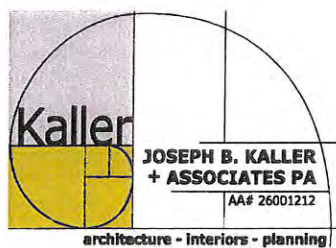




PART I

Section H – Additional Information



H. ADDITIONAL INFORMATION

30. PROVIDE ANY ADDITIONAL INFORMATION REQUESTED BY THE AGENCY. ATTACH ADDITIONAL SHEETS AS NEEDED.

Joseph B. Kaller & Associates, P.A., is an Architectural, Planning and Interior Design Firm located in Hollywood, Florida. Our Offices are a stones throw away from the City of Hollywood's Main Municipal Building at 2417 Hollywood Boulevard. The Firm has been at this location since 1994, which has afforded us a front row seat to witness the growth and evolution of our unique City.

Being a participant in the development and preservation of the City of Hollywood has been a significant source of pride for our Firm. Knowing that the Professional Services, both voluntary and contractual, of Joseph B. Kaller & Associates has helped to shape the positive image and atmosphere that is enjoyed by all today is both humbling and gratifying. As a former member of the Historic Preservation Board and a prior member of the Design Review Board, Development Review Board and the Planning and Development Board, Joseph B. Kaller has been able to channel his vast experience into ensuring that the City remains on the forward trajectory that it travels today.

Joseph B. Kaller & Associates has been responsible for several Projects in the commercial, recreational and residential centers of the City. Like bringing back to life the historical beauty of the Arcade Building located at 1926 Hollywood Boulevard. This Building, like many others, fell victim to the modernization movement of the 1970's and 1980's. With the aid of microfilm and archived photographs from the City of Hollywood, our Firm was able to bit by bit detail all of the intricate molding, dentiles and cornices and restore it to its former glory. Other examples of preservation and restorations done by the Firm are scattered throughout the Hollywood Lakes Community and Downtown.

The Development of the Hollywood Beach Community has also been at the for-front of Joseph B. Kaller & Associates work. The Firm has worked to design projects for private businesses, as well as CRA Public Projects. Being able to work in partnership with the City of Hollywood Community Redevelopment Agency to develop a cohesive look for the Beach which incorporates the different styles of Architecture that can be found throughout the City was a privilege for the Firm. Being asked to participate in that task affirmed the City of Hollywood's confidence in our contribution to the City's built environment.

Our firm uses a variety of the latest software and technology in producing visual aids, renderings and construction documents. This allows us to interface with other firms and consultants as well as provide imagery that helps to explain our vision and design aesthetic. The technology also allows for quick revisions to be made so that projects are kept on task and on budget.

The Joseph Kaller staff is made up of personnel that have worked with us for many years. This means that our staff is also very knowledgeable with regards to the City of Hollywood's Land Development Code, including the latest revised Beach CRA Community Code as well as the expanded Recreational Activities Area. The staff has worked alongside the City of Hollywood's staff members to ensure that projects satisfy the vision of the City of Hollywood's Master Plan.

We have assembled an experienced Team including Savino Miller Design Studio will work closely with us on the future Beach and Downtown Municipal Projects. Savino Miller Design Studio, who are an Award Winning Landscape Architecture Firm have won numerous awards of excellence and awards of merit for their Civic and Cultural work will blend seamlessly along with our firms familiarity of the City of Hollywood and its Coastal Beach and Downtown Areas. This is the same experienced Team will all be involved in the City's future Municipal Projects and other miscellaneous Projects along the Hollywood Beach and Downtown Districts. This Team will remain consistent throughout the duration of our contract with the City of Hollywood.

Lastly, it is that basic willingness to make things right and ensure client satisfaction that sets us apart from other firms. Joseph Kaller has been known to go above and beyond to maintain client satisfaction, meeting deadlines and keeps everything moving ahead like a well oiled machine. It is this unwavering commitment to the project and client that will guarantee success to all participants.

I. AUTHORIZED REPRESENTATIVE

The foregoing is a statement of facts.

31. SIGNATURE



32. DATE

April 4, 2017

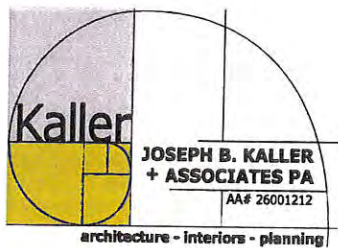
33. NAME AND TITLE

Joseph B. Kaller, President, Architect, LEED AP BD+C



PART II

General Qualifications



1. SOLICITATION NUMBER (If any)
CRA 17-017

(If a firm has branch offices, complete for each specific branch office seeking work.)

