



City of Hollywood
Procurement Services
Steve Stewart, Chief Procurement Officer
2600 Hollywood Boulevard, Hollywood, FL 33020

PROPOSAL DOCUMENT REPORT
IFB No. REQ-039-23-JJ
2023 Drainage Infrastructure Improvements
RESPONSE DEADLINE: February 22, 2023 at 3:00 pm
Report Generated: Thursday, March 2, 2023

Man Con Inc. Proposal

CONTACT INFORMATION

Company:

Man Con Inc.

Email:

man-coninc@mancon.ws

Contact:

Anthony Mancini

Address:

3460 SW 11TH STREET
Deerfield Beach, FL 33442

Phone:

N/A

Website:

mancon.ws

Submission Date:

Feb 22, 2023 1:55 PM

ADDENDA CONFIRMATION

Addendum #1

Confirmed Feb 22, 2023 9:10 AM by Anthony Mancini

Addendum #2

Confirmed Feb 22, 2023 9:10 AM by Anthony Mancini

QUESTIONNAIRE

1. SUBMITTAL CHECKLIST CONFIRMATION*

The items below are required components of your solicitation response in order for your bid/proposal/submittal to be consider responsive and responsible. Please confirm this submittal includes the following items in this checklist

A. Forms and Certifications (Completed)

1. This Submittal Checklist Confirmation
2. Information Required from Bidders
3. Bid Form (see [#PRICING \(BID FORM\)](#))
4. Vendor Reference Form*
5. Hold Harmless and Indemnity Clause
6. Non-Collusion Statement
7. Sworn Statement...Public Entity Crimes
8. Certifications Regarding Debarment
9. Drug-Free Workplace Program
10. Solicitation, Giving, and Acceptance

11. W-9 (Request for Taxpayer Identification)
12. Trench Safety Form
13. Bid Guaranty Form
14. List of Subcontractors
15. Certificate(s) of insurance that meet the requirements of the [#SPECIAL TERM AND CONDITIONS](#) section.
16. Proof of State of Florida Sunbiz Registration
17. Acknowledgement and Signature Questionnaire
18. Proposal Form

This checklist is only a guide, please read the entire solicitation to ensure that your submission includes all required information and documentation.

Confirmed

2. INFORMATION REQUIRED FROM BIDDERS*

GENERAL INFORMATION

The Bidder shall furnish the following information. Failure to comply with this requirement may cause its rejection. Additional sheets shall be attached as required.

- A. Contractor's License (attach copy):
 1. Primary Classification:
 2. Broward County License Number (attach copy):
- B. Number of years as a Contractor in construction work of the type involved in this Contract:
- C. List the names and titles of all officers of Contractor's firm:
- D. Name of person who inspected site or proposed work for your firm:

1. Name:
2. Date of Inspection:
- E. What is the last project of this nature you have completed?
- F. Have you ever failed to complete work awarded to you; if so, where and why?
- G. Name three individuals or corporations for which you have performed work and to which you refer:
- H. List the following information concerning all contracts on hand as of the date of submission of this proposal (in case of co-venture, list the information for all coventures).
 1. Name of Project
 2. City
 3. Total Contract Value
 4. Contracted Date of Completion
 5. % Completion to Date
- I. What equipment do you own that is available for the work?
- J. What equipment will you purchase for the proposed work?
- K. List at least three (3) similar projects completed within the last ten (10) years by the bidder and the proposed project manager. For purposes of this requirement, 'similar' projects shall be considered to include projects of similar size and scope as outlined in the Scope of Work/Services section. Include owner, project value, completion date, reference contact information, and brief project description. The determination of whether a project is sufficiently similar shall be at the sole discretion of the City and the Engineer.
- L. Name the Project Manager proposed for this project. Attach a copy of the project manager's resume.
- M. Information and/or documentation that addresses and/or meets the requirements outlined in the Scope of Work/Services section, including any procedural or technical enhancements/innovations which do not materially deviate from the objectives or required content of the Scope of Work/Services.

NOTE: If requested by CITY, the Bidder shall furnish a notarized financial statement, references and other information, sufficiently comprehensive to permit an appraisal of its current financial condition.

GENERAL_INFORMATION.pdf

3. PRICING (BID FORM)*

I understand that I shall insert my pricing electronically in the [#PRICING \(BID FORM\)](#) section.

Confirmed

4. VENDOR REFERENCE FORM*

Please download the below documents, complete, and upload.

- [Vendor Reference Form.pdf](#)

VENDOR_REFERENCE_FORM.pdf

5. HOLD HARMLESS AND INDEMNITY CLAUSE*

I, an authorized representative, the contractor, shall indemnify, defend and hold harmless the City of Hollywood, its elected and appointed officials, employees and agents for any and all suits, actions, legal or administrative proceedings, claims, damage, liabilities, interest, attorney's fees, costs of any kind whether arising prior to the start of activities or following the completion or acceptance and in any manner directly or indirectly caused, occasioned or contributed to in whole or in part by reason of any act, error or omission, fault or negligence whether active or passive by the contractor, or anyone acting under its direction, control, or on its behalf in connection with or incident to its performance of the contract.

Confirmed

6. NON-COLLUSION STATEMENT*

I, being first duly sworn, depose that:

- A. He/she is an authorized representative of the Company, the Proposer that has submitted the attached Proposal.

- B. He/she has been fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;
- C. Such Proposal is genuine and is not a collusion or sham Proposal;
- D. 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 contractor for which the attached Proposal has been submitted or to refrain from bidding 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, profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure an advantage against the City of Hollywood or any person interested in the proposed Contract; and
- E. 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.

Confirmed

7. SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA STATUTES ON PUBLIC ENTITY CRIMES*

Please download the below documents, complete, and upload.

- [Sworn Statement Public Enti...](#)

PUBLIC_ENTITY_CRIMES.pdf

8. CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS*

The applicant certifies that it and its principals:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

- B. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, 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 governmental entity (Federal, State, or local) 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 application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Confirmed

9. DRUG-FREE WORKPLACE PROGRAM*

- A. IDENTICAL TIE PROPOSALS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie proposals will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:
 - 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
 - 2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
 - 3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).

4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program (if such is available in the employee's community) by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of these requirements.

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

Confirmed

10. SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY *

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. "No Public officer, employee of an agency, local government attorney, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the public officer, employee, local government attorney, or candidate would be influenced thereby." The term "public officer" includes "any person elected or appointed to hold office in any agency, including any person serving on an advisory body."

The City of Hollywood/Hollywood CRA policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City/CRA does business.

The State of Florida definition of "gifts" includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,

- Transportation, lodging, or parking,
- Food or beverage,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.

Confirmed

11. W9 FORM*

Please download the below documents, complete, and upload.

- [Form 11 - W-9.pdf](#)

W-9.pdf

12. TRENCH SAFETY*

Please download the below documents, complete, and upload.

- [Form 12 - Trench Safety For...](#)

Trench_Safety.pdf

13. BID GUARANTY FORM N/A

Not Applicable

- [Form 13 - Bid Guaranty Form...](#)

Bid_Guaranty_Form.pdf

14. LIST OF SUBCONTRACTORS*

Please download the below documents, complete, and upload.

- [Form 14 - List of Subcontra...](#)

List_of_Subcontractors.pdf

15. Certificate of Insurance*

See requirements in the [#SPECIAL TERM AND CONDITIONS](#) section.

The_City_of_Hollywood_COI.pdf

16. PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

59-2547432

[Click to Verify](#) *Value will be copied to clipboard*

17. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*

1/31/1985

STATE INCORPORATED/ORGANIZED:*

Florida

REMITTANCE ADDRESS*

3460 SW 11th Street, Deerfield Beach, FL 33442

BIDDER/PROPOSER'S AUTHORIZED REPRESENTATIVE'S TYPED FULL NAME*

Anthony Mancini

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER/PROPOSER CERTIFIES ACCEPTANCE OF THE TERMS, CONDITIONS, SPECIFICATIONS, ATTACHMENTS AND ANY ADDENDA. THE BIDDER/PROPOSER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF THIS SOLICITATION. BIDDER/PROPOSER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR THE PERIOD OF TIME STATED IN THE SOLICITATION.*

Confirmed

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER/PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID/PROPOSAL NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID/PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER/PROPOSER TO THE TERMS OF ITS OFFER.*

Confirmed

PROPOSAL FORM*

Please download the below documents, complete, and upload.

- [Proposal Form.docx](#)

PROPOSAL.pdf2023_DRAINAGE_INFRASTRUCTURE_IMPROVEMENTS_039-23-JJ-FINAL_BID_PACKET.pdf

PRICE TABLES

TABLE 1

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Mobilization for On-call Routine Task Order (\leq \$50,000) Not to Exceed 7% of Task Order	5	EA	\$3,500.00	\$17,500.00
2	Mobilization for On-call Routine Task Order ($>$ \$50,000 to \$100,000) Not to Exceed 6% of Task Order	10	EA	\$4,500.00	\$45,000.00
3	Mobilization for On-call Routine Task Order ($>$ \$100,000 to \$400,000) Not to Exceed 5% of Task Order	10	EA	\$12,500.00	\$125,000.00
4	Mobilization for On-call Routine Task Order (\geq \$400,000) Not to Exceed 4% of Task Order	5	EA	\$16,000.00	\$80,000.00
5	Expedited Mobilization (within 24 hours of request) ($<$ \$100,000) Not to Exceed 8% of Task Order	5	EA	\$8,000.00	\$40,000.00
6	Expedited Mobilization (within 24 hours of request) (\geq \$100,000) Not to Exceed 6% of Task Order	5	EA	\$18,000.00	\$90,000.00
7	Traffic Control Officer (FDOT Pay Item No. 102-14)	100	HR	\$110.00	\$11,000.00
8	F&I Work Zone Sign (FDOT Pay Item No. 102-60)	1,500	DAY	\$4.00	\$6,000.00
9	F&I Temporary Barrier (formerly "Temporary Barrier Wall"), Low Profile, Concrete (FDOT Pay Item No.102-71-13)	1,000	LF	\$44.00	\$44,000.00
10	F&I Temporary Barrier (formerly "Temporary Barrier Wall"), Anchored (FDOT Pay Item No.102-71-15)	1,000	LF	\$31.50	\$31,500.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
11	F&I Channelizing Device, Types I, II, DI, VP, Drum, or LCD (FDOT Pay Item No. 102-74-1)	2,500	DAY	\$4.00	\$10,000.00
12	F&I Type III Barricade (FDOT Pay Item NO 102-115)	500	DAY	\$7.00	\$3,500.00
13	F&I Arrow Board/Advance Warning Arrow Panel (FDOT Pay Item No. 102-76)	50	DAY	\$66.00	\$3,300.00
14	Temporary Raised/Retroreflective Pavement Marker, Type D (FDOT Pay Item No. 102-78-1)	50	EA	\$15.00	\$750.00
15	F&I Temporary Portable Changeable Message Sign (FDOT Pay Item No. 102-99)	50	DAY	\$96.50	\$4,825.00
16	F&I Portable Regulatory Sign (FDOT Pay Item No. 102-150-1)	25	DAY	\$62.00	\$1,550.00
17	Sediment Barrier (Silt Fence) (FDOT Pay Item No. 104-10-3)	1,000	LF	\$7.00	\$7,000.00
18	Sediment Basin /Containment System for Dewatering (FDOT Pay Item No. 104-7)	100	DAY	\$547.00	\$54,700.00
19	Floating Turbidity Barrier (FDOT Pay Item No. 104-11)	1,500	LF	\$20.00	\$30,000.00
20	Soil Tracking Prevention Device (FDOT Pay Item No. 104-15)	50	EA	\$769.50	\$38,475.00
21	Inlet Protection (FDOT Pay Item No. 104-18)	500	EA	\$156.00	\$78,000.00
22	Regular Excavation (FDOT Pay Item No. 120-1)	1,200	CY	\$27.00	\$32,400.00
23	Embankment (FDOT Pay Item No. 120-6)	500	CY	\$50.50	\$25,250.00
24	Flowable Fill (FDOT Pay Item No. 121-70)	150	CY	\$347.00	\$52,050.00
25	Select Bedding Material (FDOT Pay Item No. 125-3)	50	CY	\$104.00	\$5,200.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
26	F&I Fill Sand (FDOT Pay Item No. 142-70)	50	CY	\$96.00	\$4,800.00
27	Geosynthetic Reinforced Soil Slope (FDOT Pay Item No. 145-1)	2,500	SF	\$16.00	\$40,000.00
28	Painted Pavement Markings, Standard, White, Yellow or Blue, Solid, 6-inches (FDOT Pay Item No. 710-11-101, 710-11-201, OR 710-11-421)	500	LF	\$5.00	\$2,500.00
29	Painted Pavement Markings, Standard, White or Yellow, Solid for Crosswalk and Roundabout, 12-inches (FDOT Pay Item No. 710-11-123)	100	LF	\$9.00	\$900.00
30	Raised Pavement Markers, Type B (FDOT Pay Item No. 706-1-3)	100	EA	\$5.00	\$500.00
31	Painted Pavement Markings, Standard, White, Solid for Stop Line or Crosswalk (FDOT Pay Item No. 710-11-125)	100	LF	\$11.00	\$1,100.00
32	Painted Pavement Markings, Standard, White or Yellow Skip, 10-30 or 3-9 Skip, 6-inches (FDOT Pay Item No. 710-11-131 OR 710-11-231)	100	LF	\$8.00	\$800.00
33	Painted Pavement Markings, Standard, White or Yellow, Island Nose (FDOT Pay Item No. 710-11-190 OR 710-11-290)	100	SF	\$11.00	\$1,100.00
34	Thermoplastic Pavement Markings, Standard, White or Yellow, Solid, 6-inches (FDOT Pay Item No. 711-1A-BCD)	500	LF	\$6.00	\$3,000.00
35	Thermoplastic Pavement Markings, Standard, White, Solid, 12-inches for Crosswalk and Roundabout (FDOT Pay Item No. 711-11-123)	100	LF	\$10.50	\$1,050.00
36	Thermoplastic Pavement Markings, Standard, White, Solid, 24-inches for Stopline and Crosswalk (FDOT Pay Item No. 711-11-125)	100	LF	\$14.00	\$1,400.00
37	Thermoplastic, Remove Existing Thermoplastic Pavement Markings- Surface To Remain (FDOT Pay Item No. 711-17-1)	500	SF	\$11.00	\$5,500.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
38	Removal of Existing Concrete Pavement (FDOT Pay Item No.110-4-10)	1,500	SY	\$27.50	\$41,250.00
39	Utility Pipe, Remove & Dispose, 5-7.9 Inches (FDOT Pay Item No. 1050-16-003)	1,000	LF	\$23.50	\$23,500.00
40	Utility Pipe, Remove & Dispose, 8-19.9 Inches (FDOT Pay Item No. 1050-16-004)	2,500	LF	\$27.50	\$68,750.00
41	Utility Pipe, Remove & Dispose, 20-49.9 Inches (FDOT Pay Item No.1050-16-005)	500	LF	\$41.00	\$20,500.00
42	Utility Pipe, Remove & Dispose, 50 Inches or Larger (FDOT Pay Item No. 1050-16-006)	100	LF	\$85.50	\$8,550.00
43	Utility Pipe, Plug and Place Out of Service, 5-7.9 Inches (FDOT Pay Item No. 1050-18-003)	100	LF	\$35.00	\$3,500.00
44	Utility Pipe, Plug and Place Out of Service, 8-19.9 Inches (FDOT Pay Item No. 1050-18-004)	300	LF	\$37.00	\$11,100.00
45	Utility Pipe, Plug and Place Out of Service, 20-49.9 Inches (FDOT Pay Item No. 1050-18-005)	200	LF	\$87.00	\$17,400.00
46	Single Post Sign, Remove (FDOT Pay Item No. 700-1-60)	50	EA	\$265.50	\$13,275.00
47	Milling Exist Asphalt Pavement, 1-Inch Avg Depth, Area (FDOT Pay Item No. 327-70-1)	1,500	SY	\$19.50	\$29,250.00
48	Concrete Sidewalk and Driveways, 6-Inches Thick (FDOT Pay Item No. 522-2)	500	SY	\$90.50	\$45,250.00
49	Paver, Architectural, Roadway (FDOT Pay Item No. 526-1-1)	750	SY	\$131.50	\$98,625.00
50	Paver, Architectural, Sidewalk (FDOT Pay Item No. 526-1-2)	750	SY	\$124.00	\$93,000.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
51	Reworking / Adding Limerock Base to Existing, 3-Inches (FDOT Pay Item No. 210-1-9)	500	SY	\$21.00	\$10,500.00
52	Reworking / Adding Limerock Base to Existing, 4-Inches (FDOT Pay Item No. 210-1-8)	500	SY	\$23.50	\$11,750.00
53	Reworking / Adding Limerock Base to Existing, 6-Inches (FDOT Pay Item No. 210-1-1)	1,500	SY	\$27.50	\$41,250.00
54	Optional Base, Base Group 04 (FDOT Pay Item No. 285-704)	1,500	SY	\$26.00	\$39,000.00
55	Superpave Asphaltic Concrete, Traffic B, C, Or E (FDOT Pay Item No. 334-1-12, 334-1-13, OR 334-1-15)	500	Ton	\$274.00	\$137,000.00
56	Miscellaneous Asphalt Pavement (FDOT Pay Item No. 339-1)	100	Ton	\$308.00	\$30,800.00
57	Concrete Curb & Gutter, Type E (FDOT Pay Item No. 520-1-7)	50	LF	\$56.50	\$2,825.00
58	Concrete Curb & Gutter, Type F (FDOT Pay Item No. 520-1-10)	1,000	LF	\$54.00	\$54,000.00
59	Concrete Curb, Type D (FDOT Pay Item No. 520-2-4)	1,500	LF	\$42.00	\$63,000.00
60	Valley Gutter- Concrete (FDOT Pay Item No. 520-3)	1,000	LF	\$48.00	\$48,000.00
61	Ditch Bottom Type C (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-521)	100	EA	\$5,600.00	\$560,000.00
62	Ditch Bottom Type D (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-541)	20	EA	\$5,850.00	\$117,000.00
63	Ditch Bottom Type E (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-551)	20	EA	\$6,080.00	\$121,600.00
64	Ditch Bottom Type F (Index 233) Less Than 10 Feet (FDOT Pay Item No. 425-1-561)	10	EA	\$5,812.50	\$58,125.00

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65	Ditch Bottom Type G (Index 233) Less Than 10 Feet (FDOT Pay Item No. 425-1-571)	10	EA	\$8,470.00	\$84,700.00
66	F&I Detectable Warning On Existing Walking Surface, Retrofit (FDOT Pay Item No. 527-2)	500	SF	\$45.00	\$22,500.00
67	Inlets, Adjust (FDOT Pay Item No. 425-4)	1	EA	\$1,390.00	\$1,390.00
68	Manhole, Adjust (FDOT Pay Item No. 425-5)	1	EA	\$1,239.00	\$1,239.00
69	Valve Boxes, Adjust (FDOT Pay Item No. 425-6)	1	EA	\$800.00	\$800.00
70	Drainage Structures, Miscellaneous, Adjust (FDOT Pay Item No. 425-8)	1	EA	\$6,000.00	\$6,000.00
71	Drainage Structure Modify (FDOT Pay Item No. 425-11)	1	EA	\$6,000.00	\$6,000.00
72	Inlets Relocating (FDOT Pay Item No. 425-71)	1	EA	\$8,000.00	\$8,000.00
73	Manholes And Inlets Cleaning And Sealing, Less Than 10 Feet (FDOT Pay Item No. 425-74-1)	1	EA	\$6,000.00	\$6,000.00
74	F&I Pipe Culvert, Optional Material, Round, 12 Inches, 15 Inches Storm Drain (FDOT Pay Item No. 430-174-112, 430-174-115)	1	LF	\$250.00	\$250.00
75	F&I Pipe Culvert, Optional Material, Round, 18 Inches, 24 Inches Storm Drain (FDOT Pay Item No. 430-174-118, 430-174-124)	1	LF	\$300.00	\$300.00
76	F&I Pipe Culvert, Optional Material, Round, 30 Inches, 36 Inches Storm Drain (FDOT Pay Item No. 430-174-130, 430-174-136)	1	LF	\$350.00	\$350.00
77	F&I Pipe Culvert, Optional Material, Round, 42 Inches, 48 Inches Storm Drain (FDOT Pay Item No. 430-174-142, 430-174-148)	1	LF	\$400.00	\$400.00

