



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

PROPOSAL DOCUMENT REPORT

IFB No. IFB-051-23-JJ

Southern Regional Wastewater Treatment Plant Oxygenation Flow Distribution Box Odor Control System Replacement.

RESPONSE DEADLINE: June 21, 2023 at 3:00 pm

Report Generated: Wednesday, July 26, 2023

CARDINAL CONTRACTORS, Inc. Proposal

CONTACT INFORMATION

Company:

CARDINAL CONTRACTORS, Inc.

Email:

john.taylor@prim.com

Contact:

JOHN TAYLOR

Address:

13794 NW 4th Street, Suite 200
Sunrise, FL 33325

Phone:

(682) 220-1354

Website:

N/A

Submission Date:

Jun 21, 2023 2:30 PM

ADDENDA CONFIRMATION

Addendum #1

Confirmed Jun 19, 2023 3:29 PM by JOHN TAYLOR

Addendum #2

Confirmed Jun 19, 2023 3:29 PM by JOHN TAYLOR

QUESTIONNAIRE

1. VENDOR REFERENCE FORM*

Please download the below documents, complete, and upload.

- [Vendor Reference Form.pdf](#)

Vendor_Reference_Form_Fiesta_Village.pdfVendor_Reference_Form_Sawgrass_WWTP.pdfVendor_Reference_Form_Springtree_W
WTP.pdf

2. 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

3. 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

4. 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

5. 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

6. 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

7. Certificate of Insurance*

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

Insurance_Cert.pdf

8. PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

80-0388786

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

PROPOSAL DOCUMENT REPORT

IFB No. IFB-051-23-JJ

Southern Regional Wastewater Treatment Plant Oxygenation Flow Distribution Box Odor Control System Replacement.

9. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*

11/19/2003

STATE INCORPORATED/ORGANIZED:*

Florida

REMITTANCE ADDRESS*

1760 S. Stemmons FWY, #300

Lewisville, TX 75067

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

Michael Brandao

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.*

PROPOSAL DOCUMENT REPORT

Invitation For Bid - Southern Regional Wastewater Treatment Plant Oxygenation Flow Distribution Box Odor Control System Replacement.

Page 7

Confirmed

PROPOSAL FORM*

Please download the below documents, complete, and upload.

- [Proposal Form.docx](#)

Proposal-Hollywood_Maintenance-JP-MB_Signed_and_Sealed.pdfBid_Guaranty_SRWWTP_Maintenance_-_Hollywood.pdf

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

THIS FORM STATEMENT IS SUBMITTED TO THE CITY OF HOLLYWOOD BY:*

(Print individual's name and title) (Print name of entity submitting sworn statement)

Michael Brandao, Vice President, Cardinal Contractors, Inc.

SWORN STATEMENT CONTINUATION:*

Enter business address:

13794 NW 4th Street, Suite #200, Sunrise, FL 33325

SWORN STATEMENT CONTINUATION:*

Enter Federal Employer Identification Number (FEIN) is:

If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement.

80-0388786

SWORN STATEMENT CONTINUATION:*

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.

N/A

SWORN STATEMENT CONTINUATION:*

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.

Confirmed

SWORN STATEMENT CONTINUATION:*

PROPOSAL DOCUMENT REPORT

IFB No. IFB-051-23-JJ

Southern Regional Wastewater Treatment Plant Oxygenation Flow Distribution Box Odor Control System Replacement.

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

Confirmed

SWORN STATEMENT CONTINUATION:*

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.)

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).

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.

SWORN STATEMENT CONFIRMATION*

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

PROPOSAL DOCUMENT REPORT

IFB No. IFB-051-23-JJ

Southern Regional Wastewater Treatment Plant Oxygenation Flow Distribution Box Odor Control System Replacement.

ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

Confirmed

PRICE TABLES

BASE BID

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Mobilization (shall not exceed 3% of the sum of Bid Items No. 2 and No. 3).	1	Lump Sum	\$93,000.00	\$93,000.00
2	All work associated with the Demolition Phase including but not limited to, all general, civil, mechanical, electrical, structural, instrumentation, controls work elements, as detailed in the Contract Documents.	1	Lump Sum	\$20,000.00	\$20,000.00
3	All work required for the complete furnishing, delivery and installation of odor control facilities and instrument air handling system as required in the Contract Documents. This item includes, but is not limited to, all general, civil, mechanical, structural, architectural, electrical, instrumentation and control, equipment testing, startup services and construction sequencing required for a complete and operable system.	1	Lump Sum	\$2,840,000.00	\$2,840,000.00
4	Allowance for Inspections and Testing, for the price of:	1	Allowance	\$15,000.00	\$15,000.00
5	Allowance for Permits, Licenses and Fees for Government Agencies, for the price of:	1	Allowance	\$60,000.00	\$60,000.00
6	Allowance for Undefined Conditions, for the price of:	1	Allowance	\$10,000.00	\$10,000.00

PROPOSAL DOCUMENT REPORT

IFB No. IFB-051-23-JJ

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Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
7	Consideration for Indemnification	1	Lump Sum	\$10.00	\$10.00
8	Demobilization (shall not exceed 3% of the sum of Bid Items No. 2 and No. 3).	1	Lump Sum	\$93,000.00	\$93,000.00
TOTAL					\$3,131,010.00

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-051-23-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: Lee County, FL

Organization/Firm Contact Name: Lyssa Lott Title: Project Manager

Email: llott@leegov.com Phone: 239-533-5672

Name of Referenced Project: Fiesta Village WRF Sludge & NaOCL Sys. Contract No: _____

Date Services were provided: 07/2019-11/2022 Project Amount: \$6.4M

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):
 New high solids centrifuge with new platform, cake conveyance, piping, pumps & valves, new sludge pumps, piping & valves, reclaimed water pumps, piping & valves, electrical & instrumentation improvements, pre-engineered canopy, sodium hypo feed pumps/piping & valves

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):

****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:

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-051-23-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: City of Sunrise

Organization/Firm Contact Name: Tim Welch Title: Project Manager

Email: twelch@sunrisefl.gov Phone: 954-888-6055

Name of Referenced Project: Sawgrass WWTP Reuse Facility-Ph1 Contract No: _____

Date Services were provided: 11/2015-8/2016 Project Amount: \$15M

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):
 Construction of 9 MGD WWTP expansion

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):

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

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-051-23-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: City of Sunrise

Organization/Firm Contact Name: Tim Welch Title: Project Manager

Email: twelch@sunrisefl.gov Phone: 954-888-6055

Name of Referenced Project: Springtree WWTP-Headworks Impr. Contract No: _____

Date Services were provided: 10/2019-10/2022 Project Amount: \$9.3M

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):
 Rehab the existing headworks structure at the Springtree WWTP

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):

****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:		

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-051-23-JJ
 Reference for: Cardinal Contractors, Inc.

Organization/Firm Name providing reference: Desoto County BOCC

Organization/Firm Contact Name: Cindy Talamantez Title: Project Manager

Email: c.talamantez@desotobocc.com Phone: 863-993-4816

Name of Referenced Project: Regional WWTP Rehab & Repair Contract No: _____

Date Services were provided: 2/2021-current, project is substantially complete Project Amount: \$4.2M

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):
 New headworks and screening devices, odor control system rehab, rehab of steel tanks, new coatings, new chemical dosing system

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):

****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:		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/09/2023