2a. FIRM (OR BRANCH OFFICE) NAME Joseph B. Kaller & Associates, P.A.			3. YEAR ESTABLISHED 1986		4. DUNS NUMBER	
2b. STREET 2417 Hollywood Boulevard			5. OWNERSHIP			
2c. CITY Hollywood		2d. STATE FL	2e. ZIP CODE 33020		a. TYPE Private	
6a. POINT OF CONTACT NAME AND TITLE Joseph B. Kaller, President/Architect/Principal			b. SMALL BUSINESS STATUS			
6b. TELEPHONE NUMBER 954-920-5746		6c. E-MAIL ADDRESS joseph@kallerarchitects.com		7. NAME OF FIRM (If block 2a is a branch office)		
8a. FORMER FIRM NAME(S) (If any)			8b. YR. ESTABLISHED		8c. DUNS NUMBER	

[illegible]

11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUES OF FIRM FOR LAST 3 YEARS (Insert revenue index number shown at right)		PROFESSIONAL SERVICES REVENUE INDEX NUMBER	
a. Federal Work	1	1. Less than \$100,000	6. \$2 million to less than \$5 million
b. Non-Federal Work	4	2. \$100,00 to less than \$250,000	7. \$5 million to less than \$10 million
c. Total Work	4	3. \$250,000 to less than \$500,000	8. \$10 million to less than \$25 million
		4. \$500,000 to less than \$1 million	9. \$25 million to less than \$50 million
		5. \$1 million to less than \$2 million	10. \$50 million or greater

The foregoing is a statement of facts.

The foregoing is a statement of facts.	
a. SIGNATURE	b. DATE
	April 4, 2016
c. NAME AND TITLE	

BCRA 17-017

(If a firm has branch offices, complete for each specific branch office seeking work.)

1. SOLICITATION NUMBER (if any)
CRA 17-017

PART II - GENERAL QUALIFICATIONS

(If a firm has branch offices, complete for each specific branch office seeking work.)

2a. FIRM (OR BRANCH OFFICE) NAME GGB Engineering Inc			3. YEAR ESTABLISHED 1998		4. DUNS NUMBER 11-07-2420	
2b. STREET 2699 Stirling Road Suite C 202			5. OWNERSHIP			
2c. CITY Ft. Lauderdale		2d. STATE FL	2e. ZIP CODE 33312			
6a. POINT OF CONTACT NAME AND TITLE Gary G. Bloom, P.E., President			a. TYPE Corporation			
			b. SMALL BUSINESS STATUS NAICS 541330			
6b. TELEPHONE NUMBER 954 986-9899			6c. E-MAIL ADDRESS gary@ggbeng.com			
8a. FORMER FIRM NAME(S) (If any) Not applicable			8b. YR ESTABLISHED		8c. DUNS NUMBER	

[illegible]

11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUES OF FIRM FOR LAST 3 YEARS (Insert revenue index number shown at right)		PROFESSIONAL SERVICES REVENUE INDEX NUMBER	
a. Federal Work	0	1. Less than \$100,000	6. \$2 million to less than \$5 million
b. Non-Federal Work	4	2. \$100,00 to less than \$250,000	7. \$5 million to less than \$10 million
		3. \$250,000 to less than \$500,000	8. \$10 million to less than \$25 million
		4. \$500,000 to less than \$1 million	9. \$25 million to less than \$50 million
c. Total Work	4	5. \$1 million to less than \$2 million	10. \$50 million or greater

12. AUTHORIZED REPRESENTATIVE

The foregoing is a statement of facts.

a. SIGNATURE	b. DATE
GARY G. BLOOM	4/5/17
c. NAME AND TITLE	
Gary G. Bloom, P.E.	

