



**CITY OF HOLLYWOOD, FLORIDA**

**OFFICE OF PROCUREMENT AND CONTRACT COMPLIANCE**

**Department/Office  
Contract Renewal Evaluation Form**

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| <b>Date:</b> 1/14/2026                                   |  |
| <b>Department/Office:</b> Public Works                   | <b>Division/Area:</b> Facilities                       |
| <b>Contact Person:</b> Daniel Maltese                    | <b>Title:</b> Urban Forestry Superintendent            |
| <b>Contact Phone Number:</b> Ext 5517                    | <b>Contact Email:</b> Dmaltese@hollywoodfl.org         |
| <b>Purchase Order/Blanket Purchase Order #:</b> PA600855 |  |
| <b>Contract Expiration Date:</b> 4/2/2026                |  |
| <b>Vendor:</b> Rooster Concrete Corp.                    | <b>Contact Person:</b> Yoandry Perez                   |
| <b>Contact Phone Number:</b> 786-317-0978                | <b>Contact Email:</b><br>roosterconcretecorp@gmail.com |
| <b>Good/Service:</b> concrete supply                     | <b>Solicitation #:</b>                                 |

1. How would you rate the quality of goods/services?

- Excellent       Good       Satisfactory       Poor

2. How would you rate the courteousness of the vendor's personnel?

- Excellent       Good       Satisfactory       Poor

3. With regards to the goods or services provided, how satisfied are you with the following items?  
(Please check one per category)

|                                     | Excellent                           | Good                                | Satisfactory             | Poor                     |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|
| <b>Overall Quality</b>              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Value</b>                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Frequency of Contact</b>         | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Responsiveness to request(s)</b> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4. Are all goods/services on the contract being performed at the agreed upon price, time and terms?

- Yes     No

If no, please explain?

5. If you contacted the vendor, were all your questions and/or issues resolved to your complete satisfaction?

- Yes     No     Did not need to contact the vendor

If no, please explain?

6. Has invoicing been timely, accurate and in accordance with the contract?

Yes  No

If no, please explain?

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7. Does the Department/Office recommend renewing a contract based upon the available renewal options when the current agreement expires?

Yes  No

If no, please explain?

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8. Please state any additional comments about your experience with this vendor and the goods/services provided:

Great Contractor.

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Department/Office Director's Name: Joseph S Kroll

Department/Office Director's Signature: 