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

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

PRODUCER McGriff Insurance Services, LLC 10100 Katy Freeway, #400 Houston, TX 77043	CONTACT NAME: Rachel Manis-Hyatt PHONE (A/C, No, Ext): 713-877-8975 E-MAIL ADDRESS: rmanis-hyatt@mcgriff.com	FAX (A/C, No): 713-877-8974													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A :Hartford Accident and Indemnity Company</td> <td>22357</td> </tr> <tr> <td>INSURER B :Twin City Fire Insurance Company</td> <td>29459</td> </tr> <tr> <td>INSURER C :Hartford Fire Insurance Company</td> <td>19682</td> </tr> <tr> <td>INSURER D :Axis Surplus Insurance Company</td> <td>26620</td> </tr> <tr> <td>INSURER E :Gotham Insurance Company</td> <td>25569</td> </tr> <tr> <td>INSURER F :Oxford Insurance Company TN LLC</td> <td>17142</td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A :Hartford Accident and Indemnity Company	22357	INSURER B :Twin City Fire Insurance Company	29459	INSURER C :Hartford Fire Insurance Company	19682	INSURER D :Axis Surplus Insurance Company	26620	INSURER E :Gotham Insurance Company	25569	INSURER F :Oxford Insurance Company TN LLC
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INSURER D :Axis Surplus Insurance Company	26620														
INSURER E :Gotham Insurance Company	25569														
INSURER F :Oxford Insurance Company TN LLC	17142														

INSURED
 Cardinal Contractors, Inc.
 13794 NW 4th Street
 Suite 200
 Sunrise, FL 33325

COVERAGES

CERTIFICATE NUMBER:JPYVS2TT

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			61CSEQU3414	02/28/2023	02/28/2024	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 2,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			61CSEQU3415	02/28/2023	02/28/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Physical Damage Ded. \$ 250,000
D F	<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 \$			P-001-000806562-02 1001-23-1	02/28/2023	02/28/2024	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
A B	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	61WNQU3411 61WBRQU3412 61XWEQU3413 \$500,000 Ded/SIR applies to all	02/28/2023	02/28/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Automobile Excess Liability			EX202300003084	02/28/2023	02/28/2024	Each Loss \$ 3,000,000 Aggregate \$ 3,000,000 \$ \$ \$

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

In the event of cancellation by the insurance companies the policies have been endorsed to provide (30) days Notice of Cancellation (except for non-payment) to the Certificate Holder shown below. The City of Hollywood is included as Additional Insured as respects the General Liability, Auto Liability and Umbrella Liability policies. A Waiver of Subrogation is provided in favor of The City of Hollywood as respects the General Liability, Auto Liability, Umbrella Liability and Workers' Compensation policies. General Liability, Auto Liability and Umbrella Liability policies are Primary and Non-Contributory. All as required by written contract and subject to policy terms, conditions and exclusions.

CERTIFICATE HOLDER

The City of Hollywood
 2600 Hollywood Blvd.
 Hollywood, FL 33020

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

R Michael Broadlove, Jr



ADDITIONAL REMARKS SCHEDULE

PRODUCER McGriff Insurance Services, LLC		INSURED Cardinal Contractors, Inc.	
POLICY NUMBER			
CARRIER	NAIC CODE	ISSUE DATE: 06/09/2023	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ **FORM TITLE:** _____

Contractor's Pollution Liability

Term: February 28, 2022 - February 28, 2024
 Policy #: CPO1238582
 Carrier: AIG Specialty Insurance Co

Limits
 Each Claim: \$10,000,000
 Aggregate: \$10,000,000

Coverage Territory includes Canada

PROPOSAL

TO THE MAYOR AND COMMISSIONERS
CITY OF HOLLYWOOD, FLORIDA

SUBMITTED June 19, 2023

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 365 calendar days with final completion within 30 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 any and all addenda.

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 the 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.

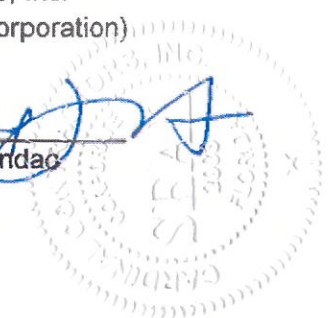
WHEN THE BIDDER IS A CORPORATION:

Cardinal Contractors, Inc.
(Correct Name of Corporation)

By:  _____
(SEAL) Michael Brandao

Vice President
(Official Title)

13794 NW 4th Street, Suite 200, Sunrise, FL
33325
(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**

Cardinal Contractors, Inc.
(Name of Corporation)

RESOLVED that Michael Brandao
(Person Authorized to Sign)

Vice President of Cardinal Contractors, Inc.
(Title) (Name of Corporation)