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78	F&I Pipe Culvert, Optional Material, Round, 54 Inches, 60 Inches Storm Drain (FDOT Pay Item No. 430-174-154, 430-174-160)	1	LF	\$625.00	\$625.00
79	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 15 Inches, 18 Inches (FDOT Pay Item No. 430-174-215 OR 430-174-218)	1	LF	\$265.00	\$265.00
80	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 24 Inches (FDOT Pay Item No. 430-174-224)	1	LF	\$285.00	\$285.00
81	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 30 Inches, 36 Inches (FDOT Pay Item No. 430-174-230 OR 430-174-236)	1	LF	\$325.00	\$325.00
82	Cleaning & Sealing Existing Pipe Joint, 10 Inches To 24 Inches, Storm Sewer (FDOT Pay Item No. 430-821-23, 430-821-25, OR 430-821-29)	1	EA	\$618.00	\$618.00
83	Cleaning & Sealing Existing Pipe Joint, 30 Inches, 36 Inches, Storm Sewer (FDOT Pay Item No. 430-821-33 OR 430-821-38)	1	EA	\$1,042.00	\$1,042.00
84	Cleaning & Sealing Existing Pipe Joint, 42 Inches, 48 Inches, Storm Sewer (FDOT Pay Item No. 430-821-40 OR 430-821-41)	1	EA	\$1,543.50	\$1,543.50
85	Cleaning & Sealing Existing Pipe Joint, 54 Inches, 60 Inches, Storm Sewer (FDOT Pay Item No. 430-821-42 OR 430-821-43)	1	EA	\$2,019.00	\$2,019.00
86	Cleaning & Sealing Existing Pipe Joint, >60 Inches, Storm Sewer (FDOT Pay Item No. 430-821-61)	1	EA	\$2,537.50	\$2,537.50
87	Mitered End Section, Optional Round, 12 Inches, 15 Inches, 18 Inches (FDOT Pay Item No. 430-982-121, 430-982-123, OR 430-982-125)	1	EA	\$2,706.50	\$2,706.50
88	Mitered End Section, Optional Round, 24 Inches (FDOT Pay Item No. 430-982-129)	1	EA	\$3,276.50	\$3,276.50

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
89	Mitered End Section, Optional Round, 30 Inches,36 Inches (FDOT Pay Item No. 430-982-133 OR 430-982-138)	1	EA	\$6,361.50	\$6,361.50
90	French Drain, 12 To 18 Inches (FDOT Pay Item No. 443-70-3)	1	LF	\$184.00	\$184.00
91	French Drain, 24 Inches (FDOT Pay Item No. 443-70-4)	1	LF	\$224.00	\$224.00
92	Storm Sewer Inspection (Video Camera) (FDOT Pay Item No. E432-4)	1	LF	\$18.00	\$18.00
93	Outfall Barnacle Removal For 0-24 Inch Pipes (FDOT Pay Item No. 430-95-1)	1	LF	\$80.50	\$80.50
94	Outfall Barnacle Removal For 25-36 Inch Pipes (FDOT Pay Item No. 430-95-2)	1	LF	\$118.00	\$118.00
95	Outfall Barnacle Removal For 37-48 Inch Pipes (FDOT Pay Item No. 430-95-3)	1	LF	\$159.00	\$159.00
96	Outfall Barnacle Removal For 49-60 Inches Pipes (FDOT Pay Item No. 430-95-4)	1	LF	\$239.00	\$239.00
97	Outfall Barnacle Removal For 61 Inches And Greater Pipes (FDOT Pay Item No. 430-95-5)	1	LF	\$309.50	\$309.50
98	Maintenance of Concrete Collar At Joints For Connecting Dissimilar Types Of Pipe (FDOT Pay Item No. 430-96)	1	EA	\$3,000.00	\$3,000.00
99	Pipe Liner, Sliplining, 30 Inches (FDOT Pay Item No. 431-15-30)	1	LF	\$400.00	\$400.00
100	Pipe Liner, Sliplining, 36 Inches (FDOT Pay Item No.431-1-36)	1	LF	\$450.00	\$450.00
101	Pipe Liner, Sliplining, 42 Inches (FDOT Pay Item No. 431-1-42)	1	LF	\$590.50	\$590.50
102	Deep Well Injection Box, Structure With No Outflow (FDOT Pay Item No. 444-74-1)	1	EA	\$22,336.00	\$22,336.00
103	Deep Well Injection Box, Structure With Outflow (FDOT Pay Item No. 444-74-2)	1	EA	\$25,219.00	\$25,219.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
104	Deep Well Open Hole, 24 Inches (FDOT Pay Item No. 444-70-11)	1	LF	\$291.00	\$291.00
105	Deep Well Casing (FDOT Pay Item No. 444-71-11)	1	LF	\$301.50	\$301.50
106	Deep Well Cleaning (0-23 Inches) (FDOT Pay Item No. 444-72-10)	1	LF	\$172.50	\$172.50
107	Deep Well Cleaning (24 Inches) (FDOT Pay Item No. 444-72-11)	1	LF	\$186.00	\$186.00
108	Deep Well Cleaning (25 Inches And Greater) (FDOT Pay Item No. 444-72-12)	1	LF	\$194.50	\$194.50
109	Sheet Piling, Steel Temporary-Critical (FDOT Pay Item No. 455-133-2)	1	SF	\$95.00	\$95.00
110	Desilting Pipe, 0-24 Inches (FDOT Pay Item No. E430-94-1)	1	LF	\$25.00	\$25.00
111	Desilting Pipe, 25-36 Inches (FDOT Pay Item No. E430-94-2)	1	LF	\$30.00	\$30.00
112	Desilting Pipe , 37-48 Inches (FDOT Pay Item No. E430-94-3)	1	LF	\$35.00	\$35.00
113	Desilting Pipe , 49-60 Inches (FDOT Pay Item No. E430-94-4)	1	LF	\$40.00	\$40.00
114	Desilting Pipe, 61 Inches Or (FDOT Pay Item No. E430-94-5)	1	LF	\$80.00	\$80.00
115	Riprap, Sand-Cement Bags (FDOT Pay Item No. 530-11-00)	1	CY	\$723.00	\$723.00
116	Riprap- Rubble, Bank And Shore (FDOT Pay Item No. 530-3-3)	1	TON	\$694.00	\$694.00
117	Riprap, Rubble, Furnish And Install, Ditch Lining (FDOT Pay Item No. 530-3-4)	1	TON	\$723.00	\$723.00
118	Fence Gate, Type B, Single, 0-6.0 Feet Opening (FDOT Pay Item No. 550-60-211)	1	EA	\$3,060.00	\$3,060.00
119	Fence Gate, Type B, Single, 6.1-12.0 Feet Opening (FDOT Pay Item No. 550-60-212)	1	EA	\$4,143.50	\$4,143.50

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
120	Fence Gate, Type B, Single, 12.1-18.0 Feet Opening (FDOT Pay Item No. 550-60-213)	1	EA	\$3,889.50	\$3,889.50
121	Fence Gate, Type B, Single, 18.1-20.0 Feet Opening (FDOT Pay Item No 550-60-214)	1	EA	\$7,171.50	\$7,171.50
122	Single Post Sign, Install (FDOT Pay Item No. 700-1-40)	1	EA	\$718.00	\$718.00
123	Single Post Sign, Relocate (FDOT Pay Item No. 700-1-50)	1	EA	\$358.50	\$358.50
124	Fire Hydrant, Adjust And Modify (FDOT Pay Item No. 1644-700)	1	EA	\$6,000.00	\$6,000.00
125	Fire Hydrant, Relocate (FDOT Pay Item No. 1644-800)	1	EA	\$12,000.00	\$12,000.00
126	Performance Turf, Sod (Bahia, Centipede, Bermuda (FDOT Pay Item No 570-1-2)	1	SY	\$30.00	\$30.00
127	F&I Light Tower, AMIDA/TEREX AL4000 or Equivalent, Includes Power Source	40	DAY	\$227.50	\$9,100.00
128	FDOT Certified Flag Person	1,000	HR	\$68.50	\$68,500.00
129	F&I Orange Plastic Mesh and Post	500	LF	\$16.50	\$8,250.00
130	F&I Steel Traffic Plates for 12-Foot Lane Daily Rate	50	EA	\$337.50	\$16,875.00
131	F&I Steel Traffic Plates for 12-Foot Lane Weekly Rate	50	EA	\$761.50	\$38,075.00
132	Survey Field Work as Performed By Crew	500	HR	\$316.00	\$158,000.00
133	Utility Locating and Excavation Test Hole in Green Areas	50	EA	\$741.00	\$37,050.00
134	Utility Locating and Excavation Test Hole in Pavement Areas	50	EA	\$975.00	\$48,750.00
135	Swale Excavation/Grading/Restoration (Up to 36-inches Deep with 1:3 Slopes or FL)	10,000	SY	\$12.00	\$120,000.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
136	Curb or Curb and Gutter Removal	1,500	LF	\$19.00	\$28,500.00
137	Paver Block Removal	1,000	SY	\$25.00	\$25,000.00
138	Removal and Disposal of Unsuitable, Non-Contaminated Materials	150	CY	\$73.00	\$10,950.00
139	Storm/Sanitary Structure Removal	200	EA	\$1,758.00	\$351,600.00
140	Limerock Removal up to a Depth of 8-Inches	500	SY	\$19.00	\$9,500.00
141	F&I Temporary Patch Using Cold Asphaltic Mix	100	CF	\$105.50	\$10,550.00
142	Ada Compliant Curb Ramp	20	EA	\$1,851.50	\$37,030.00
143	Type C Catch Basin 24x36 Inches Less Than 10 Feet	10	EA	\$5,375.00	\$53,750.00
144	Large Rectangular Type C Catch Basins With Top Slabs 4x4 Feet Or Type Inches	10	EA	\$8,000.00	\$80,000.00
145	Large Rectangular Type C Catch Basins With Top Slabs 5x5 Feet Or Type Inches	10	EA	\$9,000.00	\$90,000.00
146	Large Rectangular Type C Catch Basins With Top Slabs 6x6 Feet Or Type Inches	10	EA	\$10,077.00	\$100,770.00
147	Large Rectangular Type C Catch Basins With Top Slabs 8x8 Feet Less Than 10 Feet	10	EA	\$15,101.00	\$151,010.00
148	Large Rectangular Type C Catch Basins With Top Slabs 4x6 Feet Less Than 10 Feet	10	EA	\$10,000.00	\$100,000.00
149	Large Rectangular Type C Catch Basins With Top Slabs 4x8 Feet Less Than 10 Feet	10	EA	\$11,000.00	\$110,000.00
150	Storm Manhole Type M-4 (48 Inches Round) Less Than 10 Feet	10	EA	\$8,500.00	\$85,000.00
151	Storm Manhole Type M-5 (60 Inches Round) Less Than 10 Feet	10	EA	\$9,500.00	\$95,000.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
152	Storm Manhole Type M-6 (72 Inches Round) Less Than 10 Feet	10	EA	\$12,000.00	\$120,000.00
153	Storm Manhole Type M-7 (84 Inches Round) Less Than 10 Feet	10	EA	\$13,985.50	\$139,855.00
154	18 Inches Ads Drain Basin Or Approved Equal	10	EA	\$6,000.00	\$60,000.00
155	24 Inches Ads Drain Basin Or Approved Equal	10	EA	\$13,985.50	\$139,855.00
156	8 Inches Trench Drain With Grate 6452 Or Approved Equal	1	LF	\$420.00	\$420.00
157	10 Inches Trench Drain With Grate 6453 Or Approved Equal	1	LF	\$469.00	\$469.00
158	12 Inches Trench Drain With Grate 6454 Or Approved Equal	1	LF	\$541.00	\$541.00
159	15 Inches Trench Drain With Grate 6455 Or Approved Equal	1	LF	\$587.50	\$587.50
160	18 Inches Trench Drain With Grate 6456 Or Approved Equal	1	LF	\$657.00	\$657.00
161	Install Pipe Culvert, RCP Material Only, Round, Less Than 12 Inches Storm Drain	1	LF	\$106.00	\$106.00
162	Install Pipe Culvert, Optional Material, Round, Less Than 12 Inches Storm Drain	1	LF	\$102.50	\$102.50
163	French Drain, Less Than 12 Inches	1	LF	\$167.00	\$167.00
164	F&I Ballast Rock, French Drain Aggregate	1	CY	\$115.50	\$115.50
165	F&I Well Point System Complete, 4 Inches Pump	1	DAY	\$15,000.00	\$15,000.00
166	F&I Well Point System Complete, 6 Inches Pump	1	DAY	\$15,000.00	\$15,000.00
167	F&I Well Point System Complete, 8 Inches Pump	1	DAY	\$15,000.00	\$15,000.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
168	F&I By-Pass Pump 4 Inches	1	DAY	\$4,000.00	\$4,000.00
169	F&I By-Pass Pump 6 Inches	1	DAY	\$15,000.00	\$15,000.00
170	F&I By-Pass Pump 8 Inches	1	DAY	\$15,000.00	\$15,000.00
171	8-12 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$2,000.00	\$2,000.00
172	15-24 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$2,500.00	\$2,500.00
173	30-42 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$5,400.00	\$5,400.00
174	48-60 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$8,500.00	\$8,500.00
175	60 Inches And Above Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$15,000.00	\$15,000.00
176	Standard 6 Foot Chain Link Fence	1	LF	\$56.50	\$56.50
177	Standard 6 Foot Chain Link Fence Gate Opening, Single, 0-6 Opening	1	EA	\$3,024.00	\$3,024.00
178	Standard 6 Foot Wood Panel Pressure-Treated Fence	1	LF	\$60.50	\$60.50
179	Standard 6 Foot Wood Panel Pressure-Treated Fence Gate Opening, Single, 0-6 Opening	1	EA	\$2,131.50	\$2,131.50
180	Standard 6 Foot Vinyl Fence	1	LF	\$77.00	\$77.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
181	Standard 6 Foot Vinyl Fence Gate Opening, Single, 0-6 Opening	1	EA	\$3,368.50	\$3,368.50
182	Additional Laborer	1	HR	\$62.00	\$62.00
183	Master Electrician	1	HR	\$183.50	\$183.50
184	Diver (Regular Time)	1	HR	\$325.50	\$325.50
185	Certified Arborist	1	HR	\$207.50	\$207.50
186	Qualified Construction Training Qualification Program (Ctqp) Asphalt Paving Level II Technician	1	HR	\$282.00	\$282.00
187	Service Truck & Operator, Personnel Lift To 35 Ft High Access, 4 Hr Minimum Charge	1	HR	\$177.00	\$177.00
188	Bucket Truck & Operator, 50 Ft Reach, 4 Hr Minimum Charge	1	HR	\$220.50	\$220.50
189	D3 Or D5 Dozer & Operator	1	HR	\$212.00	\$212.00
190	Crane & Operator, Installations Less Than 85 Ft High And 22 Ton, 4 Hr Minimum Charge	1	HR	\$488.00	\$488.00
191	Vac Truck, 3-Person Crew, 4 Hr Minimum Charge	1	HR	\$800.00	\$800.00
192	Skid Steer Loader & Operator, 1,850 Lb Minimum, 4 Hr Minimum Charge	1	HR	\$300.00	\$300.00
193	Boat/Water Craft With Motor, 30 Ft Length Maximum, 4 Hr Minimum Charge	1	HR	\$1,000.00	\$1,000.00
194	Dump Truck & Operator, Single-Axle, 5 Cubic Yard Minimum Capacity, 4 Hr Minimum	1	HR	\$114.50	\$114.50

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
195	Root Pruning/Tree Trimming Crew, 3-Person Crew	1	HR	\$351.00	\$351.00
196	Pollution Retardant Baffle With 10 Inches Cleanout Access To Cover 12-Inch to 15-Inch	1	EA	\$1,170.50	\$1,170.50
197	Pollution Retardant Baffle With 12 Inches Cleanout Access To Cover 12-Inch to 15-Inch	1	EA	\$1,492.00	\$1,492.00
198	Pollution Retardant Baffle With 12 Inches Cleanout Access To Cover 18-Inch to 24-Inch	1	EA	\$1,828.00	\$1,828.00
199	F&I 10 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$5,539.00	\$5,539.00
200	F&I 12 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$6,863.50	\$6,863.50
201	F&I 15 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$10,458.00	\$10,458.00
202	F&I 18 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$13,000.00	\$13,000.00
203	F&I 24 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$17,596.50	\$17,596.50
204	F&I 30 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$23,986.00	\$23,986.00
205	F&I 36 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$29,204.00	\$29,204.00
206	F&I 42 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$40,239.00	\$40,239.00
207	F&I 48 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$58,016.50	\$58,016.50
208	F&I 54 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$82,046.50	\$82,046.50
209	F&I 60 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$107,000.00	\$107,000.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
210	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 10 to 18 Inches	1	EA	\$2,108.00	\$2,108.00
211	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 24 to 36 Inches	1	EA	\$2,709.50	\$2,709.50
212	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 42 to 48 Inches	1	EA	\$3,480.50	\$3,480.50
213	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings 54 to 60 Inches	1	EA	\$4,154.50	\$4,154.50
214	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings 61 Inches or Greater	1	EA	\$4,961.00	\$4,961.00
215	F&I 8 To 15 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$6,000.00	\$6,000.00
216	F&I 18 To 24 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$7,000.00	\$7,000.00
217	F&I 30 To 36 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$8,000.00	\$8,000.00
218	F&I 42 To 48 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$9,000.00	\$9,000.00
219	F&I 54 To 60 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$10,000.00	\$10,000.00
220	F&I 61 Inch and Above Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$12,000.00	\$12,000.00
221	F&I Pipe Bursting For Pipes 8 Inches And Under	1	LF	\$415.50	\$415.50
222	F&I Pipe Bursting For 10 Inches Pipes	1	LF	\$394.50	\$394.50
223	F&I Pipe Bursting For 12 Inches Pipes	1	LF	\$433.00	\$433.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
224	F&I Pipe Bursting For 15 Inches Pipes	1	LF	\$677.50	\$677.50
225	F&I Pipe Bursting For 18 Inches Pipes	1	LF	\$740.50	\$740.50
226	F&I Pipe Bursting For 24 Inches Pipes	1	LF	\$811.50	\$811.50
227	F&I Pipe Bursting For 30 Inches Pipes	1	LF	\$903.00	\$903.00
228	Directional Bore, 10 Inches Or Less	1	LF	\$250.00	\$250.00
229	F&I Fertilizer 40 Lb. Bag	1	EA	\$263.50	\$263.50
230	F&I Root Barrier	1	LF	\$32.00	\$32.00
231	Tree Removal, 0-12 Inches Trunk Diameter At Breast Height	1	EA	\$1,500.00	\$1,500.00
232	Tree Removal, 12.1-24 Inches Trunk Diameter At Breast Height	1	EA	\$2,000.00	\$2,000.00
233	Tree Removal, 24.1-48 Inches Trunk Diameter At Breast Height	1	EA	\$2,500.00	\$2,500.00
234	Tree Removal, 48.1-60 Inches Trunk Diameter At Breast Height	1	EA	\$4,030.00	\$4,030.00
235	Tree Removal, Greater Than 60 Inches Trunk Diameter At Breast Height	1	EA	\$7,627.00	\$7,627.00
236	Stump Grinding/Removal, 0-24 Inches Trunk Diameter At Breast Height	1	EA	\$474.00	\$474.00
237	Stump Grinding/Removal, 24.1-48 Inches Trunk Diameter At Breast Height	1	EA	\$749.00	\$749.00
238	Stump Grinding/Removal, 48.1-60 Inches Trunk Diameter At Breast Height	1	EA	\$1,472.00	\$1,472.00
239	Stump Grinding/Removal, Greater Than 60 Inches Trunk Diameter At Breast Height	1	EA	\$2,472.50	\$2,472.50

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
240	Salt Tolerant Turf, Sod (Seashore Paspalum Or Approved Equal	1	SY	\$19.50	\$19.50
241	Hedge Replacement With Common Nursery Available Plantings, 3-Gallon Container	1	EA	\$45.00	\$45.00
242	Hedge Replacement With Common Nursery Available Plantings, 7-Gallon Container	1	EA	\$67.50	\$67.50
243	Common Palm Species (Bismark, Date, Silver, Christmas, Royal, Thatch, Cabbage and Foxtail, 5-20 Overall Height	1	EA	\$1,311.50	\$1,311.50
244	Common Tree Species (Live Oak, Wild Tamarind, Green Or Silver Buttonwood, Bald or Pond Cypress, Magnolia, Ponciana, Slash Pine, Mahogany, Jamaican Dogwood, Mango, Sea Grape, Gumbo Limbo, Jacaranda, Japenese Fern), 8-20 - Overall Height	1	EA	\$1,390.50	\$1,390.50
245	Permit and Fees Allowance	1	EA	\$50,000.00	\$50,000.00
246	Testing Allowance	1	EA	\$30,000.00	\$30,000.00
247	Owner Allowance	1	EA	\$100,000.00	\$100,000.00
248	Indemnification	1	EA	\$10.00	\$10.00
249	30-inch French Drain - FDOT PI 443-70-5	1	LF	\$387.00	\$387.00
250	36-inch French Drain - FDOT PI 443-70-6	1	LF	\$473.00	\$473.00
251	HDEP Flap Gate Ross 12 to 24-inch	1	EA	\$27,495.00	\$27,495.00
252	HDEP Flap Gate Ross 30 to 48-inch	1	EA	\$38,896.00	\$38,896.00
253	Type C Catch Basin 24x36 Inches 10-15 Feet	1	EA	\$11,459.00	\$11,459.00
254	Type C Catch Basin 30x36 Inches Less Than 10 Feet	1	EA	\$11,543.00	\$11,543.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
255	Type C Catch Basin 30x36 Inches 10-15 Feet	1	EA	\$15,327.50	\$15,327.50
256	Check Valve Wastop 12 to 24-inch, Install	1	EA	\$19,448.00	\$19,448.00
257	Check Valve Wastop 30 to 48-inch, Install	1	EA	\$65,637.50	\$65,637.50
258	30-inch Stormwater Manhole Less Than 10 Feet	1	EA	\$3,800.00	\$3,800.00
259	30-inch Stormwater Manhole 10-15 Feet	1	EA	\$5,800.00	\$5,800.00
260	36-inch Stormwater Manhole Less Than 10 Feet	1	EA	\$4,800.00	\$4,800.00
261	36-inch Stormwater Manhole 10-15 Feet	1	EA	\$5,800.00	\$5,800.00
262	Field Crew (Superintendent)	1	HR	\$200.00	\$200.00
263	Field Crew (Operator)	1	HR	\$100.00	\$100.00
264	Field Crew (Laborer)	1	HR	\$65.00	\$65.00
265	Excavator, 5 CY	1	HR	\$350.00	\$350.00
266	Flat Bed Truck, 12'	1	HR	\$150.00	\$150.00
267	Loader	1	HR	\$200.00	\$200.00
268	Excavator CAT 314 or Equal	1	HR	\$262.00	\$262.00
269	Bobcat	1	HR	\$132.00	\$132.00
270	Excavator/Backhoe CAT 225 or Equal	1	HR	\$192.00	\$192.00

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
271	Wheel Loader CAT 926 or Equal	1	HR	\$200.00	\$200.00
272	Backhoe Loader Combo CAT 416 or Equal	1	HR	\$132.00	\$132.00
273	Bulldozer CAT D-3 or Equal	1	HR	\$159.00	\$159.00
274	18 Yard Dump Truck	1	HR	\$152.00	\$152.00
275	Removal and Disposal of Contaminated Materials	30	CY	\$483.00	\$14,490.00
[*] Denotes item is taxable Sales Tax (@ 7%)					\$0.00
TOTAL					\$6,260,342.00

FORM 15

INFORMATION REQUIRED FROM BIDDERS

GENERAL INFORMATION

The Bidder shall furnish the following information. Failure to comply with this requirement may cause its rejection. Additional sheets shall be attached as required.

