PAVING, GRADING, GRASSING, SEEDING AND SODDING, HOT PLANT-MIXED BITUM. COURSES, SIDEWALK, Concrete Barrier Wall, Underground Utilities (Water & Sewer).

You may apply for a Revised Certificate of Qualification at any time prior to the expiration date of this certificate according to Section 14-22.0041(3), Florida Administrative Code (F.A.C.), by accessing your most recently approved application as shown above and choosing "Update" instead of "View." If certification in additional classes of work is desired, documentation is needed to show that your company has done such work with your own forces and equipment or that experience was gained with another contractor and that you have the necessary equipment for each additional class of work requested.

All prequalified contractors are required by Section 14-22.006(3), F.A.C., to certify their work underway monthly in order to adjust maximum bidding capacity to available bidding capacity. You can find the link to this report at the website shown above.

Sincerely,

Darlene Anderson, for

Alan Autry, Manager
Contracts Administration Office

AA:cg

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000
VALID OCTOBER 1, 2019 THROUGH SEPTEMBER 30, 2020

DBA: HEAVY CIVIL INC
Business Name: HEAVY CIVIL INC

Receipt #: 180-308399
Business Type: GENERAL CONTRACTOR (CERTIFIED GENERAL CONTRACTOR)

Owner Name: STEIER, THOMAS R SR
Business Location: 150 E SAMPLE RD STE 310
POMPANO BEACH
Business Phone: 954-597-6443

Business Opened: 06/15/2020
State/County/Cert/Reg: CGC1528801
Exemption Code:

Rooms Seats Employees Machines Professionals
19

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
27.00	0.00	0.00	6.75	0.00	25.00	58.75

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

**THIS BECOMES A TAX RECEIPT
WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

HEAVY CIVIL INC
150 E SAMPLE RD STE 310
POMPANO BEACH, F 33064

Receipt # WWW-19-00212095
Paid 09/16/2020 58.75

2019 - 2020

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000
VALID OCTOBER 1, 2019 THROUGH SEPTEMBER 30, 2020

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State/County/Cert/Reg: CGC1528801
Exemption Code:

Rooms Seats Employees Machines Professionals
19

Signature	For Vending Business Only					
	Number of Machines:			Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
27.00	0.00	0.00	6.75	0.00	25.00	58.75

Receipt # WWW-19-00212095
Paid 09/16/2020 58.75



**CITY OF POMPANO BEACH
BUSINESS TAX RECEIPT
FISCAL YEAR: 2020 - 2021**

Business Tax Receipt Valid from: October 1, 2020 through September 30, 2021

4473342
HEAVY CIVIL INC
150 NE 36 ST 310

2/1/2021

POMPANO BEACH FL 33064

THIS IS NOT A BILL

THIS IS YOUR BUSINESS TAX RECEIPT. PLEASE POST IN A CONSPICUOUS PLACE AT THE BUSINESS LOCATION.

BUSINESS OWNER: HEAVY CIVIL INC
BUSINESS LOCATION: 150 NE 36 ST 310 POMPANO BEACH FL

RECEIPT NO: CLASSIFICATION
21-00103643 CONTRACTOR GENERAL (GC)

NOTICE: A NEW APPLICATION MUST BE FILED IF THE BUSINESS NAME, OWNERSHIP OR ADDRESS IS CHANGED. THE ISSUANCE OF A BUSINESS TAX RECEIPT SHALL NOT BE DEEMED A WAIVER OF ANY PROVISION OF THE CITY CODE NOR SHALL THE ISSUANCE OF A BUSINESS TAX RECEIPT BE CONSTRUED TO BE A JUDGEMENT OF THE CITY AS TO THE COMPETENCE OF THE APPLICANT TO TRANSACT BUSINESS. THIS DOCUMENT CANNOT BE ALTERED.

BUSINESS TAX RECEIPTS EXPIRE SEPTEMBER 30TH OF EACH YEAR



"A City for All Ages"

Attachment G

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 Michelle Fentress, Issuing Officer, for the procurement of these services.