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

**SRWWTP Maintenance Work
ESSD Project #9626
Bid No. IFB-087-23-JJ**

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

Cardinal Contractors, Inc at a meeting of its Board of
(Name of Corporation)

Directors held on March 1, 2022

By: 
John M. Perisich

Title: Corporate Secretary

(SEAL)

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

- END OF SECTION -

Form 13

Bid Guaranty Form

(Construction)

STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we Cardinal Contractors, Inc., as Principal, and ^{Federal Insurance Company AND}
The Continental Insurance Company, as

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

of the Total Solicitation Price Dollars (\$ 5% TSP) 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 June 14, 2023 ~~20~~ for

2023 SRWWTP MAINTENANCE WORK SOLICITATION

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 7th day of June, 2023, ~~20~~ 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

WHEN THE PRINCIPAL IS A CORPORATION:

Attest:



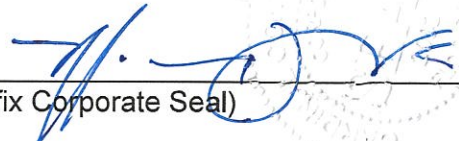
Secretary

Cardinal Contractors, Inc.

Name of Corporation

13794 NW 4th Street, Suite 200, Sunrise, FL 33325

Business Address

By: 

(Affix Corporate Seal)

MICHAEL BRANDAO


Printed Name

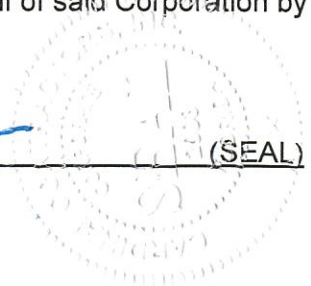
VICE PRESIDENT

Official Title

CERTIFICATE AS TO CORPORATE PRINCIPAL

I, John M. Perisich, certify that I am the secretary of the Corporation named as Principal in the attached bond; that Michael Brandao 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  (SEAL)

Approved SOLICITATION Bond

TO BE EXECUTED BY CORPORATE SURETY:

Attest:

Maria D. Zuniga

~~Secretary~~ Maria D. Zuniga
Attorney-in-Fact
Florida Non-Resident
License No. W100173

Federal Insurance Company AND
The Continental Insurance Company

Corporate Surety
FIC: 202B Hall's Mill Road, Whitehouse Station, NJ 08889
Business Address
CIC: 151 N. Franklin St., Chicago, IL 60606

BY: *Vickie Lacy*
(Affix Corporate Seal)



Vickie Lacy, Florida Non-Resident License No. W104273
Attorney-in-Fact
Benjamin R. Campbell Jr., Florida Resident License No. A038916

Name of Local Agency

3522 Thomasville Rd FL 3

Business Address

Tallahassee, FL 32309-3479

STATE OF ~~FLORIDA~~ TEXAS

Before me, a Notary Public, duly commissioned, qualified and acting, personally appeared,

Vickie Lacy to me well known, who being by me first duly sworn upon
oath says that he is the attorney-in-fact for the Federal Insurance Company AND
The Continental Insurance Company and
that the has been authorized by Federal Insurance Company AND
The Continental Insurance Company to execute the forgoing
bond on behalf of the CONTRACTOR named therein in favor of the City of Hollywood, Florida.

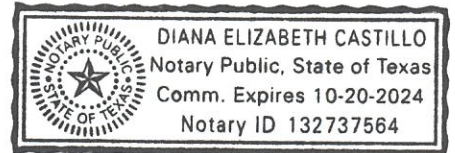
Subscribed and sworn to before me this 7th day of June, 20 23

Diana Castillo

Notary Public, State of ~~Florida~~ Texas
Diana Castillo
Notary ID 132737564

My Commission Expires: October 20, 2024

- END OF SECTION-



Power of Attorney

Federal Insurance Company | Vigilant Insurance Company | Pacific Indemnity Company
Westchester Fire Insurance Company | ACE American Insurance Company