1. Contractor's Name/Address: Man-Con Incorporated
3460 SW 11th Street, Deerfield Beach, FL 33442

2. Contractor's Telephone Number: 954-427-0230
and e-mail address: Anthony@mancon.ws
3. Contractor's License (attach copy): CGC1526881 & CUC056856
Primary Classification: _____
Broward County License Number (attach copy): 2023-467281
4. Number of years as a Contractor in construction work of the type involved in this Contract: 38 years

5. List the names and titles of all officers of Contractor's firm:
Jeffrey Mancini - President
Anthony Mancini - Vice President
Luke Mancini - Secretary
Caroline Mancini - Director
6. Name of person who inspected site or proposed work for your firm:
Name: Jeffrey Mancini
Date of Inspection: 2/12/23
7. What is the last project of this nature you have completed?
Lauderdale-by-the-Sea - Terra Mar Drainage Improvements
Project Reference Sheet Attached.

8. Have you ever failed to complete work awarded to you; if so, where and why?

No.

9. Name three individuals or corporations for which you have performed work and to which you refer:

Lauderdale-by-the-Sea, Ken Rubach 954-640-4233

Broward County Water & Wastewater Services, Mike Hagerty 954-831-3217

Seminole Tribe of Florida, James Rabideau 561-248-4098

10. List the following information concerning all contracts on hand as of the date of submission of this proposal (in case of co-venture, list the information for all coventures).

Name of Project	City	Total Contract Value	Contracted Date of Completion	% Completion to Date
South County Reclaimed Transmission Main - PH I	Palm Beach County Boca Raton	\$7,716,362.25	08/2023	90%
Historic Miramar Infrastructure Improvements, PH IV	Miramar	\$12,709,740.67	08/2024	40%

(Continue list on inset sheet, if necessary)

11. What equipment do you own that is available for the work?

See equipment list submitted.

12. What equipment will you purchase for the proposed work?

None

13. List at least three (3) similar projects completed within the last ten (10) years by the bidder. For purposes of this requirement, 'similar' projects shall be considered to include experience with underground infrastructure replacement,

specifically storm water pipe, structure, pavement restoration, concrete work, tidal wave installation and landscape installation and removal . Include owner's contact information (client's name, address, telephone number and email address), project value, completion date, reference contact information and brief project description. The determination of whether a project is sufficiently similar shall be at the sole discretion of the City and the Engineer.

Lauderdale-by-the-Sea - Terra Mar Drainage Improvements. Project Reference Sheet Submitted.

Broward County WWS - Hillsboro Pines Neighborhood Project. Project Reference Sheet Submitted.

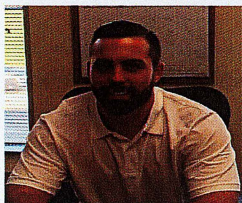
Seminole Tribe of Florida - Seminole Park Site Development. Project Reference Sheet Submitted.

(Add sheets as requested.)

14. Name the Project Manager proposed for this project. Attach a copy of the project manager's resume.
Anthony Mancini
-

NOTE: If requested by CITY, the Bidder shall furnish a notarized financial statement, references and other information, sufficiently comprehensive to permit an appraisal of its current financial condition.

ANTHONY MANCINI



VICE PRESIDENT
Anthony.m@mancon.ws

Anthony has been a crucial member of the Man Con Inc team since 2005 when he worked as a foreman at the start of his career until 2011 when he took a break on work to focus on his education while attending Florida Atlantic University. At which point he returned to the Man Con team as a project manager and has proved himself as one of the go people in the organization and currently serves as the Vice President of Man Con Inc. Anthony brings with him a wealth of knowledge in multiple areas of utility and heavy civil in both the public and private sectors where he has been actively involved with construction operations for the past 15 years. Which have included multi design-build projects, Directional Drilling Operations, Lining of Existing Utilities, Open and Deep Cut utility installation, roadway and hardscape paving operations.

EXPERIENCE:

VICE PRESIDENT

MAN-CON INCORPORATED | DEC 2017 TO CURRENT

PROJECT MANAGER

MAN-CON INCORPORATED | DEC 2013 - DEC 2017

Responsible for the Projects and overall performance including all aspects from project award to project close out.

HALVORSEN HOLDINGS | DEC 2011 - DEC 2013

Acquisitions, Dispositions, Construction Management of Commercial Real Estate.

FOREMAN

MAN-CON INCORPORATED | DEC 2005 - DEC 2011

Worked on multiple sanitary sewers, water, drainage, and road building projects in South Florida and gained experience in all aspects of construction from project start-up through final restoration.

EDUCATION:

BACHELOR of BUSINESS ADMINISTRATION:

FINANCE - FLORIDA ATLANTIC UNIVERSITY | 2013

CLIENT REFERENCE'S

- Mike Hagerty, P.E., LEED AP
Broward County WWS
Phone: (954) 831-3217
Email: mhagerty@broward.org
- Aaron Cutler, Vice President of Construction
Baxter & Woodman
Phone: (561)655-6175
Email: Acutler@baxterwoodman.com

Notable Projects:

Central Seacrest Corridor Utility Improvements | City of Boynton Beach | Project Manager

- Storm Water System Upgrade including 5,210 LF of Exfiltration Trench
- 8" DI Water Main Replacement 26,933 LF
- 66,823 SY of Pavement Overlay
- 14,355 SY of Driveway Apron Restoration
- 264 Rear to Front Transfers and Connection

Avenue "O" Neighborhood Infrastructure Improvements | City of Riviera Beach | Project Manager

- 6,791 LF RCP Drainage Installation Sizes 15" – 16" DI
- 1,144 LF Remove and Replace Existing Sanitary Sewer Pipe
- 12,708 LF Furnish and Install DIP Main Pipe, Including Remove Asbestos and Grout Abandonment
- 6,761 LF Re-line Existing Sanitary Sewer
- Water Service Relocation from Rear to Front of Properties
- Complete Right of Way to Right of Way Replacement of Paved Surface, Demo and Re-Construct all Concrete Sidewalk and Driveway Aprons

Pines Village Water Main Improvements – Phase I | City of Pembroke Pines | Project Manager

- Installation of Approximately 20,000 LF of 6", 8" & 12" Water Mains, Including Asphalt Trench Repairs
- 9,929 LF Abandonment of Existing Water Main
- 191 EA Water Services
- 365 EA Rear to Front Meter Relocations

Utility Analysis Zone 122 | Broward County Water and Wastewater Services | Project Manager

- Construct 27,630 LF of 4", 6", 8", 10", 12", and 16" Water Main and Appurtenances including Abandonment of existing Mains and 2" Water Services
- Construct 16,666 LF of 8", 10", 12" and 14" Sanitary Sewer Main and Appurtenances including Abandonment or Removal of Existing Mains, New Lift Station, Demo and Removal of two existing lift stations, 1,600 LF of Force Main, CIPP lining of existing Sanitary Sewer, Rehabilitation of existing Sanitary Sewer Manholes.
- Horizontal Directional Drill Installation of 8" and 12" Water Mains and Force Mains crossing existing Canals and under Oakland Park Blvd.
- Complete Roadway Re-Construction and Realignment throughout existing Multifamily Development
- Tree Removal and Replacement of all disturbed Sod and Landscape

Main Office:

3460 S.W. 11th Street
Deerfield Beach, Florida 33442
O: 954-427-0230
F: 954-427-8133

Palm Beach County Office:

3020 Fairlane Farms Road
Suite 1, Wellington, Florida
33414



INCORPORATED

MAN CON INCORPORATED

EQUIPMENT LIST

EQUIPMENT #	TYPE	YEAR	MODEL - MFR	SERIAL NUMBER - ID
201	GRADER	1996	CAT 135 H	3YX00143
203	ROLLER	2000	DYNAPAC CC122	60114971
204	ROLLER	1996	DYNAPAC CC102	600111930
209	TRACTOR		INTERNATIONAL 2500	2340062U202141
211	BROOM TRACTOR	1997	MASSEY FERGUSON 253	D51163
214	COMBO	2004	CAT 420D	FDP14988
215	COMBO	2005	CAT 420D IT	CBLN11506
216	LOADER	2006	CAT 262B SKID	0262BJPDT02887
217	LOADER	2003	938G SER 2	CRD00824
218	LOADER	1999	938G	4YS00883
223	BACKHOE	2006	KOMATSU PC 308	30050
229	BACKHOE	2004	KOMATSU PC138 USLC-2	1345
231	MILLING MACHINE	2006	ASPHALT ZIPPER AZ 500	50000177
233	GENERATOR	2005	WACKER	5560437
234	PUMP	1994	SLOAN 6"	1322
235	PUMP	1999	THOMPSON 12"	V-654
236	PUMP	1997	THOMPSON 12"	V-661
243	PUMP	1989	THOMPSON JET 4"	4J-116
244	COMPRESSOR		HATZ DIVE	
245	COMPRESSOR		SULLIVAN AIR	D185Q5
246	WELDER		MILLER BIG 50	KD372275
248	LOADER	2008	JD 544J	DW544JZ617435
249	BROOM TRACTOR	2005	MASSEY FERGUSON MF461-2	EN24027
251	INGRAM ROLLER	1988	3 WHEEL	588648 EB 14
252	ROLLER	2007	DYNAPAC 134D	81270186
253	MINI EXCAVATOR	2011	CAT 305-5DCR	FLZ00474
254	WHEEL LOADER	2012	CAT 924K	PWR00814
255	COMPACT TRACK LOADER	2014	BOBCAT T110	AE0H11925
256	WACKER REVERSESIBLE PLATE COMPACTOR	2014	BPU4045A	10373520
259	COMPACT TRACK LOADER	2016	CAT 299 D2	FD 200514
260	KOMATSU HYDR. EXCAVATOR	2016	PC138USLC-11	50176
261	JOHN DEERE	2016	644K LOADER	1DW644KZTGF674436
262	COMPACT TRACK LOADER	2018	CAT 279D	GTL05809
263	TRACK EXCAVATOR	2018	CAT 336FL	RKB20749
264	CAT MINI EXCAVATOR	2019	CAT 301.7	JH700962
265	Double Drum Compactor Roller	2020	CAT CB22B	2B200416
266	MILLING MACHINE	2005	ASPHALT ZIPPER 360-185A	AZ0588R
267	CAT MINI EXCAVATOR	2022	CAT 306	6G605538
	SKID-PACK COMPACTOR			
	WACKER REVERSESIBLE PLATE COMPACTOR			DPU504514
	6X14 TRENCH BOX			132259
	ARIES SEEKER PUSH CAMERA			6072801
	PIPE LASER	2012	TRIMBLE DG711	23369
	WACKER REVERSESIBLE PLATE COMPACTOR		BPU3545A	1761031
	WACKER REVERSESIBLE PLATE COMPACTOR	2016	DPU5545HE	10631585

FORM 4

VENDOR REFERENCE FORM

City of Hollywood

Solicitation #:

Reference for:

Organization/Firm Name providing reference:

Organization/Firm Contact Name: Title:

Email: Phone:

Name of Referenced Project: Contract No:

Date Services were provided: Project Amount:

Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/ Subconsultant

Would you use the Vendor again? ☒ Yes ☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

See attached Project Reference Sheet.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

Man Con works well with Municipal Staff and are excellent at addressing residents concerns.

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:				Title:	

	Department:		Date:	
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**INCORPORATED****Project Construction - Reference**

PROJECT NAME: Terra Mar Drive Drainage Improvements

MAN CON JOB #: 365

OWNER: Lauderdale-by-the-Sea

Contact: Ken Rubach

Address: 4501 N. Ocean Blvd
Lauderdale-by-the-Sea, FL 33308

PH #: 954-640-4233

FX #:

Email: KenR@lbts-fl.gov

Duration:	78	Total Days	Start	November 2, 2020
Schedule Compliance:		Yes	Finish	January 19, 2021
Cost:	Original	\$1,014,387.39	Final	\$1,026,188.07
Budget Compliance:		Yes		

Project Description:

This project was to provide improvements to the existing drainage system in the Terra Mar Neighborhood to help reduce flooding of the roadways during large rain events. This was accomplished through the installation of 12" to 36" diameter gravity storm drainage piping, and new drainage structures which included catch basins and manholes. Following by a new pavement driving surface and associated vegetative restoration.

This project include the following critical scopes of work:

Installation of 1,300 linear feet of 12"-36" diameter Storm Drainage Pipe

Installation of 10 Storm Drainage Structures

Installation of 2 inline check valves

Repair of 5 sanitary sewer laterals

Key Project Personnel:

Carl Morsch, Project Manager

Jeffrey J. Mancini, General Superintendent

Luke Mancini, Project Superintendent

FORM 4

VENDOR REFERENCE FORM

City of Hollywood

Solicitation #:

REQ-039-23-JJ

Reference for:

2023 Drainage Infrastructure Improvements

Organization/Firm Name providing reference:

Broward County WWS

Organization/Firm

Mike Hagerty

Title:

Project Manager

Contact Name:

Email:

mhagerty@broward.org

Phone:

954-831-3217

Name of
Referenced
Project:

Hillsboro Pines Neighborhood Project

Contract
No:

Y1380003C1

Date Services were
provided:

07/05/2016 - 02/28/2017

Project
Amount:

\$6,681,882.94

Referenced
Vendor's role in
Project:

☒ Prime Vendor

☐ Subcontractor/ Subconsultant

Would you use the
Vendor again?

☒ Yes

☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

See Project Reference Form.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

THIS CONTRACTOR COMPLETED A VERY DIFFICULT PROJECT ON SCHEDULE AND WITHIN BUDGET. FINAL WORK PRODUCT WAS HIGH QUALITY.

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:			Title:		



INCORPORATED

Project Construction - Reference

PROJECT NAME: Hillsboro Pines Neighborhood Project, #Y1380003C1

MAN CON JOB #: 325

OWNER: Broward County WWS

Contact: Mike Hagerty, Project Manager

Address: 2555 W. Copans Road
Pompano Beach, FL 33069

PH #: 954-831-3217

FX #:

Email: mhagerty@broward.org

Duration:	263	Total Days		Start	July 5, 2016
Schedule Compliance:		Yes		Finish	February 28, 2017
Cost:	Original	\$6,476,264.40		Final	\$6,681,882.94
Budget Compliance:		Yes			

Project Description:

Furnished & Installed 12,735 LF of 8" Sanitary Sewer

Furnished & Installed 3,592 LF of 4" Force Main

Furnished & Installed 3,562 LF of 6" Water Main

Furnished & Installed 1,108 LF of 10" Water Main

Furnished & Installed RCP (Drainage) :

15" - 48" 5,738 LF and 84 Drainage Structures

Furnished & Installed Exfiltration Pipe:

15" 1,361 LF - 18" 305 LF and 36" 1065 LF

3,000LF 24" Reclaimed FM

Liftstations

Reconstruction of Roadway

Sodding

Swales

Water Quality Control Structures

All work performed within the Broward County Right of Way

Man-con Incorporated Key Employee's for this project:

Michael F. Iacobelli, Senior Project Manager

Jeffrey J. Mancini, General Superintendent

Kevin Rutherford, Project Superintendent

Anthony Mancini, Project Manager

Luke Mancini, Roadway & Site Superintendent

FORM 4

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: REQ-039-23-JJ
Reference for: 2023 Drainage Infrastructure Improvements

Organization/Firm Name providing reference: Seminole Tribe of Florida
Organization/Firm Contact Name: James Rabideau Title: Project Manager
Email: James.Rabideau@jacobs.com Phone: 561-248-4098
Name of Referenced Project: Seminole Park Site Development Contract No: 3880039902
Date Services were provided: 11/2019 - 12/2020 Project Amount: \$10,906,590.14
Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/ Subconsultant
Would you use the Vendor again? ☒ Yes ☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):
See attached Reference Sheet.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
g. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
g. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
e. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):
We were very satisfied with Man Con's work for both the field and the management of the project.

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail: <input type="checkbox"/>
Verified by:	Name:				Title:
	Department:				Date:



INCORPORATED

Project Construction - Reference

PROJECT NAME: Seminole Park Site Development

MAN CON JOB #: 349

OWNER: Seminole Tribe of Florida

Contact: James Rabideau

Address: 6300 Sterling Road
Hollywood, FL 33024

PH # 561-248-4098

FX #

Email James.Rabideau@jacobs.com

Duration:	426	Total Days		Start	11/2019
Schedule Compliance:		Yes		Finish	12/2020
Cost:	Original	\$10,574,677.60		Final	\$10,906,590.14
Budget Compliance:		Yes			

Project Description:

Project Site Development including 53,200 CY of Mass Excavation, 124,800 CY of Embankment from On-site and Imported Materials, 18,300 SY of Asphalt Paving, 22,000 SY of 8" Limerock Base, 23,900 SY of LBR 40 Stabilized Subgrade, 6,680 SY of Concrete Sidewalk, Irrigation and Vegetative Restoration.

Utility Installation of 6,556 LF of 12"-48" RCP and HDPE Drainage Pipe, 64 drainage structures, 5,280 LF of 8" C-900 Water Main, 1,455 LF of 12" C-900 Water Main, 76 Single Water Services, 1,191 LF of 8" SDR26 Sanitary Sewer Main, 3,354 LF of 10" SDR26 Sanitary Sewer Main, 19 Sanitary Sewer Manholes, 76 Sewer Lateral Services.

Man-Con Incorporated Key Employee's for this project:

Jeffrey J. Mancini, General Superintendent

Anthony J. Mancini, Project Manager

Michael Iacobelli, Senior Project Manager

Kevin Rutherford, Project Superintendent

C. Eric Moulton, Restoration Superintendent

FORM 7

SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY
PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS

1. This form statement is submitted to the City of Hollywood by Anthony Mancini, Vice President for Man-Con Incorporated
(Print individual's name and title) (Print name of entity submitting sworn statement)
whose business address is
3460 SW 11th St., Deerfield Beach, FL 33442
and if applicable its Federal Employer Identification Number (FEIN) is 59-2547432. If the
entity has no FEIN, include the Social Security Number of the individual signing this sworn
statement.

2. I understand that "public entity crime," as defined in paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misinterpretation.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in an federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that "Affiliate," as defined in paragraph 287.133(1)(a), Florida Statutes, means:
 1. A predecessor or successor of a person convicted of a public entity crime, or
 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
- 5 I understand that "person," as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the

United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

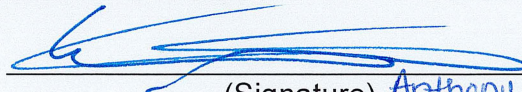
X Neither the entity submitting sworn statement, nor any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime, but the Final Order entered by the Hearing Officer in a subsequent proceeding before a Hearing Officer of the State of the State of Florida,

Division of Administrative Hearings, determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the Final Order).

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017 FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

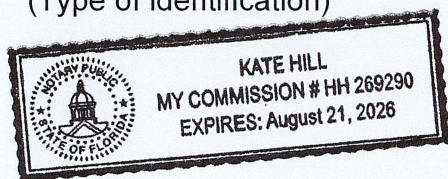

(Signature) Anthony Mancini

Sworn to and subscribed before me this 22nd day of February, 2023.

Personally known X

Or produced identification _____ Notary Public-State of FL

(Type of identification) my commission expires 8/21/26



Kate Hill
(Printed, typed or stamped commissioned name of notary public)

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.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Man-Con Incorporated	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ 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. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 3460 SW 11th Street	Requester's name and address (optional)
6 City, state, and ZIP code Deerfield Beach, FL 33442	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

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

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

Social security number									
				-			-		
or									
Employer identification number									
5	9	-	2	5	4	7	4	3	2

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

Signature of
U.S. person ►

Date ► 2/22/23

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.

By signing the filled-out form, you:

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

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities C—

A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a) J—

A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor [*]
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

FORM 12

TRENCH SAFETY

This form must be completed and signed by the Respondent.

Failure to complete this form may result in the solicitation being declared non-responsive.