All questions regarding this Solicitation are to be submitted in writing to Michelle Fentress, Procurement Agent I with the Procurement Management Department via e-mail mfentress@cityofpsl.com, or by phone 772-871-5222. Please reference the Solicitation number on all correspondence to the City.

All questions, comments and requests for clarification must reference the Solicitation number on all correspondence to the City. Any oral communications shall be considered unofficial and non-binding.

Only written responses to written communication shall be considered official and binding upon the City. The City reserves the right, at its sole discretion, to determine appropriate and adequate responses to the written comments, questions, and requests for clarification.

*NOTE: All addendums and/or any other correspondence before bid close date (general information, question and responses) to this solicitation will be made available exclusively through the DemandStar's Website for retrieval. All notice of intent to award documentation will be published on the City Clerk's Website. Proposers are solely responsible for frequently checking these websites for updates to this solicitation.

I understand and shall fully comply with all requirements of City of Port. St. Lucie Ordinance 20-15, Section 35.13.

Typed Name: _____

Signed: _____

Company and Job Title: _____

Date: _____

ATTACHMENT I - Mandatory Questions for E-Bid #20210025

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

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

Questions per Proposal Factors/Categories

Response by
Offeror. Only
Yes or No
Answers

Upload
Attachments?

Attachment
Name

Question #		Response by Offeror. Only Yes or No Answers	Upload Attachments?	Attachment Name
	Proposal Factors			
1	List any criminal violations and/or convictions of the Proposer and/or any of its principals: (N/A is not an acceptable answer).	No	No	No
2	Is firm a minority business?	No	No	No
3	Is the firm incorporated? Yes-No if yes, in what state? FLORIDA	No	No	Annual Report
4	List any judgements from lawsuits in the last five (5) years: (N/A is not an acceptable answer).	No	No	No
5	List any judgements pending or completed within the past five (5) years involving the corporation, partnership or individuals with more than ten percent (10%) interest: (N/A is not an acceptable answer).	No	No	No
6	Has the Proposer or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into receivership?	Yes	Yes	Licenses
7	Proposers are required to submit all licenses and certifications required to perform this project.	Yes	Yes	E-Verify
8	Complete and upload E-Verify Form	Yes	Yes	Drug Free
9	Complete and upload Drug Free Workplace Form	Yes	Yes	Code of Ethics
10	Complete and upload Contractor's Code of Ethics	Yes	Yes	Non-Collusion
11	Complete and upload Non-Collusion Affidavit	Yes	Yes	Cone of Silence
12	Complete and upload Cone of Silence Form	Yes	Yes	Trench Safety
13	Complete and upload Trench Safety Act Form	Yes	Yes	W-9
14	Submit W-9	Yes	Yes	Completed Projects
15	Upload and submit three (3) projects similar in size and scope to this Bid completed by your firm within the past five (5) years along with a brief description of the project, location of project, client name, client phone number, email, and value of contract.	No	No	No
16	Does the Bidder accept the Purchasing Card (Visa)?	No	No	No



"A City for All Ages"

eBID #20210025 – ATTACHMENT J 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, City official, employee family member or other vendor contracted by the City.
- ◆ Contractor will not cause, influence or attempt to cause or influence, any City employee or City Official, which might tend to impair his/her objectivity or independence of judgment; or to use, or attempt to use, his/her official position to secure any unwarranted privileges or advantages for that Vendor or for any other person.
- ◆ Contractor will disclose to the City any direct or indirect personal interests a City employee or City official holds as it relates to a Vendor contracted by the City.
- ◆ Contractor must comply with all applicable laws, codes or regulations of the countries, states and localities in which they operate. This includes, but is not limited to, laws and regulations relating

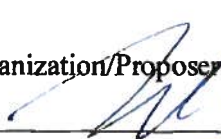
to environmental, occupational health and safety, and labor practices. In addition, Contractor must require their suppliers (including temporary labor agencies) to do the same. Contractor must conform their practices to any published standards for their industry. Compliance with laws, regulations and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

- Obtaining and maintaining all required environmental permits. Further, Contractor will endeavor to minimize natural resource consumption through conservation, recycling and substitution methods.
- 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

Heavy Civil Inc.