Know All by These Presents, that FEDERAL INSURANCE COMPANY, an Indiana corporation, VIGILANT INSURANCE COMPANY, a New York corporation, PACIFIC INDEMNITY COMPANY, a Wisconsin corporation, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY corporations of the Commonwealth of Pennsylvania, do each hereby constitute and appoint Joseph R. Aubert, Marc W. Boots, Richard Covington, Ashley Koletar, Vickie Lacy, Heather Noles, Ryan Varela and Maria D. Zuniga of Houston, Texas; Susan Golla of San Antonio, Texas

each as their true and lawful Attorney-in-Fact to execute under such designation in their names and to affix their corporate seals to and deliver for and on their behalf as surety thereon or otherwise, bonds and undertakings and other writings obligatory in the nature thereof (other than bail bonds) given or executed in the course of business, and any instruments amending or altering the same, and consents to the modification or alteration of any instrument referred to in said bonds or obligations.

In Witness Whereof, said FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY have each executed and attested these presents and affixed their corporate seals on this 14th day of October, 2022.

Dawn M. Chloros

Dawn M. Chloros, Assistant Secretary

Stephen M. Haney

Stephen M. Haney, Vice President



STATE OF NEW JERSEY
County of Hunterdon SS.

On this 14th day of October, 2022 before me, a Notary Public of New Jersey, personally came Dawn M. Chloros and Stephen M. Haney, to me known to be Assistant Secretary and Vice President, respectively, of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY, the companies which executed the foregoing Power of Attorney, and the said Dawn M. Chloros and Stephen M. Haney, being by me duly sworn, severally and each for herself and himself did depose and say that they are Assistant Secretary and Vice President, respectively, of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY and know the corporate seals thereof, that the seals affixed to the foregoing Power of Attorney are such corporate seals and were thereto affixed by authority of said Companies; and that their signatures as such officers were duly affixed and subscribed by like authority.

Notarial Seal



KATHERINE J. ADELAAR
NOTARY PUBLIC OF NEW JERSEY
No. 2316685
Commission Expires July 16, 2024

[Signature]

Notary Public

CERTIFICATION

Resolutions adopted by the Boards of Directors of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, and PACIFIC INDEMNITY COMPANY on August 30, 2016; WESTCHESTER FIRE INSURANCE COMPANY on December 11, 2006; and ACE AMERICAN INSURANCE COMPANY on March 20, 2009:

*RESOLVED, that the following authorizations relate to the execution, for and on behalf of the Company, of bonds, undertakings, recognizances, contracts and other written commitments of the Company entered into in the ordinary course of business (each a "Written Commitment"):

- (1) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise.
(2) Each duly appointed attorney-in-fact of the Company is hereby authorized to execute any Written Commitment for and on behalf of the Company, under the seal of the Company or otherwise, to the extent that such action is authorized by the grant of powers provided for in such person's written appointment as such attorney-in-fact.
(3) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to appoint in writing any person the attorney-in-fact of the Company with full power and authority to execute, for and on behalf of the Company, under the seal of the Company or otherwise, such Written Commitments of the Company as may be specified in such written appointment, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.
(4) Each of the Chairman, the President and the Vice Presidents of the Company is hereby authorized, for and on behalf of the Company, to delegate in writing to any other officer of the Company the authority to execute, for and on behalf of the Company, under the Company's seal or otherwise, such Written Commitments of the Company as are specified in such written delegation, which specification may be by general type or class of Written Commitments or by specification of one or more particular Written Commitments.
(5) The signature of any officer or other person executing any Written Commitment or appointment or delegation pursuant to this Resolution, and the seal of the Company, may be affixed by facsimile on such Written Commitment or written appointment or delegation.

FURTHER RESOLVED, that the foregoing Resolution shall not be deemed to be an exclusive statement of the powers and authority of officers, employees and other persons to act for and on behalf of the Company, and such Resolution shall not limit or otherwise affect the exercise of any such power or authority otherwise validly granted or vested.