Respondent acknowledges that the Florida Trench Safety Act, Section 553.60 et. seq., which became effective October 1, 1990, shall be in effect during the period of construction of the project. The respondent by signing and submitting the solicitation is, in writing, assuring that it will perform any trench excavation in accordance with applicable trench safety standards. The respondent further identifies the following separate item of cost of compliance with the applicable trench safety standards as well as the method of compliance:

Method of Compliance

Cost

Total \$ \$30,000

Respondent acknowledges that this cost is included in the applicable items of their submittal and in the Grand Total Solicitation Price. Failure to complete the above will result in the solicitation being declared non- responsive.

The Respondent is, and the Owner and Engineer are not, responsible to review or assess Respondent's safety precautions, programs or costs, or the means, methods, techniques or technique adequacy, reasonableness of cost, sequences or procedures of any safety precaution, program or cost, including but not limited to, compliance with any and all requirements of Florida Statute Section 553.60 et. seq. cited as the "Trench Safety Act." Respondent is, and the owner and Engineer are not, responsible to determine if any safety related standards apply to the project, including but not limited to, the "Trench Safety Act."

Kate Hill
Witness Signature

Kate Hill

Witness Printed Name
3460 SW 11th St.

Deerfield Beach, FL 33442

Witness Address

2/22/23

Date

Anthony Mancini
Contractor's Signature

Anthony Mancini

Printed Name

Vice President

Title

2/22/23

Date

- END OF SECTION -

Form 13

Bid Guaranty Form

(Construction)

STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we Man-Con, Incorporated, as Principal, and Westfield Insurance Company, as

Surety, are held and firmly bound unto the City of Hollywood in the sum of _____

FIVE PERCENT OF BID AMOUNT Dollars (\$ 5% of Bid Amount) lawful money

of the United States, amounting to 5% of the total SOLICITATION Price, for the payment of said sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has submitted the accompanying SOLICITATION, dated February 22nd, 2023 for

**YEAR 2023 DRAINAGE INFRASTRUCTURE
IMPROVEMENTS**

IFB-039-23-JJ

NOW, THEREFORE, if the principal shall not withdraw said SOLICITATION within 90 days after date of the same and shall within ten days after the prescribed forms are presented to him for signature, enter into a written contract with the CITY, in accordance with the SOLICITATION as accepted, and give bond with good and sufficient surety or sureties, and provide the necessary Insurance Certificates as may be required for the faithful performance and proper fulfillment of such Contract, then this obligation shall be null and void.

Approved SOLICITATION Bond

In the event of the withdrawal of said SOLICITATION within the specified period, or the failure to enter into such contract and give such bond and insurance within the specified time, the principal and the surety shall pay to the City of Hollywood the difference between the amount specified in said SOLICITATION and such larger amount for which the City of Hollywood may in good faith contract with another party to perform the work and/or supply the materials covered by said SOLICITATION.

IN WITNESS WHEREOF, the above bound parties have executed this statement under their several seals this _____ 22nd _____ day of _____ February _____ 2023, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

WHEN THE PRINCIPAL IS AN INDIVIDUAL:

Signed, sealed and delivered in the presence of:

Witness

Signature of Individual

Address

Printed Name of Individual

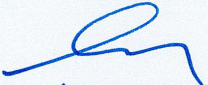
Witness

Address

Approved SOLICITATION Bond

WHEN THE PRINCIPAL IS A CORPORATION:

Attest:


Secretary Luke Mancini

Man-Con, Incorporated
Name of Corporation

3460 SW 11th Street,
Business Address

Deerfield Beach, FL 33442

By: 
(Affix Corporate Seal)

Anthony Mancini
Printed Name

Vice President
Official Title

CERTIFICATE AS TO CORPORATE PRINCIPAL

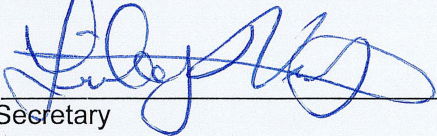
I, Luke Mancini, certify that I am the secretary of the Corporation named as Principal in the attached bond; that Anthony Mancini who signed the said bond on behalf of the Principal, was then Vice President of said Corporation; that I know his signature, and his signature thereto is genuine and that said bond was duly signed, sealed and attested for and on behalf of said Corporation by authority of its governing body.


(SEAL)
Secretary Luke Mancini

Approved SOLICITATION Bond

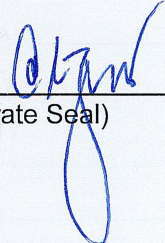
TO BE EXECUTED BY CORPORATE SURETY:

Attest:


Secretary

Westfield Insurance Company
Corporate Surety

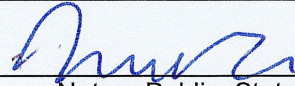
P.O. Box 5001
Business Address
Westfield Center, OH 44251

BY: 
(Affix Corporate Seal)

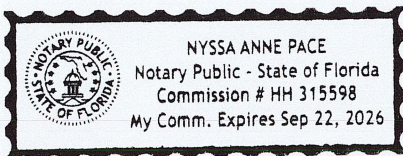
Angelo G. Zervos
Attorney-in-Fact
ZGI, LLC dba ZERVOS GROUP, INC
Name of Local Agency
4443 Lyons Road, Suite D-212
Business Address
Coconut Creek, FL 33073

STATE OF FLORIDA

Before me, a Notary Public, duly commissioned, qualified and acting, personally appeared,
Angelo G. Zervos to me well known, who being by me first duly sworn upon
oath says that he is the attorney-in-fact for the Westfield Insurance Company and
that the has been authorized by Westfield Insurance Company to execute the forgoing
bond on behalf of the CONTRACTOR named therein in favor of the City of Hollywood, Florida.
Subscribed and sworn to before me this 22nd day of February, 2023


Notary Public, State of Florida

My Commission Expires: September 22, 2026



- END OF SECTION-

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 12/07/22, FOR ANY PERSON OR PERSONS NAMED BELOW.

POWER NO. 0995602 00

General
Power
of Attorney

**Westfield Insurance Co.
Westfield National Insurance Co.
Ohio Farmers Insurance Co.**

Westfield Center, Ohio

CERTIFIED COPY

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint
ANGELO G. ZERVOS, COURTNEY SAUNDERS, JOINTLY OR SEVERALLY

of **SOUTHFIELD** and State of **MI** 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, recognizances, undertakings, or other instruments or contracts of suretyship in any penal limit.**

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be It Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000).

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their **National Surety Leader** and **Senior Executive** and their corporate seals to be hereto affixed this **07th** day of **DECEMBER** A.D., **2022**.

Corporate
Seals
Affixed



WESTFIELD INSURANCE COMPANY
WESTFIELD NATIONAL INSURANCE COMPANY
OHIO FARMERS INSURANCE COMPANY

By:

Gary W. Stumper, National Surety Leader and
Senior Executive

State of Ohio
County of Medina ss.:

On this **07th** day of **DECEMBER** A.D., **2022**, before me personally came **Gary W. Stumper** to me known, who, being by me duly sworn, did depose and say, that he resides in **Medina, OH**; that he is **National Surety Leader** and **Senior Executive** of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial
Seal
Affixed



State of Ohio
County of Medina ss.:

David A. Kotnik, Attorney at Law, Notary Public
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, **Frank A. Carrino**, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this **22nd** day of **February** A.D., **2023**.



Frank A. Carrino, Secretary

Form 14

LIST OF SUBCONTRACTORS

The Respondent shall list below the name and address of each Subcontractor who will perform work under this Contract, and shall also list the portion of the work which will be done by such Subcontractor. After the opening of Submittals, changes or substitutions will be allowed with written approval of the City of Hollywood. Subcontractors must be properly licensed.

	Work to be Performed	Subcontractor's Name / Address
1.	Asphalt & Milling	Rapid Milling & Paving 2240 NW 22 Street, Pompano Beach, FL 33069
2.	Concrete Flatwork	Homestead Concrete & Drainage 221 SW 4th Ave., Homestead, FL. 33030
3.	CCTV, Cleaning & Lining	Cobra Environmental 15896 Mellen Ln., Jupiter, FL 33478
4.		
5.		
6.		
7.		
8.		
9.		
10.		

NOTE: Attach additional sheets if required.

- END OF SECTION -

ACORDTM**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

2/15/23

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

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

PRODUCER ZERVOS GROUP INC 24724 Farmbrook P O Box 2067 Southfield, MI 48037-2067	CONTACT NAME: Nyssa A Pace PHONE (A/C, No, Ext): 248 355-4411 FAX (A/C, No): 248 355-2175 E-MAIL ADDRESS: nyssa@zervosgroup.com														
INSURED MAN-CON INC 3460 SW 11th St Deerfield Beach, FL 33442-8137	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Valley Forge Insurance Company</td> <td>20508</td> </tr> <tr> <td>INSURER B : National Fire Insurance of Hartford</td> <td>20478</td> </tr> <tr> <td>INSURER C : The Continental Insurance Company</td> <td>35289</td> </tr> <tr> <td>INSURER D : Evanston Insurance Company</td> <td>35378</td> </tr> <tr> <td>INSURER E : AGCS Marine Insurance Company</td> <td>22837</td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Valley Forge Insurance Company	20508	INSURER B : National Fire Insurance of Hartford	20478	INSURER C : The Continental Insurance Company	35289	INSURER D : Evanston Insurance Company	35378	INSURER E : AGCS Marine Insurance Company	22837	INSURER F :	
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INSURER D : Evanston Insurance Company	35378														
INSURER E : AGCS Marine Insurance Company	22837														
INSURER F :															

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	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 <input checked="" type="checkbox"/> Contractual <input checked="" type="checkbox"/> X, C, & U GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X	X	2077256991	07/31/2022	07/31/2023	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY	X	X	2095076554	07/31/2022	07/31/2023	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> RETENTION \$0	X	X	2095076568	07/31/2022	07/31/2023	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	2077257008	07/31/2022	07/31/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D	Pollution	X	X	CPLMOL107467	07/31/2021	07/31/2023	\$2,000,000/\$4,000,000
E	Lease/Rented Equi			SML93021954	07/31/2022	07/31/2023	\$150,000
E	Install Floater			SML93021954	07/31/2022	07/31/2023	\$350,000/\$1,000 Ded.

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

RE: Bid, Req-039-23-JJ - 2023 Drainage Infrastructure Improvements

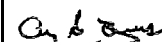
The City of Hollywood is included as an additional insured with respects to the General Liability and Auto policies, when required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

The City of Hollywood
 2600 Hollywood Blvd. PO Box
 229045
 Hollywood, FL 33022

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



FORM 16

PROPOSAL

TO THE MAYOR AND COMMISSIONERS
CITY OF HOLLYWOOD, FLORIDA

SUBMITTED Man-Con Incorporated

Dear Mayor and Commissioners:

The undersigned, as BIDDER, hereby declares that the only person or persons interested in the Proposal as principal or principals is or are named herein and that no other person than herein mentioned has any interest in this Proposal or in the Contract to be entered into; that this Proposal is made without connection with any other person, company or parties making a Bid or Proposal; and that it is in all respects fair and in good faith without collusion or fraud.

The BIDDER further declares that he has examined the site of the Work and informed himself fully in regard to all conditions pertaining to the place where the Work is to be done; that he has examined the Drawings and Specifications for the Work and contractual documents relative thereto, including the Notice to Bidders, Instructions to Bidders, Proposal Bid Form, Form of Bid Bond, Form of Contract and Form of Performance Bond, General, Supplementary and Technical Specifications, Addenda, Drawings, and Local Preference Program, Exhibit A, and has read all of the Provisions furnished prior to the opening of bids; and that he has satisfied himself relative to the work to be performed.

The undersigned BIDDER has not divulged to, discussed or compared his bid with other bidders and has not colluded with any other BIDDER of parties to this bid whatever.

If this Proposal is accepted, the undersigned BIDDER proposes and agrees to enter into and execute the Contract with the City of Hollywood, Florida, in the form of Contract specified; of which this Proposal, Instructions to Bidders, General Specifications, Supplementary Conditions and Drawings shall be made a part for the performance of Work described therein; to furnish the necessary bond equal to one hundred (100) percent of the total Contract base bid, the said bond being in the form of a Cash Bond or Surety Bond prepared on the applicable approved bond form furnished by the CITY; to furnish all necessary materials, equipment, machinery, tools, apparatus, transportation, supervision, labor and all means necessary to construct and complete the work specified in the Proposal and Contract and called for in the Drawings and in the manner specified; to commence Work on the effective date established in the "Notice to Proceed" from the ENGINEER; and to substantially complete all Contract Work within 30 days with final completion within 45 days, and stated in the "Notice to Proceed" or pay liquidated damages for each calendar day in excess thereof, or such actual and consequential damages as may result therefrom, and to abide by the Local Preference Ordinance, Exhibit A.

The BIDDER acknowledges receipt of the following addenda:

No. <u>1</u>	Dated <u>2/15/23</u>
No. <u>2</u>	Dated <u>2/15/23</u>
No. _____	Dated _____

And the undersigned agrees that in case of failure on his part to execute the said Contract and the Bond within ten (10) days after being presented with the prescribed Contract forms, the check or Bid Bond accompanying his bid, and the money payable thereon, shall be paid into the funds of the City of Hollywood, Florida, otherwise, the check or Bid Bond accompanying this Proposal shall be returned to the undersigned.

Attached hereto is a certified check on the

_____ Bank of _____

or approved Bid Bond for the sum of

5% of bid amount Dollars (\$) according to the conditions under the Instructions to Bidders and provisions therein.

NOTE: If a Bidder is a corporation, the legal name of the corporation shall be set forth below, together with signature(s) of the officer or officers authorized to sign Contracts on behalf of the corporation and corporate seal; if Bidder is a partnership, the true name of the firm shall be set forth below with the signature(s) of the partner or partners authorized to sign Contracts in behalf of the partnership; and if the Bidder is an individual, his signature shall be placed below; if a partnership, the names of the general partners.

WHEN THE BIDDER IS AN INDIVIDUAL:

(Signature of Individual)

(Printed Name of Individual)

(Address)

WHEN THE BIDDER IS A SOLE PROPRIETORSHIP OR OPERATES UNDER A TRADE NAME:

(Name of Firm)

(Address)

(Signature of Individual) (SEAL)

WHEN THE BIDDER IS A PARTNERSHIP:

(Name of Firm) A Partnership

(Address)

By: _____
(SEAL)
(Partner)

Name and Address of all Partners:

WHEN THE BIDDER IS A JOINT VENTURE:

(Correct Name of Corporation)

By: _____ (SEAL)
(Address)

(Official Title)

As Joint Venture
(Corporate Seal)

Organized under the laws of the State of _____, and authorized by the law to make this bid and perform all Work and furnish materials and equipment required under the Contract Documents.

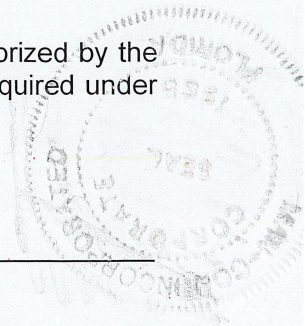
WHEN THE BIDDER IS A CORPORATION:

Man-Con Incorporated

(Correct Name of Corporation)

By: _____
(SEAL)

Anthony Mancini, Vice President



(Official Title)
3460 SW 11th Street
Deerfield Beach, FL 33442

(Address of Corporation)

Organized under the laws of the State of Florida, and authorized by the law to make this bid and perform all Work and furnish materials and equipment required under the Contract Documents.

CERTIFIED COPY OF RESOLUTION OF
BOARD OF DIRECTORS

Man-Con Incorporated

(Name of Corporation)

RESOLVED that Anthony Mancini

(Person Authorized to Sign)

Vice President of Man-Con Incorporated

(Title) (Name of Corporation)

be authorized to sign and submit the Bid or Proposal of this corporation for the following project:

YEAR 2023 DRAINAGE INFRASTRUCTURE IMPROVEMENTS

ECSD Project No. - 11058

Bid No. IFB-039-23-JJ

The foregoing is a true and correct copy of the Resolution adopted by

Man-Con Incorporated at a meeting of its Board of

(Name of Corporation)

Directors held on the 15th day of February, 2023.

By: [Signature]

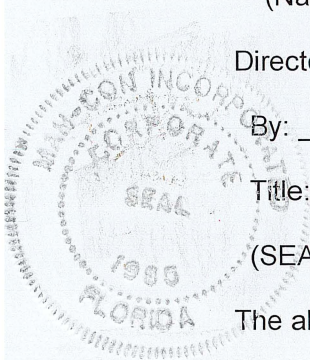
Luke Mancini

Title: Secretary

(SEAL)

The above Resolution MUST BE COMPLETED if the Bidder is a Corporation.

- END OF SECTION -



FORM 1

SUBMITTAL CHECKLIST FORM

The items below are required components of your solicitation response in order for your bid/proposal/submittal to be consider responsive and responsible. Please complete and submit this submittal checklist form as the cover page of your submittal with all of the items below in the order listed.

Please indicated Yes or No in the “Submitted (Yes/No)” column below to indicated which required components were provided with your submittal.

Submitted (Yes/No)	Required Bid Components
Yes	This Submittal Checklist Form completed and included as the cover page of your submittal.
Yes	A Table of Contents that clearly identifies each section and page number of your submittal.
Yes	Information and/or documentation that addresses and/or meets the requirements outlined in Section III – Scope of Work/Services, including any procedural or technical enhancements/innovations which do not materially deviate from the objectives or required content of the Scope of Work/Services.
Yes	Forms (Completed) Form 1 Submittal Checklist Form* Form 2 Acknowledgement and Signature Page Form 3 Bid Form* Form 4 Vendor Reference Form* Form 5 Hold Harmless and Indemnity Clause Form 6 Non-Collusion Affidavit Form 7 Sworn Statement...Public Entity Crimes Form 8 Certifications Regarding Debarment... Form 9 Drug-Free Workplace Program Form 10 Solicitation, Giving, and Acceptance... Form 11 W-9 (Request for Taxpayer Identification) Form 12 Trench Safety Form Form 13 Bid Guaranty Form Form 14 List of Subcontractors Form 15 Information Required from Bidders Form 16 Proposal
Yes	Certificate(s) of insurance that meet the requirements of Section 2.25
Yes	Proof of State of Florida Sunbiz Registration

This checklist is only a guide, please read the entire solicitation to ensure that your submission includes all required information and documentation.

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FORM 2

ACKNOWLEDGMENT AND SIGNATURE PAGE

This form must be completed and submitted by the date and the time of bid opening.

Legal Company Name (include d/b/a if applicable): Man-Con Incorporated

If Corporation - Date Incorporated/Organized: 1/31/1985 Federal Tax Identification Number: 59-2547432

State Incorporated/Organized: FL

Company Operating Address: 3460 SW 11th Street

City: Deerfield Beach State: FL Zip Code: 33442

Remittance Address (if different from ordering address):

City: _____ State: _____ Zip Code: _____

Company Contact Person: Anthony Mancini Email Address: Anthony@mancon.ws

Phone Number (include area code): 954-427-0230 Fax Number (include area code): 954-427-8133

Company's Internet Web Address: mancon.ws

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER/PROPOSER CERTIFIES ACCEPTANCE OF THE TERMS, CONDITIONS, SPECIFICATIONS, ATTACHMENTS AND ANY ADDENDA. THE BIDDER/PROPOSER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF THIS SOLICITATION. BIDDER/PROPOSER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR THE PERIOD OF TIME STATED IN THE SOLICITATION.

Bidder/Proposer's Authorized Representative's Signature:  Date: 2/22/23

Type or Print Name: Anthony Mancini

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER/PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID/PROPOSAL NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID/PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER/PROPOSER TO THE TERMS OF ITS OFFER.

SUBMISSION

How to submit bids/proposals: Vendor's solicitation response may be submitted electronically through OpenGov , the City's designated electronic bidding system, or by mail or hand delivery to the address noted above. It is the Vendor's sole responsibility to assure its response is submitted and received by the date and time specified in the solicitation. Any timeframe references are in Eastern Standard Time. The official time for electronic submittals is OpenGov 's servers, as synchronized with the atomic clock. All parties without reservation will accept the official time.

Important Notice:

The Procurement Services Division shall distribute all official changes, modifications, responses to questions or notices relating to the requirements of this document. Any other information of any kind from any other source shall not be considered official, and bidders relying on other information do so at their own risk.

The responsibility for submitting a bid/proposal on or before the time and date is solely and strictly the responsibility of the bidder/proposer, the City will in no way be responsible for delays caused by technical difficulty or caused by any other occurrence. No part of a bid/proposal can be submitted via FAX or via direct Email to the City. No variation in price or conditions shall be permitted based upon a claim of ignorance.

7. PRICING (BID FORM)

The City is seeking bids/proposals from qualified vendors for the items listed below in accordance with the terms, conditions, and specifications contained in this solicitation.

Estimated quantities listed are for information and tabulation purposes only. No warranty or guarantee of quantities needed is given or implied. It is understood that the Contractor will furnish the City's needs as they arise.