Signature



Printed Name and Title

Todd Kneisel - President

Date

March 23, 2021

DISCLAIMER: This Code of Ethics is intended as a reference and procedural guide to contractors. The information it contains should not be interpreted to supersede any law or regulation, nor does it supersede the applicable contractor contract. In the case of any discrepancies between it and the law, regulation(s) and/or contractor contract, the law, regulatory provision(s) and/or vendor contract shall prevail.

CITY OF PORT ST. LUCIE, FLORIDA
SEALED BID NO. 20210025 - Attachment K
PROJECT TITLE: Sandia Drive Sidewalk Construction Project

Half Cent Sales Tax Funded

TRENCH SAFETY ACT COMPLIANCE STATEMENT

Project Location: Sandia Drive from SE Thornhill Drive to Crosspoint Drive

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:

Four hundred Dollars and zero cent \$400.00
(Written) (Figures)

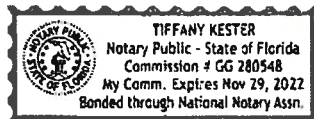
3. The amount listed above has been included within the Base Bid.

Certified: Heavy Civil Inc.
(Company-Contractor)

By: [Signature]
(President's Signature)
(President's Typed or Printed Name)

Sworn to and subscribed before me in Broward County, Florida on the 23rd day of March, 2021.

[Signature]
NOTARY PUBLIC





"A City for All Ages"

E-Verify Form

Supplier/Consultant acknowledges and agrees to the following:

- 1. Shall utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the Supplier/Consultant during the term of the contract; and
2. Shall expressly require any subcontractors performing work or providing services pursuant to the state contract to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.

E-Verify Company Identification Number

1375936

Date of Authorization

02/06/2019

Name of Contractor

Heavy Civil Inc.

Name of Project

Sandia Drive Sidewalk

Solicitation Number (If Applicable)

20210025

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

Executed on 23rd March, 2021 in Pompano Beach (city), FL (state).

Signature of Authorized Officer

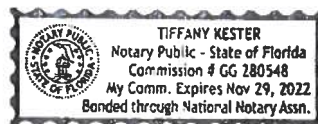
Todd Kneisel-President
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE 23rd DAY OF March, 2021.

NOTARY PUBLIC Tiffany Kester

My Commission Expires: November 29, 2022



Company ID Number: 1375936

Approved by:

Employer Heavy Civil Inc.	
Name (Please Type or Print) Tiffany J Kester	Title
Signature Electronically Signed	Date 02/04/2019
Department of Homeland Security – Verification Division	
Name (Please Type or Print) USCIS Verification Division	Title
Signature Electronically Signed	Date 02/06/2019

Company ID Number: 1375936

Information Required for the E-Verify Program	
Information relating to your Company:	
Company Name	Heavy Civil Inc.
Company Facility Address	150 E. Sample Road Ste 310 Pompano Beach, FL 33064
Company Alternate Address	
County or Parish	BROWARD
Employer Identification Number	465439171
North American Industry Classification Systems Code	237
Parent Company	
Number of Employees	10 to 19
Number of Sites Verified for	1

Company ID Number: 1375936

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

FLORIDA

1 site(s)

Company ID Number: 1375936

Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name Tiffany J Kester
Phone Number (954) 597 - 6443
Fax Number
Email Address tiffany@heavycivilinc.com

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NON-COLLUSION AFFIDAVIT

Solicitation #20210025

Sandia Drive Sidewalk Construction Project

State of Florida

County of Broward }

Todd Kneisel, being first duly sworn, disposes and says that:

(Name/s)

1. They are President of Heavy Civil Inc. the Proposer that

(Title)

(Name of Company)

has submitted the attached PROPOSAL;

2. He is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such PROPOSAL;

3. Such Proposal is genuine and is not a collusive or sham Proposal;

4. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contract for which the attached proposal has been submitted or to refrain from proposing in connection with such Contract or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached Proposal or of any other Proposer, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the City of Port St. Lucie or any person interested in the proposed Contract; and

5. The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

(Signed) Todd Kneisel

(Title) President

STATE OF FLORIDA }
COUNTY OF ~~ST LUCIE~~ SS:
Broward

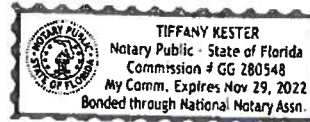
The foregoing instrument was acknowledged before me this (Date) 23rd day of March, 2021

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

Commission No. GG280548

Notary Print: Tiffany Kester

Notary Signature: Tiffany Kester



DRUG-FREE WORKPLACE FORM
E-Bid # 20210025- Attachment N
Sandia Drive Sidewalk Construction Project

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

Heavy Civil Inc. does:
(Name of Business)

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

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



Bidder's Signature

March 23, 2021
Date:



Completed Projects

T5674 FIN #435660-2-52-01

Ocala, FL

The project consists of Clearing & Grubbing, Removal of Existing Concrete, Excavation, Embankment, Optional Base, Milling, Asphalt, Inlets, Manholes, Pipe, Concrete Sidewalk, Performance Turf....

Bid Amount \$1,194,207 Final Accepted 6/2020

FDOT

Frazier

Stuart, FL

The project consists of Clearing & Grubbing, Inlet, Excavation, Embankment, Pervious Portland Cement, Asphalt, Manholes, Pipe, Concrete Driveways, Signs, Striping....

Bid Amount \$326,107.55

City of Stuart

E1S51 FIN #440027-1-52-01

Sarasota, FL

The project consists of Clearing & Grubbing, Inlet, Removal of Existing Concrete, Excavation, Embankment, Optional Base, Milling, Asphalt, Manholes, Pipe, Concrete Sidewalk & Driveways, Performance Turf, Striping....

Bid Amount \$407,080

FDOT

T5618 FIN #436435-1-52-01

Orlando, FL

The project consists of Clearing & Grubbing, Inlet, Excavation, Embankment, Optional Base, Asphalt, Concrete Curb, Performance Turf, Striping and Signs

Bid Amount \$249,699 Final Accepted 7/2020 FDOT Jeff Oakes 407-832-1354

T4532 FIN #438388-1-52-01

Boca Raton, FL

The project consists of Clearing & Grubbing, Excavation, Embankment, Concrete Sidewalk and Driveways, Asphalt Concrete Friction Course, Optional Base, Inlets, Manholes, Pipe, Performance Turf....

Bid Amount \$271,766 Final Accepted 4/2020

CEG Timir Shah 414-687-6670

T1766 FIN #442485-1-52-01

Desoto, FL

The project consists of Clearing & Grubbing, Removal of Existing Concrete, Excavation, Embankment, Milling Asphalt, Asphalt Concrete Friction Course, Inlets, Manholes, Pipe, Concrete Curb, Concrete Sidewalk, Performance Turf....

Bid Amount \$305,000 Final Accepted 3/2020 **FDOT Keith Crews 863-991-3429**

T5673 FIN #439512-1-52-01

Melbourne, FL

The project consists of Clearing & Grubbing, Removal of Existing Concrete, Excavation, Embankment, Milling Asphalt, Asphalt Concrete Friction Course, Inlets, Manholes, Pipe, Concrete Curb, Concrete Sidewalk, Performance Turf....

