



PROPOSAL DOCUMENT REPORT

RFQ No. RFQ-094-23-SK

Residential Property Insurance Broker Services

RESPONSE DEADLINE: August 2, 2023 at 3:00 pm

Report Generated: Thursday, August 10, 2023

Abstract Insurance Agency LLC Proposal

CONTACT INFORMATION

Company:

Abstract Insurance Agency LLC

Email:

insurancefromchristine@yahoo.com

Contact:

Christine Onativia

Address:

7744 Taft St
Pembroke Pines, FL 33024

Phone:

(954) 962-7676

Website:

www.abstractinsuranceagency.com

Submission Date:

Jul 31, 2023 4:56 PM

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. Respondent Submittal*

Please Upload your COMPLETE SOQ, in the order and format stated in the solicitation
SOQ.pdf

2. Required Forms and Acknowledgments

VENDOR REFERENCE FORM*

Please download the below documents, complete, and upload three (3) References.

- [Vendor Reference Form.pdf](#)

Vendor_Ref_Form.pdf

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

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

CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS*

The applicant certifies that it and its principals:

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;

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;

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

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

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

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

PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

20-8445385

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

3. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*

2007

STATE INCORPORATED/ORGANIZED:*

Florida

LOCATION OF FIRM'S PRIMARY OFFICE*

Provide firm's primary office location. If a separate address is used for mailing/billing purposes, please also specify and state the mailing/billing address.

Additional points will be based on the proximity of the primary office location that will perform the work to the City of Hollywood. The address of City Hall is: 2600 Hollywood Blvd., Hollywood, FL 33020.

7744 Taft St Pembroke Pines ,FL 33024

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

Christine Onativia - Owner/ Insurance Agent

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

4. 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)

Christine Onativia - Owner/ Insurance Agent

SWORN STATEMENT CONTINUATION:*

Enter business address:

7744 Taft St Pembroke Pines, FL 33024

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.

20-8445385

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.

Confirmed

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:*

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 ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

Confirmed

5. Minority, Veteran, and Woman-Owned Business

If applicable, provide documentation demonstrating that the Respondent's company is certified as a minority, veteran, or woman-owned business. The company must have full-time employees located in this state, a permanent place of business located in this state, and is a firm which is at least 51-percent-owned by a minority, veteran, or woman. Formal business designations and certifications provided by local or State governments that meet the criteria shall be provided to document compliance.

MINORITY, VETERAN, AND WOMAN-OWNED BUSINESS*

Does the Respondent meet the criteria for **Minority, Veteran, and Woman-Owned Business**?

Yes

UPLOAD PROOF OF MINORITY, VETERAN, AND WOMAN-OWNED BUSINESS

If you answered "Yes" to question 5.1. above, please upload proof such as formal business designations and certifications provided by local or State governments that meet the criteria.

Corporation_information_with_name_of_women_business_owner_and_EIN.pdf

6. Minimum Qualifications

IS THE AGENT/BROKER IN GOOD STANDING WITH THE FLORIDA DEPARTMENT OF FINANCIAL SERVICES, INSURANCE AGENT AND AGENCY SERVICES DIVISION AND EMPLOYS A 2-20 RESIDENT GENERAL LINES (PROPERTY, CASUALTY, SURETY, MARINE, HEALTH AND MISCELLANEOUS LINES) LICENSED INSURANCE AGENT OF RECORD?*

Yes

IS THE AGENT/BROKER ACTIVELY APPOINTED TO WRITE WITH THE STATE INSURER, CITIZENS INSURANCE CORPORATION?*

Yes

DOES THE AGENT/BROKER HAVE OR WILL BE ABLE TO OBTAIN AN ERRORS AND OMISSIONS POLICY WITH A MINIMUM COVERAGE OF \$1,000,000.00 FOR THEIR BUSINESS?*

Yes

DOES THE AGENT/BROKER UNDERWRITE WITH INSURANCE COMPANIES THAT PROVIDE BUILDER'S RISK FOR A RESIDENTIAL PROPERTY THAT WILL BE INHABITED DURING THE COURSE OF THE HOUSING REHABILITATION CONSTRUCTION?*

Yes



Abstract Insurance Agency LLC
7744 Taft St Pembroke Pines, FL 33024
(p) 954-962-7676 (f)954-962-7678 (email)
abstract_ins@yahoo.com

- Insurance Location: 7744 Taft St Pembroke Pines, FL 33024
- Number of Employees 5
- Year Company was established 2007
- Lines of Insurance provided: Homeowners, Builders Risk, Flood, Condo Unit, Renters, Dwelling Fire, Commercial Property, Commercial Auto, Personal Auto, Personal Liability and Commercial Liability.
- Company Website www.abstractinsuranceagency.com
- Company Email abstract_ins@yahoo.com
- Company Phone# 954-962-7676
- Company Fax # 954-962-7678
- Abstract Insurance Agency has written and renewed over 8,000 policies and has over \$6,000,000 in written premiums.
- Errors & Omissions insurance has been in effect since 2007 with zero claims filed against the policy.

Contact Christine Onativia 954-962-7676 ext 405 with any additional questions.