TABLE 1

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Mobilization for On-call Routine Task Order (\leq \$50,000) Not to Exceed 7% of Task Order	5	EA		
				\$3,500.00	\$ 17,500.00
2	Mobilization for On-call Routine Task Order ($>$ \$50,000 to \$100,000) Not to Exceed 6% of Task Order	10	EA		
				\$4,500.00	\$ 45,000.00
3	Mobilization for On-call Routine Task Order ($>$ \$100,000 to \$400,000) Not to Exceed 5% of Task Order	10	EA		
				\$12,500.00	\$ 125,000.00
4	Mobilization for On-call Routine Task Order (\geq \$400,000) Not to Exceed 4% of Task Order	5	EA		
				\$16,000.00	\$ 80,000.00
5	Expedited Mobilization (within 24 hours of request) ($<$ \$100,000) Not to Exceed 8% of Task Order	5	EA		
				\$8,000.00	\$ 40,000.00
6	Expedited Mobilization (within 24 hours of request) (\geq \$100,000) Not to Exceed 6% of Task Order	5	EA		
				\$18,000.00	\$ 90,000.00
7	Traffic Control Officer (FDOT Pay Item No. 102-14)	100	HR		
				\$110.00	\$ 11,000.00
8	F&I Work Zone Sign (FDOT Pay Item No. 102-60)	1,500	DAY		
				\$4.00	\$ 6,000.00
9	F&I Temporary Barrier (formerly "Temporary Barrier Wall"), Low Profile, Concrete (FDOT Pay Item No. 102-71-13)	1,000	LF		
				\$44.00	\$ 44,000.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
10	F&I Temporary Barrier (formerly "Temporary Barrier Wall"), Anchored (FDOT Pay Item No.102- 71-15)	1,000	LF	\$31.50	\$ 31,500.00
11	F&I Channelizing Device, Types I, II, DI, VP, Drum, or LCD (FDOT Pay Item No. 102-74-1)	2,500	DAY	\$4.00	\$ 10,000.00
12	F&I Type III Barricade (FDOT Pay Item NO 102-115)	500	DAY	\$7.00	\$ 3,500.00
13	F&I Arrow Board/Advance Warning Arrow Panel (FDOT Pay Item No. 102-76)	50	DAY	\$66.00	\$ 3,300.00
14	Temporary Raised/Retroreflective Pavement Marker, Type D (FDOT Pay Item No. 102-78-1)	50	EA	\$15.00	\$ 750.00
15	F&I Temporary Portable Changeable Message Sign (FDOT Pay Item No. 102-99)	50	DAY	\$96.50	\$ 4,825.00
16	F&I Portable Regulatory Sign (FDOT Pay Item No. 102-150-1)	25	DAY	\$62.00	\$ 1,550.00
17	Sediment Barrier (Silt Fence) (FDOT Pay Item No. 104-10-3)	1,000	LF	\$7.00	\$ 7,000.00
18	Sediment Basin /Containment System for Dewatering (FDOT Pay Item No. 104-7)	100	DAY	\$547.00	\$ 54,700.00
19	Floating Turbidity Barrier (FDOT Pay Item No. 104-11)	1,500	LF	\$20.00	\$ 30,000.00
20	Soil Tracking Prevention Device (FDOT Pay Item No. 104-15)	50	EA	\$769.50	\$ 38,475.00
21	Inlet Protection (FDOT Pay Item No. 104-18)	500	EA	\$156.00	\$ 78,000.00
22	Regular Excavation (FDOT Pay Item No. 120-1)	1,200	CY	\$27.00	\$ 32,400.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
23	Embankment (FDOT Pay Item No. 120-6)	500	CY		
				\$50.50	\$ 25,250.00
24	Flowable Fill (FDOT Pay Item No. 121-70)	150	CY		
				\$347.00	\$ 52,050.00
25	Select Bedding Material (FDOT Pay Item No. 125-3)	50	CY		
				\$104.00	\$ 5,200.00
26	F&I Fill Sand (FDOT Pay Item No. 142-70)	50	CY		
				\$96.00	\$ 4,800.00
27	Geosynthetic Reinforced Soil Slope (FDOT Pay Item No. 145-1)	2,500	SF		
				\$16.00	\$ 40,000.00
28	Painted Pavement Markings, Standard, White, Yellow or Blue, Solid, 6-inches (FDOT Pay Item No. 710-11-101, 710-11-201, OR 710-11-421)	500	LF		
				\$5.00	\$ 2,500.00
29	Painted Pavement Markings, Standard, White or Yellow, Solid for Crosswalk and Roundabout, 12- inches (FDOT Pay Item No. 710-11- 123)	100	LF		
				\$9.00	\$ 900.00
30	Raised Pavement Markers, Type B (FDOT Pay Item No. 706-1-3)	100	EA		
				\$5.00	\$ 500.00
31	Painted Pavement Markings, Standard, White, Solid for Stop Line or Crosswalk (FDOT Pay Item No. 710-11-125)	100	LF		
				\$11.00	\$ 1,100.00
32	Painted Pavement Markings, Standard, White or Yellow Skip, 10- 30 or 3-9 Skip, 6-inches (FDOT Pay Item No. 710-11-131 OR 710-11-231)	100	LF		
				\$8.00	\$ 800.00
33	Painted Pavement Markings, Standard, White or Yellow, Island Nose (FDOT Pay Item No. 710-11- 190 OR 710-11-290)	100	SF		
				\$11.00	\$ 1,100.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
34	Thermoplastic Pavement Markings, Standard, White or Yellow, Solid, 6- inches (FDOT Pay Item No. 711-1A- BCD)	500	LF		
				\$6.00	\$ 3,000.00
35	Thermoplastic Pavement Markings, Standard, White, Solid, 12-inches for Crosswalk and Roundabout (FDOT Pay Item No. 711-11-123)	100	LF		
				\$10.50	\$ 1,050.00
36	Thermoplastic Pavement Markings, Standard, White, Solid, 24-inches for Stopline and Crosswalk (FDOT Pay Item No. 711-11-125)	100	LF		
				\$14.00	\$ 1,400.00
37	Thermoplastic, Remove Existing Thermoplastic Pavement Markings- Surface To Remain (FDOT Pay Item No. 711-17-1)	500	SF		
				\$11.00	\$ 5,500.00
38	Removal of Existing Concrete Pavement (FDOT Pay Item No.110- 4-10)	1,500	SY		
				\$27.50	\$ 41,250.00
39	Utility Pipe, Remove & Dispose, 5-7.9 Inches (FDOT Pay Item No. 1050-16-003)	1,000	LF		
				\$23.50	\$ 23,500.00
40	Utility Pipe, Remove & Dispose, 8-19.9 Inches (FDOT Pay Item No. 1050-16-004)	2,500	LF		
				\$27.50	\$ 68,750.00
41	Utility Pipe, Remove & Dispose, 20-49.9 Inches (FDOT Pay Item No.1050-16-005)	500	LF		
				\$41.00	\$ 20,500.00
42	Utility Pipe, Remove & Dispose, 50 Inches or Larger (FDOT Pay Item No. 1050-16-006)	100	LF		
				\$85.50	\$ 8,550.00
43	Utility Pipe, Plug and Place Out of Service, 5-7.9 Inches (FDOT Pay Item No. 1050-18-003)	100	LF		
				\$35.00	\$ 3,500.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
44	Utility Pipe, Plug and Place Out of Service, 8-19.9 Inches (FDOT Pay Item No. 1050-18-004)	300	LF		
				\$37.00	\$ 11,100.00
45	Utility Pipe, Plug and Place Out of Service, 20-49.9 Inches (FDOT Pay Item No. 1050-18-005)	200	LF		
				\$87.00	\$ 17,400.00
46	Single Post Sign, Remove (FDOT Pay Item No. 700-1-60)	50	EA		
				\$265.50	\$ 13,275.00
47	Milling Exist Asphalt Pavement, 1-Inch Avg Depth, Area (FDOT Pay Item No. 327-70-1)	1,500	SY		
				\$19.50	\$ 29,250.00
48	Concrete Sidewalk and Driveways, 6-Inches Thick (FDOT Pay Item No. 522-2)	500	SY		
				\$90.50	\$ 45,250.00
49	Paver, Architectural, Roadway (FDOT Pay Item No. 526-1-1)	750	SY		
				\$131.50	\$ 98,625.00
50	Paver, Architectural, Sidewalk (FDOT Pay Item No. 526-1-2)	750	SY		
				\$124.00	\$ 93,000.00
51	Reworking / Adding Limerock Base to Existing, 3-Inches (FDOT Pay Item No. 210-1-9)	500	SY		
				\$21.00	\$ 10,500.00
52	Reworking / Adding Limerock Base to Existing, 4-Inches (FDOT Pay Item No. 210-1-8)	500	SY		
				\$23.50	\$ 11,750.00
53	Reworking / Adding Limerock Base to Existing, 6-Inches (FDOT Pay Item No. 210-1-1)	1,500	SY		
				\$27.50	\$ 41,250.00
54	Optional Base, Base Group 04 (FDOT Pay Item No. 285-704)	1,500	SY		
				\$26.00	\$ 39,000.00
55	Superpave Asphaltic Concrete, Traffic B, C, Or E (FDOT Pay Item No. 334-1-12, 334-1-13, OR 334-1-15)	500	Ton		
				\$274.00	\$ 137,000.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
56	Miscellaneous Asphalt Pavement (FDOT Pay Item No. 339-1)	100	Ton		
				\$308.00	\$ 30,800.00
57	Concrete Curb & Gutter, Type E (FDOT Pay Item No. 520-1-7)	50	LF		
				\$56.50	\$ 2,825.00
58	Concrete Curb & Gutter, Type F (FDOT Pay Item No. 520-1-10)	1,000	LF		
				\$54.00	\$ 54,000.00
59	Concrete Curb, Type D (FDOT Pay Item No. 520-2-4)	1,500	LF		
				\$42.00	\$ 63,000.00
60	Valley Gutter- Concrete (FDOT Pay Item No. 520-3)	1,000	LF		
				\$48.00	\$ 48,000.00
61	Ditch Bottom Type C (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-521)	100	EA		
				\$5,600.00	\$ 560,000.00
62	Ditch Bottom Type D (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-541)	20	EA		
				\$5,850.00	\$ 117,000.00
63	Ditch Bottom Type E (Index 232) Less Than 10 Feet (FDOT Pay Item No. 425-1-551)	20	EA		
				\$6,080.00	\$ 121,600.00
64	Ditch Bottom Type F (Index 233) Less Than 10 Feet (FDOT Pay Item No. 425-1-561)	10	EA		
				\$5,812.50	\$ 58,125.00
65	Ditch Bottom Type G (Index 233) Less Than 10 Feet (FDOT Pay Item No. 425-1-571)	10	EA		
				\$8,470.00	\$ 84,700.00
66	F&I Detectable Warning On Existing Walking Surface, Retrofit (FDOT Pay Item No. 527-2)	500	SF		
				\$45.00	\$ 22,500.00
67	Inlets, Adjust (FDOT Pay Item No. 425-4)	1	EA		
				\$1,390.00	\$ 1,390.00
68	Manhole, Adjust (FDOT Pay Item No. 425-5)	1	EA		
				\$1,239.00	\$ 1,239.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
69	Valve Boxes, Adjust (FDOT Pay Item No. 425-6)	1	EA		
				\$800.00	\$ 800.00
70	Drainage Structures, Miscellaneous, Adjust (FDOT Pay Item No. 425-8)	1	EA		
				\$6,000.00	\$ 6,000.00
71	Drainage Structure Modify (FDOT Pay Item No. 425-11)	1	EA		
				\$6,000.00	\$ 6,000.00
72	Inlets Relocating (FDOT Pay Item No. 425-71)	1	EA		
				\$8,000.00	\$ 8,000.00
73	Manholes And Inlets Cleaning And Sealing, Less Than 10 Feet (FDOT Pay Item No. 425-74-1)	1	EA		
				\$6,000.00	\$ 6,000.00
74	F&I Pipe Culvert, Optional Material, Round, 12 Inches, 15 Inches Storm Drain (FDOT Pay Item No. 430-174- 112, 430-174-115)	1	LF		
				\$250.00	\$ 250.00
75	F&I Pipe Culvert, Optional Material, Round, 18 Inches, 24 Inches Storm Drain (FDOT Pay Item No. 430-174- 118, 430-174-124)	1	LF		
				\$300.00	\$ 300.00
76	F&I Pipe Culvert, Optional Material, Round, 30 Inches, 36 Inches Storm Drain (FDOT Pay Item No. 430-174- 130, 430-174-136)	1	LF		
				\$350.00	\$ 350.00
77	F&I Pipe Culvert, Optional Material, Round, 42 Inches, 48 Inches Storm Drain (FDOT Pay Item No. 430-174- 142, 430-174-148)	1	LF		
				\$400.00	\$ 400.00
78	F&I Pipe Culvert, Optional Material, Round, 54 Inches, 60 Inches Storm Drain (FDOT Pay Item No. 430-174- 154, 430-174-160)	1	LF		
				\$625.00	\$ 625.00
79	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 15 Inches, 18 Inches (FDOT Pay Item No. 430- 174-215 OR 430-174-218)	1	LF		
				\$265.00	\$ 265.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
80	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 24 Inches (FDOT Pay Item No. 430-174-224)	1	LF	\$285.00	\$ 285.00
81	F&I Pipe Culvert, Optional Material, Other Shape - Ellip/Arch, 30 Inches, 36 Inches (FDOT Pay Item No. 430- 174-230 OR 430-174-236)	1	LF	\$325.00	\$ 325.00
82	Cleaning & Sealing Existing Pipe Joint, 10 Inches To 24 Inches, Storm Sewer (FDOT Pay Item No. 430- 821-23, 430-821-25, OR 430-821-29)	1	EA	\$618.00	\$ 618.00
83	Cleaning & Sealing Existing Pipe Joint, 30 Inches, 36 Inches, Storm Sewer (FDOT Pay Item No. 430- 821-33 OR 430-821-38)	1	EA	\$1,042.00	\$ 1,042.00
84	Cleaning & Sealing Existing Pipe Joint, 42 Inches, 48 Inches, Storm Sewer (FDOT Pay Item No. 430- 821-40 OR 430-821-41)	1	EA	\$1,543.50	\$ 1,543.50
85	Cleaning & Sealing Existing Pipe Joint, 54 Inches, 60 Inches, Storm Sewer (FDOT Pay Item No. 430- 821-42 OR 430-821-43)	1	EA	\$2,019.00	\$ 2,019.00
86	Cleaning & Sealing Existing Pipe Joint, >60 Inches, Storm Sewer (FDOT Pay Item No. 430-821-61)	1	EA	\$2,537.50	\$ 2,537.50
87	Mitered End Section, Optional Round, 12 Inches, 15 Inches, 18 Inches (FDOT Pay Item No. 430- 982-121, 430-982-123, OR 430-982-125)	1	EA	\$2,706.50	\$ 2,706.50
88	Mitered End Section, Optional Round, 24 Inches (FDOT Pay Item No. 430-982-129)	1	EA	\$3,276.50	\$ 3,276.50