Bid Amount \$1,099,497.00 Final Accepted 2/2020 **FDOT Richard Nasrawy 321-243-7687**

NE 26th Street FIN#438122-1-58-01

Wilton Manor, FL

The project consists of Clearing & Grubbing, Removal of Concrete, Excavation, Remove Existing Drainage Structure, Pipe, Inlets, Asphalt Driveway, Concrete Driveway, Milling, Asphalt, Concrete Sidewalk, Handrail, Signs, Striping, Landscaping Irrigation, Sod....

Bid Amount \$1,049,951 Final Accepted 6/2020 **AEEngineering Ricardo Baraybar 813-235-3056**

SR A1A FIN #420416-2-58-01

Deerfield Beach, FL

The project consists of Mobilization, MOT, SW 6", Patterned Pavement, In Road Light Assembly, Rectangular Solar, Signs, Thermoplastic Asphalt and Concrete curbs 7 SW.

City of Deerfield Beach \$324,528.27 Final Accepted 12/2019 **Mark DIMascio 954-952-0221**

E1S63 FIN #196904-5-52-01

Okeechobee, FL

The project consists of Ditch Re-Grading, Ditch Pavement Installation, Trench Drain Installation, and Inlet Modifications....

Bid Amount \$76,143.00 Final Accepted 8/2019 **Susan Hindman 863-273-1680**

E1R80 FIN #437716-1-52-01

Lakeland, FL

The project consists of Improvements of Drainage Improvements, Milling, and Resurfacing, Base Work, Shoulder Treatment, Signing and Pavement Marking....

Bid Amount \$157,000.00 Final Accepted 10/2019

E4T43 Martin Co FDOT # 436869-1-52-01

The project consists of Concrete Sidewalks and Driveways, Concrete Removal, Selective Clearing & Grubbing, Pipe Handrail & Pipe for Guardrail, Detectable Warnings, Signing & Pavement Markings Excavation & Embankment

Bid Amount \$483,247.70 Final Accepted 8/2019 **Mark Freeman FDOT # 772-828-1388**

E8R56 Turnpike FIN #442901-6-52-01

FL Turnpike MP 88-115

This project consists of Turnpike Asphalt Widening, Asphalt Base Course 1,200-ton, Asphalt Type D SP9-5 500 tons, Drainage Regular Excavation and Embankment, Type B Stabilization 100 SY, Optional Base Group #1 95 SY, Optional Base Group #12 264 SY, Optional Base Group #14 552 SY, Optional Base Group #15 332 SY, SP9.5 Type C Asphalt 384 tons....

Bid Amount \$216,000.00 Completed 3/2019 **Roxanne Griggs FDOT/Turnpike 954-774-0696**

150 East Sample Road, Unit 310, Pompano Beach, FL 33064



LIST OF SUBCONTRACTORS

Bob's Barricades	MOT	\$3,500.00
Unlimited Turf	SOD	\$13,939.00
Southwide	STRIPING	\$51,989.00



ADDENDUM # 1
E-Bid # 20210025
Addendum Date: March 11, 2021
E-Bid Name: Sandia Drive Sidewalk Construction Project

Questions

Please make the following changes/modifications to the subject bid:

NOTE: The Bid opening date has not changed.

1. QUESTION: The Cost Worksheet shows that bid item #13 is a Type C, but the schedule of valves on the plans calls this inlet out as a Type D. Please confirm the inlet type.

RESPONSE: There is one (1) Type C inlet (S-3 – Sta. 27+80.48 LT) and one (1) Type D inlet (S-5 – Sta. 57+21 LT) within the project limits. Please refer to page SQ-10 for quantity computations.

2. QUESTION: The Cost Worksheet shows that bid item #14 is included in the pay item for item #13, but the schedule of values on the plans calls this apron out for the closed flume inlet. Please confirm.

RESPONSE: The cost for the concrete apron shall be included in the bid price for the closed flume inlet (PI# 0425-1-910).

3. QUESTION: The plans state that it is the contractor's responsibility to repaint the new driveway at 1342 SE Sandia by matching the existing color. If the contractor is unable to match the color, will the contractor be responsible to repaint the entire driveway to match?