I, Dawn M. Chloros, Assistant Secretary of FEDERAL INSURANCE COMPANY, VIGILANT INSURANCE COMPANY, PACIFIC INDEMNITY COMPANY, WESTCHESTER FIRE INSURANCE COMPANY and ACE AMERICAN INSURANCE COMPANY (the "Companies") do hereby certify that

- (i) the foregoing Resolutions adopted by the Board of Directors of the Companies are true, correct and in full force and effect,
(ii) the foregoing Power of Attorney is true, correct and in full force and effect.

Given under my hand and seals of said Companies at Whitehouse Station, NJ, this 7th day of June, 2023.



Dawn M. Chloros

Dawn M. Chloros, Assistant Secretary

IN THE EVENT YOU WISH TO VERIFY THE AUTHENTICITY OF THIS BOND OR NOTIFY US OF ANY OTHER MATTER, PLEASE CONTACT US AT:
Telephone (908) 903- 3493 Fax (908) 903- 3656 e-mail: surety@chubb.com

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That The Continental Insurance Company, a Pennsylvania insurance company, is a duly organized and existing insurance company having its principal office in the City of Chicago, and State of Illinois, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

Marc W Boots, Vickie Lacy, Richard Covington, Maria D Zuniga, Heather Noles, Joseph R Aulbert, Ashley Koletar, Ryan Varela, Individually

of Houston, TX, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the insurance company and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law and Resolutions, printed on the reverse hereof, duly adopted, as indicated, by the Board of Directors of the insurance company.

In Witness Whereof, The Continental Insurance Company has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 1st day of November, 2022.



The Continental Insurance Company

Paul T. Bruflat

Paul T. Bruflat Vice President

State of South Dakota, County of Minnehaha, ss:

On this 1st day of November, 2022, before me personally came Paul T. Bruflat to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of The Continental Insurance Company, a Pennsylvania insurance company, described in and which executed the above instrument; that he knows the seal of said insurance company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said insurance company and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance company.



My Commission Expires March 2, 2026

M. Bent

M. Bent Notary Public

CERTIFICATE

I, D. Johnson, Assistant Secretary of The Continental Insurance Company, a Pennsylvania insurance company, do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Law and Resolution of the Board of Directors of the insurance company printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance company this 7th day of June, 2023.



The Continental Insurance Company

D. Johnson

D. Johnson Assistant Secretary

Form F6850-4/2012

Go to www.cnasurety.com > Owner / Obligee Services > Validate Bond Coverage, if you want to verify bond authenticity.

Authorizing By-Laws and Resolutions

ADOPTED BY THE BOARD OF DIRECTORS OF THE CONTINENTAL INSURANCE COMPANY:

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the Board of Directors of the Company at a meeting held on May 10, 1995.

“RESOLVED: That any Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Group Vice President to the Secretary of the Company prior to such execution becoming effective.

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execution power of attorneys on behalf of The Continental Insurance Company.

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25th day of April, 2012.

“Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the “Authorized Officers”) to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, “Electronic Signatures”), Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company.”



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

BRANDAO, MICHAEL LUIS

CARDINAL CONTRACTORS, INC.
13794 NW 4TH STREET SUITE 200
SUNRISE FL 33325

LICENSE NUMBER: CGC1529337

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.

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: Cardinal Contractors, Inc.
13794 NW 4th Street, Suite 200 Sunrise, FL 33325

2. Contractor's Telephone Number: 941-377-8555
and e-mail address: john.taylor@prim.com

3. Contractor's License (attach copy): attached
Primary Classification: CGC1529337
Broward County License Number (attach copy): CGC1529337

4. Number of years as a Contractor in construction work of the type involved in this Contract: Incorporated 11/19/2003-approximately 20 years

5. List the names and titles of all officers of Contractor's firm:
President-Robert Bridges, Vice President-Michael Brandao, Secretary-John Perisich
CFO-Blanche Arceneaux, Director-Ken Dodgen, Director-Tom McCormick

6. Name of person who inspected site or proposed work for your firm:
Name: Vincent Capuozzi
Date of Inspection: The site visit after the prebid conference on May 24, 2023

7. What is the last project of this nature you have completed?
City of Sunrise-Springtree Headworks Improvements Project

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:

Tim Welch-City of Sunrise, twelch@sunrisefl.gov, 954-888-0655

Lyssa Lott-Lee County, llott@leegov.com, 239-533-5672

Feng "Jeff" Jiang-City of Hollywood, fjiang@hollywoodfl.org, 954-921-3930

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
-----------------	------	----------------------	-------------------------------	----------------------

see attached list

(Continue list on inset sheet, if necessary)

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

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 dewatering facilities, grit removal facilities,

concrete repair in WWTP headworks and gate replacement. 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.

see attached vendor reference forms-note the originally submitted form for the Sawgrass project

had an incorrect completion date of 08/2016, it should have been 06/2018 and has been corrected

(Add sheets as requested.)

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

Juan Gonzalez

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.

LIST OF SUBCONTRACTORS (NOT USED/See Form 14)

The Bidder shall list below the name and address of each Subcontractor who will perform work under this Contract in excess of one-half percent of the total lump sum base bid price, and shall also list the portion of the work which will be done by such Subcontractor. After the opening of Proposals, changes or substitutions will be allowed with written approval of the City of Hollywood. Subcontractors must be properly licensed and hold a valid Hollywood Certificate of Competency.

	Work to be Performed	Subcontractor's Name / Address
1.	Painting & Coatings	Titans Protective Coatings, LLC 150 Evernia, Street, Suite B, Jupiter, FL 33458
2.	Metal Canopy	J.T. Welding, Inc. 5816 Funston Street, Hollywood, FL 33023
3.	Electrical	Loveland Electric, Inc. 1344 South Killian Drive, Lake Park, FL 33403
4.		
5.		
6.		
7.		
8.		
9.		
10.		

NOTE: Attach additional sheets if required.

END OF SECTION



Cardinal Contractors, Inc
For Month Ending: 7/31/2023

Page -1 of 1

Group	CO-Dept	Job No.	Customer
0	10-4000	31902	CITY OF PEMBROKE PINES
0	10-4000	85000	MISCELLANEOUS CUSTOMER
0	10-4000	85002	BROWARD CBO COMMISSIONERS
0	10-4000	85012	BROWARD CBO COMMISSIONERS
0	10-4000	85015	GASPARILLA ISLAND WATER ASSOCIATION INC
0	10-4000	85021	CITY OF RIVIERA BEACH
0	10-4000	85022	DESOTO COUNTY
0	10-4000	85023	CH2M HILL, INC.
0	10-4000	85025	SARASOTA COUNTY
0	10-4000	85026	PALM BEACH COUNTY
0	10-4000	85027	PALM BEACH COUNTY
0	10-4000	85028	PALM BEACH COUNTY
0	10-4000	85029	ECKLER ENGINEERING, INC.
0	10-4000	85030	CITY OF HOLLYWOOD
0	10-4000	85031	PALM BEACH COUNTY
0	10-4000	85032	CH2M HILL, INC.
0	10-4000	85033	BOCA RATON
0	10-4000	85034	CITY OF HALLANDALE BEACH
0	10-4000	85999	MISCELLANEOUS CUSTOMER
Total	10-4000		
0	10-7000	71502	CITY OF GALVESTON, TEXAS
0	10-7000	85017	BALFOUR BEATTY LLC
Total	10-7000		