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
89	Mitered End Section, Optional Round, 30 Inches, 36 Inches (FDOT Pay Item No. 430-982-133 OR 430-982-138)	1	EA	\$6,361.50	\$ 6,361.50
90	French Drain, 12 To 18 Inches (FDOT Pay Item No. 443-70-3)	1	LF	\$184.00	\$ 184.00
91	French Drain, 24 Inches (FDOT Pay Item No. 443-70-4)	1	LF	\$224.00	\$ 224.00
92	Storm Sewer Inspection (Video Camera) (FDOT Pay Item No. E432-4)	1	LF	\$18.00	\$ 18.00
93	Outfall Barnacle Removal For 0-24 Inch Pipes (FDOT Pay Item No. 430-95-1)	1	LF	\$80.50	\$ 80.50
94	Outfall Barnacle Removal For 25-36 Inch Pipes (FDOT Pay Item No. 430-95-2)	1	LF	\$118.00	\$ 118.00
95	Outfall Barnacle Removal For 37-48 Inch Pipes (FDOT Pay Item No. 430-95-3)	1	LF	\$159.00	\$ 159.00
96	Outfall Barnacle Removal For 49-60 Inches Pipes (FDOT Pay Item No. 430-95-4)	1	LF	\$239.00	\$ 239.00
97	Outfall Barnacle Removal For 61 Inches And Greater Pipes (FDOT Pay Item No. 430-95-5)	1	LF	\$309.50	\$ 309.50
98	Maintenance of Concrete Collar At Joints For Connecting Dissimilar Types Of Pipe (FDOT Pay Item No. 430-96)	1	EA	\$3,000.00	\$ 3,000.00
99	Pipe Liner, Sliplining, 30 Inches (FDOT Pay Item No. 431-15-30)	1	LF	\$400.00	\$ 400.00
100	Pipe Liner, Sliplining, 36 Inches (FDOT Pay Item No. 431-1-36)	1	LF	\$450.00	\$ 450.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
101	Pipe Liner, Sliplining, 42 Inches (FDOT Pay Item No. 431-1-42)	1	LF	\$590.50	\$ 590.50
102	Deep Well Injection Box, Structure With No Outflow (FDOT Pay Item No. 444-74-1)	1	EA	\$22,336.00	\$ 22,336.00
103	Deep Well Injection Box, Structure With Outflow (FDOT Pay Item No. 444-74-2)	1	EA	\$25,219.00	\$ 25,219.00
104	Deep Well Open Hole, 24 Inches (FDOT Pay Item No. 444-70-11)	1	LF	\$291.00	\$ 291.00
105	Deep Well Casing (FDOT Pay Item No. 444-71-11)	1	LF	\$301.50	\$ 301.50
106	Deep Well Cleaning (0-23 Inches) (FDOT Pay Item No. 444-72-10)	1	LF	\$172.50	\$ 172.50
107	Deep Well Cleaning (24 Inches) (FDOT Pay Item No. 444-72-11)	1	LF	\$186.00	\$ 186.00
108	Deep Well Cleaning (25 Inches And Greater) (FDOT Pay Item No. 444- 72-12)	1	LF	\$194.50	\$ 194.50
109	Sheet Piling, Steel Temporary- Critical (FDOT Pay Item No. 455- 133-2)	1	SF	\$95.00	\$ 95.00
110	Desilting Pipe, 0-24 Inches (FDOT Pay Item No. E430-94-1)	1	LF	\$25.00	\$ 25.00
111	Desilting Pipe, 25-36 Inches (FDOT Pay Item No. E430-94-2)	1	LF	\$30.00	\$ 30.00
112	Desilting Pipe , 37-48 Inches (FDOT Pay Item No. E430-94-3)	1	LF	\$35.00	\$ 35.00
113	Desilting Pipe , 49-60 Inches (FDOT Pay Item No. E430-94-4)	1	LF	\$40.00	\$ 40.00
114	Desilting Pipe, 61 Inches Or (FDOT Pay Item No. E430-94-5)	1	LF	\$80.00	\$ 80.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
115	Riprap, Sand-Cement Bags (FDOT Pay Item No. 530-11-00)	1	CY		
				\$723.00	\$ 723.00
116	Riprap- Rubble, Bank And Shore (FDOT Pay Item No. 530-3-3)	1	TON		
				\$694.00	\$ 694.00
117	Riprap, Rubble, Furnish And Install, Ditch Lining (FDOT Pay Item No. 530-3-4)	1	TON		
				\$723.00	\$ 723.00
118	Fence Gate, Type B, Single, 0-6.0 Feet Opening (FDOT Pay Item No. 550-60-211)	1	EA		
				\$3,060.00	\$ 3,060.00
119	Fence Gate, Type B, Single, 6.1-12.0 Feet Opening (FDOT Pay Item No. 550-60-212)	1	EA		
				\$4,143.50	\$ 4,143.50
120	Fence Gate, Type B, Single, 12.1-18.0 Feet Opening (FDOT Pay Item No. 550-60-213)	1	EA		
				\$3,889.50	\$ 3,889.50
121	Fence Gate, Type B, Single, 18.1-20.0 Feet Opening (FDOT Pay Item No 550-60-214)	1	EA		
				\$7,171.50	\$ 7,171.50
122	Single Post Sign, Install (FDOT Pay Item No. 700-1-40)	1	EA		
				\$718.00	\$ 718.00
123	Single Post Sign, Relocate (FDOT Pay Item No. 700-1-50)	1	EA		
				\$358.50	\$ 358.50
124	Fire Hydrant, Adjust And Modify (FDOT Pay Item No. 1644-700)	1	EA		
				\$6,000.00	\$ 6,000.00
125	Fire Hydrant, Relocate (FDOT Pay Item No. 1644-800)	1	EA		
				\$12,000.00	\$ 12,000.00
126	Performance Turf, Sod (Bahia, Centipede, Bermuda (FDOT Pay Item No 570-1-2)	1	SY		
				\$30.00	\$ 30.00
127	F&I Light Tower, AMIDA/TEREX AL4000 or Equivalent, Includes Power Source	40	DAY		
				\$227.50	\$ 9,100.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
128	FDOT Certified Flag Person	1,000	HR		
				\$68.50	\$ 68,500.00
129	F&I Orange Plastic Mesh and Post	500	LF		
				\$16.50	\$ 8,250.00
130	F&I Steel Traffic Plates for 12-Foot Lane Daily Rate	50	EA		
				\$337.50	\$ 16,875.00
131	F&I Steel Traffic Plates for 12-Foot Lane Weekly Rate	50	EA		
				\$761.50	\$ 38,075.00
132	Survey Field Work as Performed By Crew	500	HR		
				\$316.00	\$ 158,000.00
133	Utility Locating and Excavation Test Hole in Green Areas	50	EA		
				\$741.00	\$ 37,050.00
134	Utility Locating and Excavation Test Hole in Pavement Areas	50	EA		
				\$975.00	\$ 48,750.00
135	Swale Excavation/Grading/Restoration (Up to 36-inches Deep with 1:3 Slopes or FL)	10,000	SY		
				\$12.00	\$ 120,000.00
136	Curb or Curb and Gutter Removal	1,500	LF		
				\$19.00	\$ 28,500.00
137	Paver Block Removal	1,000	SY		
				\$25.00	\$ 25,000.00
138	Removal and Disposal of Unsuitable, Non-Contaminated Materials	150	CY		
				\$73.00	\$ 10,950.00
139	Storm/Sanitary Structure Removal	200	EA		
				\$1,758.00	\$ 351,600.00
140	Limerock Removal up to a Depth of 8-Inches	500	SY		
				\$19.00	\$ 9,500.00
141	F&I Temporary Patch Using Cold Asphaltic Mix	100	CF		
				\$105.50	\$ 10,550.00
142	Ada Compliant Curb Ramp	20	EA		
				\$1,851.50	\$ 37,030.00
143	Type C Catch Basin 24x36 Inches Less Than 10 Feet	10	EA		
				\$5,375.00	\$ 53,750.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
144	Large Rectangular Type C Catch Basins With Top Slabs 4x4 Feet Or Type Inches	10	EA		
				\$8,000.00	\$ 80,000.00
145	Large Rectangular Type C Catch Basins With Top Slabs 5x5 Feet Or Type Inches	10	EA		
				\$9,000.00	\$ 90,000.00
146	Large Rectangular Type C Catch Basins With Top Slabs 6x6 Feet Or Type Inches	10	EA		
				\$10,077.00	\$ 100,770.00
147	Large Rectangular Type C Catch Basins With Top Slabs 8x8 Feet Less Than 10 Feet	10	EA		
				\$15,101.00	\$ 151,010.00
148	Large Rectangular Type C Catch Basins With Top Slabs 4x6 Feet Less Than 10 Feet	10	EA		
				\$10,000.00	\$ 100,000.00
149	Large Rectangular Type C Catch Basins With Top Slabs 4x8 Feet Less Than 10 Feet	10	EA		
				\$11,000.00	\$ 110,000.00
150	Storm Manhole Type M-4 (48 Inches Round) Less Than 10 Feet	10	EA		
				\$8,500.00	\$ 85,000.00
151	Storm Manhole Type M-5 (60 Inches Round) Less Than 10 Feet	10	EA		
				\$9,500.00	\$ 95,000.00
152	Storm Manhole Type M-6 (72 Inches Round) Less Than 10 Feet	10	EA		
				\$12,000.00	\$ 120,000.00
153	Storm Manhole Type M-7 (84 Inches Round) Less Than 10 Feet	10	EA		
				\$13,985.50	\$ 139,855.00
154	18 Inches Ads Drain Basin Or Approved Equal	10	EA		
				\$6,000.00	\$ 60,000.00
155	24 Inches Ads Drain Basin Or Approved Equal	10	EA		
				\$13,985.50	\$ 139,855.00
156	8 Inches Trench Drain With Grate 6452 Or Approved Equal	1	LF		
				\$420.00	\$ 420.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
157	10 Inches Trench Drain With Grate 6453 Or Approved Equal	1	LF	\$469.00	\$ 469.00
158	12 Inches Trench Drain With Grate 6454 Or Approved Equal	1	LF	\$541.00	\$ 541.00
159	15 Inches Trench Drain With Grate 6455 Or Approved Equal	1	LF	\$587.50	\$ 587.50
160	18 Inches Trench Drain With Grate 6456 Or Approved Equal	1	LF	\$657.00	\$ 657.00
161	Install Pipe Culvert, RCP Material Only, Round, Less Than 12 Inches Storm Drain	1	LF	\$106.00	\$ 106.00
162	Install Pipe Culvert, Optional Material, Round, Less Than 12 Inches Storm Drain	1	LF	\$102.50	\$ 102.50
163	French Drain, Less Than 12 Inches	1	LF	\$167.00	\$ 167.00
164	F&I Ballast Rock, French Drain Aggregate	1	CY	\$115.50	\$ 115.50
165	F&I Well Point System Complete, 4 Inches Pump	1	DAY	\$15,000.00	\$ 15,000.00
166	F&I Well Point System Complete, 6 Inches Pump	1	DAY	\$15,000.00	\$ 15,000.00
167	F&I Well Point System Complete, 8 Inches Pump	1	DAY	\$15,000.00	\$ 15,000.00
168	F&I By-Pass Pump 4 Inches	1	DAY	\$4,000.00	\$ 4,000.00
169	F&I By-Pass Pump 6 Inches	1	DAY	\$15,000.00	\$ 15,000.00
170	F&I By-Pass Pump 8 Inches	1	DAY	\$15,000.00	\$ 15,000.00
171	8-12 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$2,000.00	\$ 2,000.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
172	15-24 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$2,500.00	\$ 2,500.00
173	30-42 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$5,400.00	\$ 5,400.00
174	48-60 Inches Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$8,500.00	\$ 8,500.00
175	60 Inches And Above Plug For Blocking Drainage Line Within Watertable - Includes Installation	1	EA	\$15,000.00	\$ 15,000.00
176	Standard 6 Foot Chain Link Fence	1	LF	\$56.50	\$ 56.50
177	Standard 6 Foot Chain Link Fence Gate Opening, Single, 0-6 Opening	1	EA	\$3,024.00	\$ 3,024.00
178	Standard 6 Foot Wood Panel Pressure-Treated Fence	1	LF	\$60.50	\$ 60.50
179	Standard 6 Foot Wood Panel Pressure-Treated Fence Gate Opening, Single, 0-6 Opening	1	EA	\$2,131.50	\$ 2,131.50
180	Standard 6 Foot Vinyl Fence	1	LF	\$77.00	\$ 77.00
181	Standard 6 Foot Vinyl Fence Gate Opening, Single, 0-6 Opening	1	EA	\$3,368.50	\$ 3,368.50
182	Additional Laborer	1	HR	\$62.00	\$ 62.00
183	Master Electrician	1	HR	\$183.50	\$ 183.50
184	Diver (Regular Time)	1	HR	\$325.50	\$ 325.50
185	Certified Arborist	1	HR	\$207.50	\$ 207.50
186	Qualified Construction Training Qualification Program (Ctqp) Asphalt Paving Level II Technician	1	HR	\$282.00	\$ 282.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
187	Service Truck & Operator, Personnel Lift To 35 Ft High Access, 4 Hr Minimum Charge	1	HR	\$177.00	\$ 177.00
188	Bucket Truck & Operator, 50 Ft Reach, 4 Hr Minimum Charge	1	HR	\$220.50	\$ 220.50
189	D3 Or D5 Dozer & Operator	1	HR	\$212.00	\$ 212.00
190	Crane & Operator, Installations Less Than 85 Ft High And 22 Ton, 4 Hr Minimum Charge	1	HR	\$488.00	\$ 488.00
191	Vac Truck, 3-Person Crew, 4 Hr Minimum Charge	1	HR	\$800.00	\$ 800.00
192	Skid Steer Loader & Operator, 1,850 Lb Minimum, 4 Hr Minimum Charge	1	HR	\$300.00	\$ 300.00
193	Boat/Water Craft With Motor, 30 Ft Length Maximum, 4 Hr Minimum Charge	1	HR	\$1,000.00	\$ 1,000.00
194	Dump Truck & Operator, Single-Axle, 5 Cubic Yard Minimum Capacity, 4 Hr Minimum	1	HR	\$114.50	\$ 114.50
195	Root Pruning/Tree Trimming Crew, 3-Person Crew	1	HR	\$351.00	\$ 351.00
196	Pollution Retardant Baffle With 10 Inches Cleanout Access To Cover 12-Inch to 15-Inch	1	EA	\$1,170.50	\$ 1,170.50
197	Pollution Retardant Baffle With 12 Inches Cleanout Access To Cover 12-Inch to 15-Inch	1	EA	\$1,492.00	\$ 1,492.00
198	Pollution Retardant Baffle With 12 Inches Cleanout Access To Cover 18-Inch to 24-Inch	1	EA	\$1,828.00	\$ 1,828.00
199	F&I 10 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA	\$5,539.00	\$ 5,539.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
200	F&I 12 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$6,863.50	\$ 6,863.50
201	F&I 15 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$10,458.00	\$ 10,458.00
202	F&I 18 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$13,000.00	\$ 13,000.00
203	F&I 24 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$17,596.50	\$ 17,596.50
204	F&I 30 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$23,986.00	\$ 23,986.00
205	F&I 36 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$29,204.00	\$ 29,204.00
206	F&I 42 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$40,239.00	\$ 40,239.00
207	F&I 48 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$58,016.50	\$ 58,016.50
208	F&I 54 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$82,046.50	\$ 82,046.50
209	F&I 60 Inches Inline Wastop Check Valves With All Fittings Or Approved Equal	1	EA		
				\$107,000.00	\$ 107,000.00
210	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 10 to 18 Inches	1	EA		
				\$2,108.00	\$ 2,108.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
211	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 24 to 36 Inches	1	EA	\$2,709.50	\$ 2,709.50
212	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings for Pipe Ranging 42 to 48 Inches	1	EA	\$3,480.50	\$ 3,480.50
213	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings 54 to 60 Inches	1	EA	\$4,154.50	\$ 4,154.50
214	F&I Aluminum Manatee Grate Per FDOT Index No 230 With All Fittings 61 Inches or Greater	1	EA	\$4,961.00	\$ 4,961.00
215	F&I 8 To 15 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$6,000.00	\$ 6,000.00
216	F&I 18 To 24 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$7,000.00	\$ 7,000.00
217	F&I 30 To 36 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$8,000.00	\$ 8,000.00
218	F&I 42 To 48 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$9,000.00	\$ 9,000.00
219	F&I 54 To 60 Inch Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$10,000.00	\$ 10,000.00
220	F&I 61 Inch and Above Drainage Outfalls By Core Drilling Existing Seawall	1	EA	\$12,000.00	\$ 12,000.00
221	F&I Pipe Bursting For Pipes 8 Inches And Under	1	LF	\$415.50	\$ 415.50
222	F&I Pipe Bursting For 10 Inches Pipes	1	LF	\$394.50	\$ 394.50
223	F&I Pipe Bursting For 12 Inches Pipes	1	LF	\$433.00	\$ 433.00
224	F&I Pipe Bursting For 15 Inches Pipes	1	LF	\$677.50	\$ 677.50

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
225	F&I Pipe Bursting For 18 Inches Pipes	1	LF		
				\$740.50	\$ 740.50
226	F&I Pipe Bursting For 24 Inches Pipes	1	LF		
				\$811.50	\$ 811.50
227	F&I Pipe Bursting For 30 Inches Pipes	1	LF		
				\$903.00	\$ 903.00
228	Directional Bore, 10 Inches Or Less	1	LF		
				\$250.00	\$ 250.00
229	F&I Fertilizer 40 Lb. Bag	1	EA		
				\$263.50	\$ 263.50
230	F&I Root Barrier	1	LF		
				\$32.00	\$ 32.00
231	Tree Removal, 0-12 Inches Trunk Diameter At Breast Height	1	EA		
				\$1,500.00	\$ 1,500.00
232	Tree Removal, 12.1-24 Inches Trunk Diameter At Breast Height	1	EA		
				\$2,000.00	\$ 2,000.00
233	Tree Removal, 24.1-48 Inches Trunk Diameter At Breast Height	1	EA		
				\$2,500.00	\$ 2,500.00
234	Tree Removal, 48.1-60 Inches Trunk Diameter At Breast Height	1	EA		
				\$4,030.00	\$ 4,030.00
235	Tree Removal, Greater Than 60 Inches Trunk Diameter At Breast Height	1	EA		
				\$7,627.00	\$ 7,627.00
236	Stump Grinding/Removal, 0-24 Inches Trunk Diameter At Breast Height	1	EA		
				\$474.00	\$ 474.00
237	Stump Grinding/Removal, 24.1-48 Inches Trunk Diameter At Breast Height	1	EA		
				\$749.00	\$ 749.00
238	Stump Grinding/Removal, 48.1-60 Inches Trunk Diameter At Breast Height	1	EA		
				\$1,472.00	\$ 1,472.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
239	Stump Grinding/Removal, Greater Than 60 Inches Trunk Diameter At Breast Height	1	EA		
				\$2,472.50	\$ 2,472.50
240	Salt Tolerant Turf, Sod (Seashore Paspalum Or Approved Equal	1	SY		
				\$19.50	\$ 19.50
241	Hedge Replacement With Common Nursery Available Plantings, 3- Gallon Container	1	EA		
				\$45.00	\$ 45.00
242	Hedge Replacement With Common Nursery Available Plantings, 7- Gallon Container	1	EA		
				\$67.50	\$ 67.50
243	Common Palm Species (Bismark, Date, Silver, Christmas, Royal, Thatch, Cabbage and Foxtail, 5-20 Overall Height	1	EA		
				\$1,311.50	\$ 1,311.50
244	Common Tree Species (Live Oak, Wild Tamarind, Green Or Silver Buttonwood, Bald or Pond Cypress, Magnolia, Ponciana, Slash Pine, Mahogany, Jamaican Dogwood, Mango, Sea Grape, Gumbo	1	EA		
				\$1,390.50	\$ 1,390.50
245	Permit and Fees Allowance	1	EA		
				\$50,000.00	\$ 50,000.00
246	Testing Allowance	1	EA		
				\$30,000.00	\$ 30,000.00
247	Owner Allowance	1	EA		
				\$100,000.00	\$ 100,000.00
248	Indemnification	1	EA		
				\$10.00	\$ 10.00
249	30-inch French Drain - FDOT PI 443-70-5	1	LF		
				\$387.00	\$ 387.00
250	36-inch French Drain - FDOT PI 443-70-6	1	LF		
				\$473.00	\$ 473.00
251	HDEP Flap Gate Ross 12 to 24-inch	1	EA		
				\$27,495.00	\$ 27,495.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
252	HDEP Flap Gate Ross 30 to 48-inch	1	EA	\$38,896.00	\$ 38,896.00
253	Type C Catch Basin 24x36 Inches 10-15 Feet	1	EA	\$11,459.00	\$ 11,459.00
254	Type C Catch Basin 30x36 Inches Less Than 10 Feet	1	EA	\$11,543.00	\$ 11,543.00
255	Type C Catch Basin 30x36 Inches 10-15 Feet	1	EA	\$15,327.50	\$ 15,327.50
256	Check Valve Wastop 12 to 24-inch, Install	1	EA	\$19,448.00	\$ 19,448.00
257	Check Valve Wastop 30 to 48-inch, Install	1	EA	\$65,637.50	\$ 65,637.50
258	30-inch Stormwater Manhole Less Than 10 Feet	1	EA	\$3,800.00	\$ 3,800.00
259	30-inch Stormwater Manhole 10-15 Feet	1	EA	\$5,800.00	\$ 5,800.00
260	36-inch Stormwater Manhole Less Than 10 Feet	1	EA	\$4,800.00	\$ 4,800.00
261	36-inch Stormwater Manhole 10-15 Feet	1	EA	\$5,800.00	\$ 5,800.00
262	Field Crew (Superintendent)	1	HR	\$200.00	\$ 200.00
263	Field Crew (Operator)	1	HR	\$100.00	\$ 100.00
264	Field Crew (Laborer)	1	HR	\$65.00	\$ 65.00
265	Excavator, 5 CY	1	HR	\$350.00	\$ 350.00
266	Flat Bed Truck, 12'	1	HR	\$150.00	\$ 150.00
267	Loader	1	HR	\$200.00	\$ 200.00
268	Excavator CAT 314 or Equal	1	HR	\$262.00	\$ 262.00
269	Bobcat	1	HR	\$132.00	\$ 132.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
270	Excavator/Backhoe CAT 225 or Equal	1	HR		
				\$192.00	\$ 192.00
271	Wheel Loader CAT 926 or Equal	1	HR		
				\$200.00	\$ 200.00
272	Backhoe Loader Combo CAT 416 or Equal	1	HR		
				\$132.00	\$ 132.00
273	Bulldozer CAT D-3 or Equal	1	HR		
				\$159.00	\$ 159.00
274	18 Yard Dump Truck	1	HR		
				\$152.00	\$ 152.00
275	Removal and Disposal of Contaminated Materials	30	CY		
				\$483.00	\$ 14,490.00
[*] Denotes item is taxable Sales Tax (@ 7%)					
TOTAL				\$	6,260,342.00

FORM 4

VENDOR REFERENCE FORM

City of Hollywood

Solicitation #:

Reference for:

Organization/Firm Name providing reference:

Organization/Firm Contact Name: Title:

Email: Phone:

Name of Referenced Project: Contract No:

Date Services were provided: Project Amount:

Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/ Subconsultant

Would you use the Vendor again? ☒ Yes ☐ NO. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

See attached Project Reference Sheet.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

Man Con works well with Municipal Staff and are excellent at addressing residents concerns.

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:				Title:	

	Department:		Date:	
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**INCORPORATED****Project Construction - Reference**

PROJECT NAME: Terra Mar Drive Drainage Improvements

MAN CON JOB #: 365

OWNER: Lauderdale-by-the-Sea

Contact: Ken Rubach

Address: 4501 N. Ocean Blvd
Lauderdale-by-the-Sea, FL 33308

PH # 954-640-4233

FX #

Email KenR@lbts-fl.gov

Duration:	78	Total Days		Start	November 2, 2020
Schedule Compliance:		Yes		Finish	January 19, 2021
Cost:	Original	\$1,014,387.39		Final	\$1,026,188.07
Budget Compliance:		Yes			

Project Description:

This project was to provide improvements to the existing drainage system in the Terra Mar Neighborhood to help reduce flooding of the roadways during large rain events. This was accomplished through the installation of 12" to 36" diameter gravity storm drainage piping, and new drainage structures which included catch basins and manholes. Following by a new pavement driving surface and associated vegetative restoration.

This project include the following critical scopes of work:

Installation of 1,300 linear feet of 12"-36" diameter Storm Drainage Pipe
Installation of 10 Storm Drainage Structures
Installation of 2 inline check valves
Repair of 5 sanitary sewer laterals

Key Project Personnel:

Carl Morsch, Project Manager
Jeffrey J. Mancini, General Superintendent
Luke Mancini, Project Superintendent

FORM 4

VENDOR REFERENCE FORM

City of Hollywood

Solicitation #:

REQ-039-23-JJ

Reference for:

2023 Drainage Infrastructure Improvements

Organization/Firm Name providing reference:

Broward County WWS

Organization/Firm

Mike Hagerty

Title:

Project Manager

Contact Name:

Email:

mhagerty@broward.org

Phone:

954-831-3217

Name of

Referenced

Project:

Hillsboro Pines Neighborhood Project

Contract

Y1380003C1

Date Services were provided:

07/05/2016 - 02/28/2017

Project

\$6,681,882.94

Referenced

Vendor's role in



Prime Vendor



Subcontractor/ Subconsultant

Project:

Would you use the

Vendor again?



Yes



No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

See Project Reference Form.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

THIS CONTRACTOR COMPLETED A VERY DIFFICULT PROJECT ON SCHEDULE AND WITHIN BUDGET. FINAL WORK PRODUCT WAS HIGH QUALITY.

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:			Title:		



INCORPORATED

Project Construction - Reference

PROJECT NAME: Hillsboro Pines Neighborhood Project, #Y1380003C1

MAN CON JOB #: 325

OWNER: Broward County WWS

Contact: Mike Hagerty, Project Manager

Address: 2555 W. Copans Road
Pompano Beach, FL 33069

PH #: 954-831-3217

FX #:

Email: mhagerty@broward.org

Duration:	263	Total Days		Start	July 5, 2016
Schedule Compliance:		Yes		Finish	February 28, 2017
Cost:	Original	\$6,476,264.40		Final	\$6,681,882.94
Budget Compliance:		Yes			

Project Description:

Furnished & Installed 12,735 LF of 8" Sanitary Sewer

Furnished & Installed 3,592 LF of 4" Force Main

Furnished & Installed 3,562 LF of 6" Water Main

Furnished & Installed 1,108 LF of 10" Water Main

Furnished & Installed RCP (Drainage) :

15" - 48" 5,738 LF and 84 Drainage Structures

Furnished & Installed Exfiltration Pipe:

15" 1,361 LF - 18" 305 LF and 36" 1065 LF

3,000LF 24" Reclaimed FM

Liftstations

Reconstruction of Roadway

Sodding

Swales

Water Quality Control Structures

All work performed within the Broward County Right of Way

Man-con Incorporated Key Employee's for this project:

Michael F. Iacobelli, Senior Project Manager

Jeffrey J. Mancini, General Superintendent

Kevin Rutherford, Project Superintendent

Anthony Mancini, Project Manager

Luke Mancini, Roadway & Site Superintendent

FORM 4

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: REQ-039-23-JJ
 Reference for: 2023 Drainage Infrastructure Improvements

Organization/Firm Name providing reference: Seminole Tribe of Florida
 Organization/Firm Contact Name: James Rabideau Title: Project Manager
 Email: James.Rabideau@jacobs.com Phone: 561-248-4098
 Name of Referenced Project: Seminole Park Site Development Contract No: 3880039902
 Date Services were provided: 11/2019 - 12/2020 Project Amount: \$10,906,590.14
 Referenced Vendor's role in Project: ☒ Prime Vendor ☐ Subcontractor/ Subconsultant
 Would you use the Vendor again? ☒ Yes ☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):
See attached Reference Sheet.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
g. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
g. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
e. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):
We were very satisfied with Man Con's work for both the field and the management of the project.