RESPONSE: Painting the driveway to match existing color will not be required.

4. QUESTION: Please confirm that bid item #42 "Utility Fixture, Valve/Meter Box, Adjust" is intended for adjusting the pad or box to the new grades.

RESPONSE: Confirmed.

5. QUESTION: Is the design intend for bid item #41 "Utility Fixture, Valve/Meter Box, Relocate" to have the contractor excavate and perform a horizontal deflection of these items to get the boxes or pads out of the proposed sidewalk? Please confirm.

RESPONSE: Confirmed.

6. QUESTION: On the plans, there are several locations where it is called out to relocate existing guy wires and existing poles by others. Is the City currently working with FPL to have these items relocated or will the contractor be required to coordinate this?

RESPONSE: The City will be coordinating with FPL.

7. QUESTION: If the City has started working with FPL to have the guy wires and poles relocated, what is the expected time of completion for these items?

RESPONSE: Schedule undetermined at this time.

8. QUESTION: Will the Contractor be responsible for any liquidated damages caused by the FPL relocates not be performed in a timely manner and causing the contractor to complete the project past the final completion date?

RESPONSE: No.

9. QUESTION: There is an existing fence at STA 33+10 that is cutting across the path of the proposed sidewalk but the plans do not call out for the contractor to do anything with this. Please clarify.

RESPONSE: The City will make the fence adjustments via a separate vendor.



ADDENDUM # 2
E-Bid # 20210025
Addendum Date: March 19, 2021
E-Bid Name: Sandia Drive Sidewalk Construction Project

Questions

Please make the following changes/modifications to the subject bid:

NOTE: The Bid opening date has not changed.

1. **QUESTION:** If a Contractor is Pre-Qualified with FDOT in sidewalk and drainage, will the City accept this in lieu of the licensing requirements for this project?

RESPONSE: No, the City will not accept a Contractor that is Pre-Qualified with FDOT for this project. The Contractor must have the license required that is stating in the Bid Specifications.

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000020290

Entity Name: HEAVY CIVIL INC.

Current Principal Place of Business:

150 EAST SAMPLE ROAD
UNIT 310
POMPANO BEACH, FL 33064

Current Mailing Address:

150 EAST SAMPLE ROAD
UNIT 310
POMPANO BEACH, FL 33064 US

FEI Number: 46-5439171

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OTTO, KARL F
1500 BAY RD
854
MIAMI BEACH, FL 33139 US

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

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name KNEISEL, TODD T
Address 1401 BAY RD UNIT 508
City-State-Zip: MIAMI BEACH FL 33139

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

SIGNATURE: TODD KNEISEL

PRESIDENT

02/04/2021

Electronic Signature of Signing Officer/Director Detail

Date

Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Heavy Civil Inc.</p> <p>2 Business name/disregarded entity name, if different from above</p>	
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate </p> <p> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> </p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: 0.8em;">(Applies to accounts maintained outside the U.S.)</p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. 150 E. Sample Road, Ste 310</p> <p>6 City, state, and ZIP code Pompano Beach, FL 33064</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

Part I Taxpayer Identification Number (TIN)

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

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

	<p>Social security number</p> <table border="1" style="width: 100%; text-align: center;"> <tr><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td></tr> </table> <p>OR</p> <p>Employer identification number</p> <table border="1" style="width: 100%; text-align: center;"> <tr><td>4</td><td>6</td><td>-</td><td>5</td><td>4</td><td>3</td><td>9</td><td>1</td><td>7</td><td>7</td></tr> </table>				-				-				4	6	-	5	4	3	9	1	7	7
			-				-															
4	6	-	5	4	3	9	1	7	7													

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 for Part II, later.

Sign Here	<p>Signature of U.S. person ▶ [Signature]</p>	<p>Date ▶ March 23, 2021</p>
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General Instructions

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

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

Purpose of Form

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

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

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

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