Report Total

Description	EstimatedCompletionDate	EstimatedPhysical % Complete
PEMBROKE PINES WWTP DB-PH 1	06/30/2023	99.00%
MISC PROJECTS / EMERGENCY WORK		0.00%
MASTER PUMP STATION CONTROLS UPGRADE	10/30/2023	94.00%
MASTER PUMP STATION 454	08/30/2023	98.00%
WASTEWATER TREATMENT PLANT PHASE 2 EXPANSION	07/31/2023	93.00%
RIVIERA BEACH WTP CHEMICAL FEED	08/30/2023	100.00%
REGIONAL WWTP REHAB AND REPAIR	12/31/2023	89.00%
DL TIPPIN HSPS & MISC IMPROVEMENTS	12/30/2023	87.00%
CARLTON WTP REHAB PHASE 2	09/11/2023	95.00%
PBC - WTP3 & SROC ELECTRICAL IMPROVEMENTS	06/30/2024	87.00%
SRWRF SINGLE-ZONE MONITOR WELL	01/21/2024	7.00%
SRWRF PRE-TREATMENT AND ANALYZER IMPROVEMENTS	03/27/2024	58.00%
CORAL SPRINGS WTP NAOCL SYSTEM UPGRADE	08/30/2023	95.00%
HOLLYWOOD DIW 3 & 4 PUMP STATION	02/09/2025	30.00%
REPUMP STATION NO. 8310 UPGRADES AND IMPROVEMENTS	06/30/2024	16.00%
RO WTP PHASE III & WELLFIELD EXPANSION	01/31/2023	100.00%
BOCA RATON WTP 4-LOG TREATMENT UPGRADE	11/07/2024	0.00%
WATER TREATMENT PLANT REVERSE OSMOSIS SKID ADDITION	08/22/2024	0.00%
PRIOR YEAR WARRANTY WORK - 2021	12/31/2021	0.00%
CITY OF GALVESTON 59TH ST PUMP STATION	09/30/2023	100.00%
NORTHEAST WPP - NORTH PLANT GRT 501,503,504	05/20/2022	100.00%

Original Contract Value	Approved Change Orders	Revised Contract Value	Projected Contract Value
5,391,255.10	415,655.92	5,806,911.02	5,805,054.48
0.00	229,529.51	229,529.51	477,846.44
3,918,250.00	152,746.10	4,070,996.10	4,014,991.11
4,765,650.00	18,896.00	4,784,546.00	4,680,071.92
7,347,550.00	350,000.00	7,697,550.00	8,996,398.62
6,630,354.00	183,400.97	6,813,754.97	6,611,140.98
1,683,745.00	2,560,997.00	4,244,742.00	4,244,742.00
11,949,886.00	985,357.01	12,935,243.01	13,106,129.75
4,670,055.00	0.00	4,670,055.00	4,483,476.35
3,464,500.00	95,116.47	3,559,616.47	3,509,616.47
4,505,812.00	0.00	4,505,812.00	4,325,812.00
4,724,105.00	0.00	4,724,105.00	4,658,696.12
1,093,872.00	0.00	1,093,872.00	1,086,338.41
112,299,970.00	0.00	112,299,970.00	108,636,093.61
2,697,000.00	0.00	2,697,000.00	2,617,850.73
149,000.00	0.00	149,000.00	149,000.00
13,607,150.00	0.00	13,607,150.00	13,307,150.00
4,284,618.00	0.00	4,284,618.00	4,174,618.00
0.00	0.00	0.00	0.00
193,182,772.10	4,398,615.66	198,174,471.08	194,885,026.99
15,887,000.00	6,570,348.69	22,457,348.69	22,457,348.69
6,300,000.00	-1,841,572.00	4,458,428.00	4,458,428.00
22,187,000.00	4,728,776.69	26,915,776.69	26,915,776.69
215,369,772.10	9,127,392.35	225,090,247.77	221,800,803.68

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: CARDINAL CONTRACTORS, LLC
Business Name:

Receipt #: 180-310509
Business Type: GENERAL CONTRACTOR (CERT
GENERAL CONTRACTOR)

Owner Name: MICHAEL BRANDAO
Business Location: 13794 NW 4 ST STE 200
SUNRISE
Business Phone: 941-377-8555

Business Opened: 11/20/2020
State/County/Cert/Reg: CGC1529337
Exemption Code:

Rooms **Seats** **Employees** **Machines** **Professionals**
67

For Vending Business Only						
Number of Machines:			Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
150.00	0.00	0.00	0.00	0.00	0.00	150.00

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:

CARDINAL CONTRACTORS, LLC
13794 NW 4 ST STE 200
SUNRISE, FL 33325

Receipt # WWW-21-00237141
Paid 07/12/2022 150.00

2022 - 2023

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

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Exemption Code:

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67

For Vending Business Only						
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150.00	0.00	0.00	0.00	0.00	0.00	150.00

Receipt # WWW-21-00237141
Paid 07/12/2022 150.00