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail: <input type="checkbox"/>
Verified by:	Name:		Title:		
	Department:		Date:		

**INCORPORATED****Project Construction - Reference**

PROJECT NAME: Seminole Park Site Development

MAN CON JOB #: 349

OWNER: Seminole Tribe of Florida

Contact: James Rabideau

Address: 6300 Sterling Road
Hollywood, FL 33024

PH # 561-248-4098

FX #

Email James.Rabideau@jacobs.com

Duration:	426	Total Days		Start	11/2019
Schedule Compliance:		Yes		Finish	12/2020
Cost:	Original	\$10,574,677.60		Final	\$10,906,590.14
Budget Compliance:		Yes			

Project Description:

Project Site Development including 53,200 CY of Mass Excavation, 124,800 CY of Embankment from On-site and Imported Materials, 18,300 SY of Asphalt Paving, 22,000 SY of 8" Limerock Base, 23,900 SY of LBR 40 Stabilized Subgrade, 6,680 SY of Concrete Sidewalk, Irrigation and Vegetative Restoration.

Utility Installation of 6,556 LF of 12"-48" RCP and HDPE Drainage Pipe, 64 drainage structures, 5,280 LF of 8" C-900 Water Main, 1,455 LF of 12" C-900 Water Main, 76 Single Water Services, 1,191 LF of 8" SDR26 Sanitary Sewer Main, 3,354 LF of 10" SDR26 Sanitary Sewer Main, 19 Sanitary Sewer Manholes, 76 Sewer Lateral Services.

Man-Con Incorporated Key Employee's for this project:

Jeffrey J. Mancini, General Superintendent

Anthony J. Mancini, Project Manager

Michael Iacobelli, Senior Project Manager

Kevin Rutherford, Project Superintendent

C. Eric Moulton, Restoration Superintendent

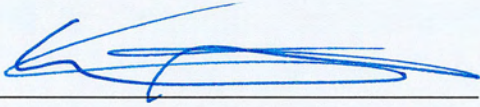
FORM 5

HOLD HARMLESS AND INDEMNITY CLAUSE

Man-Con Incorporated

(Company Name and Authorized Signature, Print Name)

, the contractor, shall indemnify, defend and hold harmless the City of Hollywood, its elected and appointed officials, employees and agents for any and all suits, actions, legal or administrative proceedings, claims, damage, liabilities, interest, attorney's fees, costs of any kind whether arising prior to the start of activities or following the completion or acceptance and in any manner directly or indirectly caused, occasioned or contributed to in whole or in part by reason of any act, error or omission, fault or negligence whether active or passive by the contractor, or anyone acting under its direction, control, or on its behalf in connection with or incident to its performance of the contract.



Signature

Anthony Mancini

Printed Name

Man-Con Incorporated

Name of Company

Vice President

Title

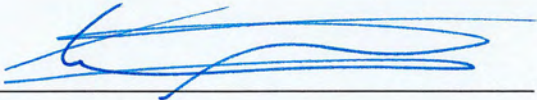
FORM 6

NON-COLLUSION AFFIDAVIT

STATE OF: Florida

COUNTY OF: Broward, being first duly sworn, deposes and says that:

- (1) He/she is Vice President of Man-Con Incorporated, the Proposer that has submitted the attached Proposal.
- (2) He/she has been fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;
- (3) Such Proposal is genuine and is not a collusion 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 contractor for which the attached Proposal has been submitted or to refrain from bidding 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, profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure an advantage against the City of Hollywood 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.



Signature

Anthony Mancini

Printed Name

Man-Con Incorporated

Name of Company

Vice President

Title

FORM 7

SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY
PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS

1. This form statement is submitted to the City of Hollywood by
Anthony Mancini, Vice President for Man-Con Incorporated
(Print individual's name and title) (Print name of entity submitting sworn statement)
whose business address is
3460 SW 11th St., Deerfield Beach, FL 33442
and if applicable its Federal Employer Identification Number (FEIN) is 59-2547432. If the
entity has no FEIN, include the Social Security Number of the individual signing this sworn
statement.

2. I understand that "public entity crime," as defined in paragraph 287.133(1)(g), Florida
Statutes, means a violation of any state or federal law by a person with respect to and
directly related to the transaction of business with any public entity or with an agency or
political subdivision of any other state or with the United States, including, but not limited
to, any bid, proposal, reply, or contract for goods or services, any lease for real property,
or any contract for the construction or repair of a public building or public work, involving
antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material
misinterpretation.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b),
Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or
without an adjudication of guilt, in an federal or state trial court of record relating to charges
brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury
trial, or entry of a plea of guilty or nolo contendere.
4. I understand that "Affiliate," as defined in paragraph 287.133(1)(a), Florida Statutes,
means:
 1. A predecessor or successor of a person convicted of a public entity crime, or
 2. An entity under the control of any natural person who is active in the management
of the entity and who has been convicted of a public entity crime. The term "affiliate"
includes those officers, directors, executives, partners, shareholders, employees,
members, and agents who are active in the management of an affiliate. The
ownership by one person of shares constituting a controlling interest in another
person, or a pooling of equipment or income among persons when not for fair
market value under an arm's length agreement, shall be a prima facie case that
one person controls another person. A person who knowingly enters into a joint
venture with a person who has been convicted of a public entity crime in Florida
during the preceding 36 months shall be considered an affiliate.
- 5 I understand that "person," as defined in Paragraph 287.133(1)(e), Florida Statutes,
means any natural person or any entity organized under the laws of any state or of the

United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

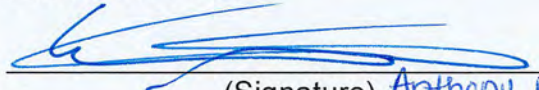
X Neither the entity submitting sworn statement, nor any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime, but the Final Order entered by the Hearing Officer in a subsequent proceeding before a Hearing Officer of the State of the State of Florida,

Division of Administrative Hearings, determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the Final Order).

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017 FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.


(Signature) Anthony Mancini

Sworn to and subscribed before me this 22nd day of February, 2023.

Personally known X

Or produced identification _____ Notary Public-State of FL

_____ my commission expires 8/21/26
(Type of identification)



Kate Hill
(Printed, typed or stamped commissioned name of notary public)

FORM 8

CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, 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 governmental entity (Federal, State, or local) 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 application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Applicant Name and Address:

Man-Con Incorporated


3460 SW 11th Street

Deerfield Beach, FL 33442

Application Number and/or Project Name:

2023 Drainage Infrastructure Improvements

Applicant IRS/Vendor Number: 59-2547432



Signature

Anthony Mancini

Printed Name

Man-Con Incorporated

Name of Company

Vice President

Title

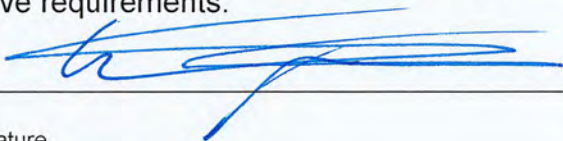
FORM 9

DRUG-FREE WORKPLACE PROGRAM

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

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

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



Signature

Anthony Mancini

Printed Name

Man-Con Incorporated

Name of Company

Vice President

Title

FORM 10

SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. "No Public officer, employee of an agency, local government attorney, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the public officer, employee, local government attorney, or candidate would be influenced thereby." The term "public officer" includes "any person elected or appointed to hold office in any agency, including any person serving on an advisory body."

The City of Hollywood/Hollywood CRA policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City/CRA does business.

The State of Florida definition of "gifts" includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Food or beverage,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.



Signature

Anthony Mancini

Printed Name

Man-Con Incorporated

Name of Company

Vice President

Title

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.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Man-Con Incorporated	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ 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. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 3460 SW 11th Street	Requester's name and address (optional)
6 City, state, and ZIP code Deerfield Beach, FL 33442	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

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

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

Social security number								
			-			-		
or								
Employer identification number								
5	9	-	2	5	4	7	4	3

Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign
Here

Signature of
U.S. person ►

Date ► 2/22/23

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.

By signing the filled-out form, you:

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

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities C—

A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a) J—

A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

FORM 12

TRENCH SAFETY

This form must be completed and signed by the Respondent.

Failure to complete this form may result in the solicitation being declared non-responsive.

Respondent acknowledges that the Florida Trench Safety Act, Section 553.60 et. seq., which became effective October 1, 1990, shall be in effect during the period of construction of the project. The respondent by signing and submitting the solicitation is, in writing, assuring that it will perform any trench excavation in accordance with applicable trench safety standards. The respondent further identifies the following separate item of cost of compliance with the applicable trench safety standards as well as the method of compliance:

Method of Compliance

Cost

Total \$ \$30,000

Respondent acknowledges that this cost is included in the applicable items of their submittal and in the Grand Total Solicitation Price. Failure to complete the above will result in the solicitation being declared non-responsive.

The Respondent is, and the Owner and Engineer are not, responsible to review or assess Respondent's safety precautions, programs or costs, or the means, methods, techniques or technique adequacy, reasonableness of cost, sequences or procedures of any safety precaution, program or cost, including but not limited to, compliance with any and all requirements of Florida Statute Section 553.60 et. seq. cited as the "Trench Safety Act." Respondent is, and the owner and Engineer are not, responsible to determine if any safety related standards apply to the project, including but not limited to, the "Trench Safety Act."

Kate Hill
Witness Signature

Kate Hill
Witness Printed Name
3460 SW 11th St.
Deerfield Beach, FL 33442
Witness Address

2/22/23
Date

Anthony Mancini
Contractor's Signature

Anthony Mancini
Printed Name
Vice President
Title

2/22/23
Date

- END OF SECTION -

Form 13

Bid Guaranty Form

(Construction)

STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we Man-Con, Incorporated, as Principal, and Westfield Insurance Company, as

Surety, are held and firmly bound unto the City of Hollywood in the sum of _____

FIVE PERCENT OF BID AMOUNT Dollars (\$ 5% of Bid Amount) lawful money

of the United States, amounting to 5% of the total SOLICITATION Price, for the payment of said sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has submitted the accompanying SOLICITATION, dated February 22nd, 2023 for

YEAR 2023 DRAINAGE INFRASTRUCTURE IMPROVEMENTS

IFB-039-23-JJ

NOW, THEREFORE, if the principal shall not withdraw said SOLICITATION within 90 days after date of the same and shall within ten days after the prescribed forms are presented to him for signature, enter into a written contract with the CITY, in accordance with the SOLICITATION as accepted, and give bond with good and sufficient surety or sureties, and provide the necessary Insurance Certificates as may be required for the faithful performance and proper fulfillment of such Contract, then this obligation shall be null and void.

Approved SOLICITATION Bond

In the event of the withdrawal of said SOLICITATION within the specified period, or the failure to enter into such contract and give such bond and insurance within the specified time, the principal and the surety shall pay to the City of Hollywood the difference between the amount specified in said SOLICITATION and such larger amount for which the City of Hollywood may in good faith contract with another party to perform the work and/or supply the materials covered by said SOLICITATION.

IN WITNESS WHEREOF, the above bound parties have executed this statement under their several seals this _____ 22nd _____ day of _____ February _____ 2023, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

WHEN THE PRINCIPAL IS AN INDIVIDUAL:

Signed, sealed and delivered in the presence of:

Witness

Signature of Individual

Address

Printed Name of Individual

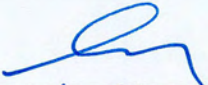
Witness

Address

Approved SOLICITATION Bond

WHEN THE PRINCIPAL IS A CORPORATION:

Attest:


Secretary Luke Mancini

Man-Con, Incorporated

Name of Corporation

3460 SW 11th Street,

Business Address

Deerfield Beach, FL 33442

By: 

(Affix Corporate Seal)

Anthony Mancini
Printed Name

Vice President
Official Title

CERTIFICATE AS TO CORPORATE PRINCIPAL

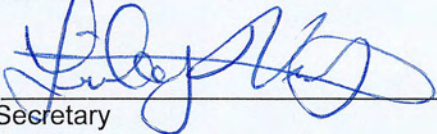
I, Luke Mancini, certify that I am the secretary of the Corporation named as Principal in the attached bond; that Anthony Mancini who signed the said bond on behalf of the Principal, was then Vice President of said Corporation; that I know his signature, and his signature thereto is genuine and that said bond was duly signed, sealed and attested for and on behalf of said Corporation by authority of its governing body.


Secretary Luke Mancini (SEAL)

Approved SOLICITATION Bond

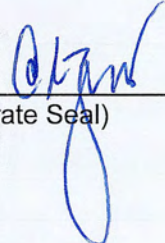
TO BE EXECUTED BY CORPORATE SURETY:

Attest:


Secretary

Westfield Insurance Company
Corporate Surety

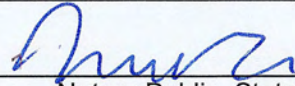
P.O. Box 5001
Business Address
Westfield Center, OH 44251

BY: 
(Affix Corporate Seal)

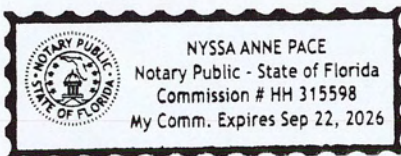
Angelo G. Zervos
Attorney-in-Fact
ZGI, LLC dba ZERVOS GROUP, INC
Name of Local Agency
4443 Lyons Road, Suite D-212
Business Address
Coconut Creek, FL 33073

STATE OF FLORIDA

Before me, a Notary Public, duly commissioned, qualified and acting, personally appeared,
Angelo G. Zervos to me well known, who being by me first duly sworn upon
oath says that he is the attorney-in-fact for the Westfield Insurance Company and
that he has been authorized by Westfield Insurance Company to execute the forgoing
bond on behalf of the CONTRACTOR named therein in favor of the City of Hollywood, Florida.
Subscribed and sworn to before me this 22nd day of February, 2023


Notary Public, State of Florida

My Commission Expires: September 22, 2026



- END OF SECTION-

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 12/07/22, FOR ANY PERSON OR PERSONS NAMED BELOW.

POWER NO. 0995602 00

General
Power
of Attorney

Westfield Insurance Co.
Westfield National Insurance Co.
Ohio Farmers Insurance Co.
Westfield Center, Ohio

CERTIFIED COPY

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint
ANGELO G. ZERVOS, COURTNEY SAUNDERS, JOINTLY OR SEVERALLY

of **SOUTHFIELD** and State of **MI** 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, recognizances, undertakings, or other instruments or contracts of suretyship in any penal limit.**

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

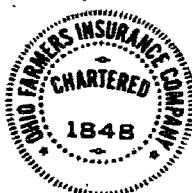
"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be It Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000).

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their **National Surety Leader** and **Senior Executive** and their corporate seals to be hereto affixed this **07th** day of **DECEMBER** A.D., **2022**.

Corporate
Seals
Affixed



WESTFIELD INSURANCE COMPANY
WESTFIELD NATIONAL INSURANCE COMPANY
OHIO FARMERS INSURANCE COMPANY

By:
Gary W. Stumper, National Surety Leader and Senior Executive

State of Ohio
County of Medina ss.:

On this **07th** day of **DECEMBER** A.D., **2022**, before me personally came **Gary W. Stumper** to me known, who, being by me duly sworn, did depose and say, that he resides in **Medina, OH**; that he is **National Surety Leader and Senior Executive** of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial
Seal
Affixed



David A. Kotnik, Attorney at Law, Notary Public
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

State of Ohio
County of Medina ss.:

I, **Frank A. Carrino**, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this **22nd** day of **February** A.D., **2023**.



Frank A. Carrino, Secretary

Form 14

LIST OF SUBCONTRACTORS

The Respondent shall list below the name and address of each Subcontractor who will perform work under this Contract, and shall also list the portion of the work which will be done by such Subcontractor. After the opening of Submittals, changes or substitutions will be allowed with written approval of the City of Hollywood. Subcontractors must be properly licensed.

	Work to be Performed	Subcontractor's Name / Address
1.	Asphalt & Milling	Rapid Milling & Paving 2240 NW 22 Street, Pompano Beach, FL 33069
2.	Concrete Flatwork	Homestead Concrete & Drainage 221 SW 4th Ave., Homestead, FL. 33030
3.	CCTV, Cleaning & Lining	Cobra Environmental 15896 Mellen Ln., Jupiter, FL 33478
4.		
5.		
6.		
7.		
8.		
9.		
10.		

NOTE: Attach additional sheets if required.

- END OF SECTION -

FORM 15

INFORMATION REQUIRED FROM BIDDERS

GENERAL INFORMATION

The Bidder shall furnish the following information. Failure to comply with this requirement may cause its rejection. Additional sheets shall be attached as required.

1. Contractor's Name/Address: Man-Con Incorporated
3460 SW 11th Street, Deerfield Beach, FL 33442

2. Contractor's Telephone Number: 954-427-0230
and e-mail address: Anthony@mancon.ws
3. Contractor's License (attach copy): CGC1526881 & CUC056856
Primary Classification: _____
Broward County License Number (attach copy): 2023-467281
4. Number of years as a Contractor in construction work of the type involved in this Contract: 38 years

5. List the names and titles of all officers of Contractor's firm:
Jeffrey Mancini - President
Anthony Mancini - Vice President
Luke Mancini - Secretary
Caroline Mancini - Director
6. Name of person who inspected site or proposed work for your firm:
Name: Jeffrey Mancini
Date of Inspection: 2/12/23
7. What is the last project of this nature you have completed?
Lauderdale-by-the-Sea - Terra Mar Drainage Improvements
Project Reference Sheet Attached.

8. Have you ever failed to complete work awarded to you; if so, where and why?

No.

9. Name three individuals or corporations for which you have performed work and to which you refer:

Lauderdale-by-the-Sea, Ken Rubach 954-640-4233

Broward County Water & Wastewater Services, Mike Hagerty 954-831-3217

Seminole Tribe of Florida, James Rabideau 561-248-4098

10. List the following information concerning all contracts on hand as of the date of submission of this proposal (in case of co-venture, list the information for all coventures).

Name of Project	City	Total Contract Value	Contracted Date of Completion	% Completion to Date
South County Reclaimed Transmission Main - PH I	Palm Beach County Boca Raton	\$7,716,362.25	08/2023	90%
Historic Miramar Infrastructure Improvements, PH IV	Miramar	\$12,709,740.67	08/2024	40%

(Continue list on inset sheet, if necessary)

11. What equipment do you own that is available for the work?

See equipment list submitted.

12. What equipment will you purchase for the proposed work?

None

13. List at least three (3) similar projects completed within the last ten (10) years by the bidder. For purposes of this requirement, 'similar' projects shall be considered to include experience with underground infrastructure replacement,

specifically storm water pipe, structure, pavement restoration, concrete work, tidal wave installation and landscape installation and removal . Include owner's contact information (client's name, address, telephone number and email address), project value, completion date, reference contact information and brief project description. The determination of whether a project is sufficiently similar shall be at the sole discretion of the City and the Engineer.

Lauderdale-by-the-Sea - Terra Mar Drainage Improvements. Project Reference Sheet Submitted.

Broward County WWS - Hillsboro Pines Neighborhood Project. Project Reference Sheet Submitted.

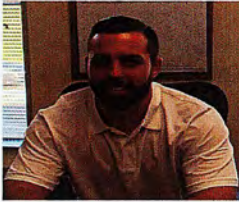
Seminole Tribe of Florida - Seminole Park Site Development. Project Reference Sheet Submitted.

(Add sheets as requested.)

14. Name the Project Manager proposed for this project. Attach a copy of the project manager's resume.
Anthony Mancini
-

NOTE: If requested by CITY, the Bidder shall furnish a notarized financial statement, references and other information, sufficiently comprehensive to permit an appraisal of its current financial condition.

ANTHONY MANCINI



VICE PRESIDENT
Anthony.m@mancon.ws

Anthony has been a crucial member of the Man Con Inc team since 2005 when he worked as a foreman at the start of his career until 2011 when he took a break on work to focus on his education while attending Florida Atlantic University. At which point he returned to the Man Con team as a project manager and has proved himself as one of the go people in the organization and currently serves as the Vice President of Man Con Inc. Anthony brings with him a wealth of knowledge in multiple areas of utility and heavy civil in both the public and private sectors where he has been actively involved with construction operations for the past 15 years. Which have included multi design-build projects, Directional Drilling Operations, Lining of Existing Utilities, Open and Deep Cut utility installation, roadway and hardscape paving operations.

EXPERIENCE:

VICE PRESIDENT

MAN-CON INCORPORATED | DEC 2017 TO CURRENT

PROJECT MANAGER

MAN-CON INCORPORATED | DEC 2013 - DEC 2017

Responsible for the Projects and overall performance including all aspects from project award to project close out.

HALVORSEN HOLDINGS | DEC 2011 - DEC 2013

Acquisitions, Dispositions, Construction Management of Commercial Real Estate.

FOREMAN

MAN-CON INCORPORATED | DEC 2005 - DEC 2011

Worked on multiple sanitary sewers, water, drainage, and road building projects in South Florida and gained experience in all aspects of construction from project start-up through final restoration.

EDUCATION:

BACHELOR of BUSINESS ADMINISTRATION:

FINANCE - FLORIDA ATLANTIC UNIVERSITY | 2013

CLIENT REFERENCE'S

- Mike Hagerty, P.E., LEED AP
Broward County WWS
Phone: (954) 831-3217
Email: mhagerty@broward.org
- Aaron Cutler, Vice President of Construction
Baxter & Woodman
Phone: (561)655-6175
Email: Acutler@baxterwoodman.com

Notable Projects:

Central Seacrest Corridor Utility Improvements | City of Boynton Beach | Project Manager

- Storm Water System Upgrade including 5,210 LF of Exfiltration Trench
- 8" DI Water Main Replacement 26,933 LF
- 66,823 SY of Pavement Overlay
- 14,355 SY of Driveway Apron Restoration
- 264 Rear to Front Transfers and Connection

Avenue "O" Neighborhood Infrastructure Improvements | City of Riviera Beach | Project Manager

- 6,791 LF RCP Drainage Installation Sizes 15" – 16" DI
- 1,144 LF Remove and Replace Existing Sanitary Sewer Pipe
- 12,708 LF Furnish and Install DIP Main Pipe, Including Remove Asbestos and Grout Abandonment
- 6,761 LF Re-line Existing Sanitary Sewer
- Water Service Relocation from Rear to Front of Properties
- Complete Right of Way to Right of Way Replacement of Paved Surface, Demo and Re-Construct all Concrete Sidewalk and Driveway Aprons

Pines Village Water Main Improvements – Phase I | City of Pembroke Pines | Project Manager

- Installation of Approximately 20,000 LF of 6", 8" & 12" Water Mains, Including Asphalt Trench Repairs
- 9,929 LF Abandonment of Existing Water Main
- 191 EA Water Services
- 365 EA Rear to Front Meter Relocations

Utility Analysis Zone 122 | Broward County Water and Wastewater Services | Project Manager

- Construct 27,630 LF of 4", 6", 8", 10", 12", and 16" Water Main and Appurtenances including Abandonment of existing Mains and 2" Water Services
- Construct 16,666 LF of 8", 10", 12" and 14" Sanitary Sewer Main and Appurtenances including Abandonment or Removal of Existing Mains, New Lift Station, Demo and Removal of two existing lift stations, 1,600 LF of Force Main, CIPP lining of existing Sanitary Sewer, Rehabilitation of existing Sanitary Sewer Manholes.
- Horizontal Directional Drill Installation of 8" and 12" Water Mains and Force Mains crossing existing Canals and under Oakland Park Blvd.
- Complete Roadway Re-Construction and Realignment throughout existing Multifamily Development
- Tree Removal and Replacement of all disturbed Sod and Landscape

Main Office:

3460 S.W. 11th Street
Deerfield Beach, Florida 33442
O: 954-427-0230
F: 954-427-8133

Palm Beach County Office:

3020 Fairlane Farms Road
Suite 1, Wellington, Florida
33414



INCORPORATED

MAN CON INCORPORATED

EQUIPMENT LIST

EQUIPMENT #	TYPE	YEAR	MODEL - MFR	SERIAL NUMBER - ID
201	GRADER	1996	CAT 135 H	3YX00143
203	ROLLER	2000	DYNAPAC CC122	60114971
204	ROLLER	1996	DYNAPAC CC102	600111930
209	TRACTOR		INTERNATIONAL 2500	2340062U202141
211	BROOM TRACTOR	1997	MASSEY FERGUSON 253	D51163
214	COMBO	2004	CAT 420D	FDP14988
215	COMBO	2005	CAT 420D IT	CBLN11506
216	LOADER	2006	CAT 262B SKID	0262BJPDT02887
217	LOADER	2003	938G SER 2	CRD00824
218	LOADER	1999	938G	4YS00883
223	BACKHOE	2006	KOMATSU PC 308	30050
229	BACKHOE	2004	KOMATSU PC138 USLC-2	1345
231	MILLING MACHINE	2006	ASPHALT ZIPPER AZ 500	50000177
233	GENERATOR	2005	WACKER	5560437
234	PUMP	1994	SLOAN 6"	1322
235	PUMP	1999	THOMPSON 12"	V-654
236	PUMP	1997	THOMPSON 12"	V-661
243	PUMP	1989	THOMPSON JET 4"	4J-116
244	COMPRESSOR		HATZ DIVE	
245	COMPRESSOR		SULLIVAN AIR	D185Q5
246	WELDER		MILLER BIG 50	KD372275
248	LOADER	2008	JD 544J	DW544JZ617435
249	BROOM TRACTOR	2005	MASSEY FERGUSON MF461-2	EN24027
251	INGRAM ROLLER	1988	3 WHEEL	588648 EB 14
252	ROLLER	2007	DYNAPAC 134D	81270186
253	MINI EXCAVATOR	2011	CAT 305-5DCR	FLZ00474
254	WHEEL LOADER	2012	CAT 924K	PWR00814
255	COMPACT TRACK LOADER	2014	BOBCAT T110	AE0H11925
256	WACKER REVERSESIBLE PLATE COMPACTOR	2014	BPU4045A	10373520
259	COMPACT TRACK LOADER	2016	CAT 299 D2	FD 200514
260	KOMATSU HYDR. EXCAVATOR	2016	PC138USLC-11	50176
261	JOHN DEERE	2016	644K LOADER	1DW644KZTGF674436
262	COMPACT TRACK LOADER	2018	CAT 279D	GTL05809
263	TRACK EXCAVATOR	2018	CAT 336FL	RKB20749
264	CAT MINI EXCAVATOR	2019	CAT 301.7	JH700962
265	Double Drum Compactor Roller	2020	CAT CB22B	2B200416
266	MILLING MACHINE	2005	ASPHALT ZIPPER 360-185A	AZ0588R
267	CAT MINI EXCAVATOR	2022	CAT 306	6G605538
	SKID-PACK COMPACTOR			
	WACKER REVERSESIBLE PLATE COMPACTOR			DPU504514
	6X14 TRENCH BOX			132259
	ARIES SEEKER PUSH CAMERA			6072801
	PIPE LASER	2012	TRIMBLE DG711	23369
	WACKER REVERSESIBLE PLATE COMPACTOR		BPU3545A	1761031
	WACKER REVERSESIBLE PLATE COMPACTOR	2016	DPU5545HE	10631585

FORM 16

PROPOSAL

TO THE MAYOR AND COMMISSIONERS
CITY OF HOLLYWOOD, FLORIDA

SUBMITTED Man-Con Incorporated

Dear Mayor and Commissioners:

The undersigned, as BIDDER, hereby declares that the only person or persons interested in the Proposal as principal or principals is or are named herein and that no other person than herein mentioned has any interest in this Proposal or in the Contract to be entered into; that this Proposal is made without connection with any other person, company or parties making a Bid or Proposal; and that it is in all respects fair and in good faith without collusion or fraud.

The BIDDER further declares that he has examined the site of the Work and informed himself fully in regard to all conditions pertaining to the place where the Work is to be done; that he has examined the Drawings and Specifications for the Work and contractual documents relative thereto, including the Notice to Bidders, Instructions to Bidders, Proposal Bid Form, Form of Bid Bond, Form of Contract and Form of Performance Bond, General, Supplementary and Technical Specifications, Addenda, Drawings, and Local Preference Program, Exhibit A, and has read all of the Provisions furnished prior to the opening of bids; and that he has satisfied himself relative to the work to be performed.

The undersigned BIDDER has not divulged to, discussed or compared his bid with other bidders and has not colluded with any other BIDDER of parties to this bid whatever.

If this Proposal is accepted, the undersigned BIDDER proposes and agrees to enter into and execute the Contract with the City of Hollywood, Florida, in the form of Contract specified; of which this Proposal, Instructions to Bidders, General Specifications, Supplementary Conditions and Drawings shall be made a part for the performance of Work described therein; to furnish the necessary bond equal to one hundred (100) percent of the total Contract base bid, the said bond being in the form of a Cash Bond or Surety Bond prepared on the applicable approved bond form furnished by the CITY; to furnish all necessary materials, equipment, machinery, tools, apparatus, transportation, supervision, labor and all means necessary to construct and complete the work specified in the Proposal and Contract and called for in the Drawings and in the manner specified; to commence Work on the effective date established in the "Notice to Proceed" from the ENGINEER; and to substantially complete all Contract Work within 30 days with final completion within 45 days, and stated in the "Notice to Proceed" or pay liquidated damages for each calendar day in excess thereof, or such actual and consequential damages as may result therefrom, and to abide by the Local Preference Ordinance, Exhibit A.

The BIDDER acknowledges receipt of the following addenda:

No. <u>1</u>	Dated <u>2/15/23</u>
No. <u>2</u>	Dated <u>2/15/23</u>
No. _____	Dated _____

And the undersigned agrees that in case of failure on his part to execute the said Contract and the Bond within ten (10) days after being presented with the prescribed Contract forms, the check or Bid Bond accompanying his bid, and the money payable thereon, shall be paid into the funds of the City of Hollywood, Florida, otherwise, the check or Bid Bond accompanying this Proposal shall be returned to the undersigned.

Attached hereto is a certified check on the

_____ Bank of _____

or approved Bid Bond for the sum of

5% of bid amount Dollars (\$) according to the conditions under the Instructions to Bidders and provisions therein.

NOTE: If a Bidder is a corporation, the legal name of the corporation shall be set forth below, together with signature(s) of the officer or officers authorized to sign Contracts on behalf of the corporation and corporate seal; if Bidder is a partnership, the true name of the firm shall be set forth below with the signature(s) of the partner or partners authorized to sign Contracts in behalf of the partnership; and if the Bidder is an individual, his signature shall be placed below; if a partnership, the names of the general partners.

WHEN THE BIDDER IS AN INDIVIDUAL:

(Signature of Individual)

(Printed Name of Individual)

(Address)

WHEN THE BIDDER IS A SOLE PROPRIETORSHIP OR OPERATES UNDER A TRADE NAME:

(Name of Firm)

(Address)

_____(SEAL)
(Signature of Individual)

WHEN THE BIDDER IS A PARTNERSHIP:

(Name of Firm) A Partnership

(Address)

By: _____
(SEAL)
(Partner)

Name and Address of all Partners:

WHEN THE BIDDER IS A JOINT VENTURE:

(Correct Name of Corporation)

By: _____ (SEAL)
(Address)

(Official Title)

As Joint Venture
(Corporate Seal)

Organized under the laws of the State of _____, and authorized by the law to make this bid and perform all Work and furnish materials and equipment required under the Contract Documents.

WHEN THE BIDDER IS A CORPORATION:

Man-Con Incorporated
(Correct Name of Corporation)

By: _____
(SEAL)

Anthony Mancini, Vice President

(Official Title)
3460 SW 11th Street
Deerfield Beach, FL 33442

(Address of Corporation)

Organized under the laws of the State of Florida, and authorized by the law to make this bid and perform all Work and furnish materials and equipment required under the Contract Documents.

CERTIFIED COPY OF RESOLUTION OF
BOARD OF DIRECTORS

Man-Con Incorporated

(Name of Corporation)

RESOLVED that Anthony Mancini

(Person Authorized to Sign)

Vice President

of

Man-Con Incorporated

(Title)

(Name of Corporation)

be authorized to sign and submit the Bid or Proposal of this corporation for the following project:

YEAR 2023 DRAINAGE INFRASTRUCTURE IMPROVEMENTS

ECSD Project No. - 11058

Bid No. IFB-039-23-JJ

The foregoing is a true and correct copy of the Resolution adopted by

Man-Con Incorporated

at a meeting of its Board of

(Name of Corporation)

Directors held on the 15th day of February, 2023.

By: [Signature]

Luke Mancini

Title: Secretary

(SEAL)

The above Resolution MUST BE COMPLETED if the Bidder is a Corporation.

- END OF SECTION -

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/15/23

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

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

PRODUCER ZERVOS GROUP INC 24724 Farmbrook P O Box 2067 Southfield, MI 48037-2067	CONTACT NAME: Nyssa A Pace PHONE (A/C, No, Ext): 248 355-4411 FAX (A/C, No): 248 355-2175 E-MAIL ADDRESS: nyssa@zervosgroup.com														
INSURED MAN-CON INC 3460 SW 11th St Deerfield Beach, FL 33442-8137	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Valley Forge Insurance Company</td> <td>20508</td> </tr> <tr> <td>INSURER B: National Fire Insurance of Hartford</td> <td>20478</td> </tr> <tr> <td>INSURER C: The Continental Insurance Company</td> <td>35289</td> </tr> <tr> <td>INSURER D: Evanston Insurance Company</td> <td>35378</td> </tr> <tr> <td>INSURER E: AGCS Marine Insurance Company</td> <td>22837</td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Valley Forge Insurance Company	20508	INSURER B: National Fire Insurance of Hartford	20478	INSURER C: The Continental Insurance Company	35289	INSURER D: Evanston Insurance Company	35378	INSURER E: AGCS Marine Insurance Company	22837	INSURER F:	
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INSURER F:															

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	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 <input checked="" type="checkbox"/> Contractual <input checked="" type="checkbox"/> X, C, & U GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	X	X	2077256991	07/31/2022	07/31/2023	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	X	X	2095076554	07/31/2022	07/31/2023	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0	X	X	2095076568	07/31/2022	07/31/2023	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	2077257008	07/31/2022	07/31/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D	Pollution	X	X	CPLMOL107467	07/31/2021	07/31/2023	\$2,000,000/\$4,000,000
E	Lease/Rented Equi			SML93021954	07/31/2022	07/31/2023	\$150,000
E	Install Floater			SML93021954	07/31/2022	07/31/2023	\$350,000/\$1,000 Ded.


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

RE: Bid, Req-039-23-JJ - 2023 Drainage Infrastructure Improvements

The City of Hollywood is included as an additional insured with respects to the General Liability and Auto policies, when required by written contract.

CERTIFICATE HOLDER

CANCELLATION

The City of Hollywood 2600 Hollywood Blvd. PO Box 229045 Hollywood, FL 33022	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 
---	--



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

MANCINI, ANTHONY JEFFREY

MAN-CON INCORPORATED
3460 SW 11TH STREET
DEERFIELD BEACH FL 33442

LICENSE NUMBER: CGC1526881

EXPIRATION DATE: AUGUST 31, 2024

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.



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE UNDERGROUND UTILITY & EXCAVATION CO HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

MANCINI, GUY ANTHONY

MAN-CON INCORPORATED
3460 SW 11TH STREET
DEERFIELD BCH FL 33442

LICENSE NUMBER: CUC056856

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



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BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000

VALID OCTOBER 1, 2022 THROUGH SEPTEMBER 30, 2023

DBA:
Business Name: MAN CON INCORPORATED

Receipt #: 180-5159
Business Type: GENERAL CONTRACTOR (BUILDING CONTRACTOR)

Owner Name: ANTHONY JEFFREY MANCINI/QUAL
Business Location: 3460 SW 11 ST
DEERFIELD BEACH
Business Phone: 954-427-0230

Business Opened: 03/26/2003
State/County/Cert/Reg: CGC1526881
Exemption Code:

Rooms

Seats

Employees

20

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
54.00	0.00	0.00	0.00	0.00	0.00	54.00

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:

MAN CON INCORPORATED
3460 SW 11 ST
DEERFIELD BEACH, FL 33442

Receipt # 04B-21-00007174
Paid 09/01/2022 54.00

2022 - 2023

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000

VALID OCTOBER 1, 2022 THROUGH SEPTEMBER 30, 2023

DBA:
Business Name: MAN CON INCORPORATED

Receipt #: 189-1779
Business Type: ALL OTHER TYPES CONTRACTOR
(UNDERGROUND UTILITY & EXCT
CTR)

Owner Name: GUY ANTHONY MANCINI/QUAL
Business Location: 3460 SW 11 ST
DEERFIELD BEACH
Business Phone: 954-783-9806

Business Opened: 08/01/1985
State/County/Cert/Reg: CUC056856
Exemption Code:

Rooms **Seats** **Employees** **Machines** **Professionals**
4

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	0.00	0.00	0.00	27.00

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:

MAN CON INCORPORATED
3460 SW 11 ST
DEERFIELD BEACH, FL 33442

Receipt # 04B-21-00007174
Paid 09/01/2022 27.00

2022 - 2023

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000

VALID OCTOBER 1, 2022 THROUGH SEPTEMBER 30, 2023

DBA:
Business Name: MAN CON INCORPORATED

Receipt #: 189-1779
Business Type: ALL OTHER TYPES CONTRACTOR
(UNDERGROUND UTILITY & EXCT
CTR)

Owner Name: GUY ANTHONY MANCINI/QUAL
Business Location: 3460 SW 11 ST
DEERFIELD BEACH
Business Phone: 954-783-9806

Business Opened: 08/01/1985
State/County/Cert/Reg: CUC056856
Exemption Code:

Rooms **Seats** **Employees** **Machines** **Professionals**
4

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	0.00	0.00	0.00	27.00

Receipt # 04B-21-00007174
Paid 09/01/2022 27.00

Business Tax Office

150 NE 2nd Ave.

Deerfield Beach, FL 33441

Phone: (954) 480-4333

E-mail: web.btr@deerfield-beach.com



Business Tax Receipt License

2022 - 2023

License Number: 2023-467281

Date Issued: 8/25/2022

Expires: 9/30/2023

Classification:

GENERAL CONTRACTOR'S OFFICE

MAN-CON INC

3460 SW 11 ST

DEERFIELD BEACH, Florida 33442

Business Location: 3460 SW 11 STREET DFB 33442

Service(s): OFFICE: 1 GNL CNTR; 1 EXCAV

Tax Amount: \$58.80

Add Fees: \$208.40

Penalty: \$0.00

Total Amount Paid: \$267.20

Notice: This tax receipt becomes *NULL* and *VOID* if ownership, business name, or address changed. Business owner **must** apply to Business Tax Office for Transfer.

Detach and retain for your records

- This Business Tax Receipt represents proof of payment of your Business Tax Fee for the period of October 1 to September 30th. Please exercise diligence in maintaining this receipt.
- Once you have obtained a Deerfield Beach Business Tax Receipt, you will be sent a renewal notice each year beginning July 1st, (90 days prior to expiration) to the address listed on the Receipt. Please check all Receipt information and report any errors to us immediately. The City may impose fines and penalties for failure to renew this Receipt.
- Your current Receipt shall be posted so that it is able to be viewed by anyone upon entering your place of business.
- If you change your business name, ownership or location, you must apply for a new Tax Receipt.
- If you have more than one location, you must obtain a Receipt for each location.
- For information on signage regulations, visit the City's website at <http://www.deerfield-beach.com/signage>

Increase traffic to your business by participating in the City's Recycling Rewards Program!

Residents who recycle on a regular basis are accumulating points to be redeemed for rewards at participating businesses to claim discounts and gift certificates. Participating businesses see increased traffic from this program and those that have a commercial recycling account serviced by the City receive additional rewards.

To learn how to have your business become a Rewards Partner, please contact Recycling Perks at ifor@recyclingperks.com. For informatoin on how to set up a commercial recycling account, contact the City's Recycling Division at 954-480-4454.

This Receipt does not represent an endorsement or certification of the business listed herein by the City of Deefield Beach.

State of Florida

Department of State

I certify from the records of this office that MAN-CON, INCORPORATED is a corporation organized under the laws of the State of Florida, filed on January 31, 1985.

The document number of this corporation is H40555.

I further certify that said corporation has paid all fees due this office through December 31, 2021, that its most recent annual report/uniform business report was filed on April 1, 2021, and that its status is active.

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

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Fourteenth day of September,
2021*



Randy R. Lee
Secretary of State

Tracking Number: 3573721933CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40555

Entity Name: MAN-CON, INCORPORATED**Current Principal Place of Business:**3460 S.W. 11TH STREET
DEERFIELD BEACH, FL 33442**Current Mailing Address:**3460 S.W. 11TH STREET
DEERFIELD BEACH, FL 33442 US**FEI Number:** 59-2547432**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANCINI, CAROLINE
3460 S.W. 11TH STREET
DEERFIELD BEACH, FL 33442 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	DPT
Name	MANCINI, JEFFREY J.
Address	3460 S.W. 11TH STREET
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	S, VP
Name	MANCINI, ANTHONY J.
Address	3460 S.W. 11TH STREET
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VP, S
Name	MANCINI, LUKE J
Address	3460 S.W. 11TH STREET
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	D
Name	MANCINI, CAROLINE M
Address	3460 S.W. 11TH STREET
City-State-Zip:	DEERFIELD BEACH FL 33442

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: CAROLINE M MANCINI**DIRECTOR****01/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date



ENGINEERING CONTRACTORS

3460 S.W. 11th Street
Deerfield Beach, Florida 33442

Phone: (954) 427-0230
Fax: (954) 427-8133

February 22, 2023

RE: Financial Statement

To Whom It May Concern:

We at Man Con Inc., would like to thank you for the opportunity to serve The City of Hollywood; however, our financial statement is proprietary and confidential and therefore, we do not wish it to be made public.

Our financial records are available for your appropriate staff to review at our main office in Deerfield Beach, FL. Please advise us 48 hours in advance.

Man-Con's current ratio (assets / liabilities):

For fiscal year ending 7/31/15 - 26
For fiscal year ending 7/31/16 - 13
For fiscal year ending 7/31/17 - 42
For fiscal year ending 7/31/18 - 12
For fiscal year ending 7/31/19 - 6
For fiscal year ending 7/31/20 - 8
For fiscal year ending 7/31/21 - 15
For fiscal year ending 7/31/22 - 12

If you have any questions regarding our financial information, please feel free to contact our Controller, Maria Palkovics at (954) 427-0230.

Sincerely,

A blue ink signature of Anthony Mancini, written in a cursive style.

Anthony Mancini - Vice President