ARCHITECT-ENGINEER QUALIFICATIONS

1. SOLICITATION NUMBER (If any)

PART II - GENERAL QUALIFICATIONS

(If a firm has branch offices complete for each specific branch office seeking work)

2a. FIRM (OR BRANCH OFFICE) NAME **STEPHEN H. GIBBS LAND SURVEYORS, INC.**
(D.B.A.: GIBBS LAND SURVEYORS)

3. YEAR ESTABLISHED
1988

4. DUNS NUMBER
860813112

2b. STREET **2131 HOLLYWOOD BOULEVARD, SUITE 204**

5. OWNERSHIP

a. TYPE **CORPORATION**

2c. CITY **HOLLYWOOD**

2d. STATE
FLORIDA

2e. ZIP CODE
33020

b. SMALL BUSINESS STATUS

6a. POINT OF CONTACT NAME AND TITLE
STEPHEN K. SEELEY, PRESIDENT

7. NAME OF FIRM (If block 2a is a branch office)

6b. TELEPHONE NUMBER
954-923-7666

6c. E-MAIL ADDRESS
SSEELEY@GIBBSLANDSURVEYORS.COM

8a. FORMER FIRM NAME(S) (If any)

8b. YR. ESTABLISHED

8c. DUNS NUMBER

N/A

9. EMPLOYEES BY DISCIPLINE

10. PROFILE OF FIRM'S EXPERIENCE AND ANNUAL AVERAGE REVENUE FOR LAST 5 YEARS

a. Function Code	b. Discipline	c. No. of Employees		a. Profile Code	b. Experience	c. Revenue Index Number (see below)
		(1) FIRM	(2) BRANCH			
02	Administrative	1		A05	Airports;	
06	Architect			A12	Automation; Controls; Instrumentation	
07	Biologist			C16	Construction Management	
08	CADD Technician	2		C18	Cost Estimating	
10	Chemical Engineer			D08	Dredging Studies and Design	
12	Civil Engineer			E09	Environmental Impact Studies, etc.	
14	Computer Programmer			E11	Environmental Planning	
15	Construction Inspector			G03	GPS Services	1
16	Construction Manager			G04	GIS Services	1
18	Cost Engineer / Estimator			H13	Hazardous, Toxic, etc. Remediation	
22	Electronics Engineer			L02	Land Surveying	4
23	Environmental Engineer			R11	Rivers; Canals; Waterways Surveys	1
29	GIS Specialist			S04	Sewage Collection, Treatment, etc.	
33	Hydrographic Surveyor			S07	Solid Wastes; Incineration; Landfill	
38	Land Surveyor	5		S13	Storm Water Handling & Facilities	
55	Soils Engineer			U01	Unexploded Ordnance Remediation	
57	Structural Engineer			U02	Urban Renewal; Community Devel.	
58	Technician			W02	Water Res.; Hydrology; Ground Water	
60	Transportation Engineer			W03	Water Supply; Treatment, etc.	
62	Water Resources Engineer				Environ. Management & Compliance	
	Other Employees				Information Technology	
	Total	8			Management Consulting	

11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUES OF FIRM FOR LAST 3 YEARS

(Insert revenue index number shown at right)

a. Federal Work	
b. Non-Federal Work	
c. Total Work	4

PROFESSIONAL SERVICES REVENUE INDEX NUMBER

1. Less than \$100,000
2. \$100,000 to less than \$250,000
3. \$250,000 to less than \$500,000
4. \$500,000 to less than \$1 million
5. \$1 million to less than \$2 million
6. \$2 million to less than \$5 million
7. \$5 million to less than \$10 million
8. \$10 million to less than \$25 million
9. \$25 million to less than \$50 million
10. \$50 million or greater

12. AUTHORIZED REPRESENTATIVE

The foregoing is a statement of facts.

ARCHITECT – ENGINEER QUALIFICATIONS

1. SOLICITATION NUMBER (# any)
N/A

PART II – GENERAL CONDITIONS

(If a firm has branch offices, complete for each specific branch office seeking work.)

2a. FIRM (OR BRANCH OFFICE) NAME



Coastal Systems International, Inc.

3. YEAR ESTABLISHED
1995

4. DUNS NUMBER
835411604

2b. STREET

464 South Dixie Highway

2c. CITY

Coral Gables

2d. STATE

Florida

2e. ZIP CODE

33146

6a. POINT OF CONTACT NAME AND TITLE

Mr. R. Harvey Sasso, P.E., President

6b. TELEPHONE NUMBER

(305) 661-3655

6c. E-MAIL ADDRESS

rhsasso@coastalsystemsint.com

5. OWNERSHIP

a. TYPE

Corporation

b. SMALL BUSINESS STATUS

7. NAME OF FIRM (If block 2a is a branch office)

6a. FORMER FIRM NAME(S) (If any)

Coastal Technology Corporation

8c. YR. ESTABLISHED

1984

8c. DUNS NUMBER

835411604

9. EMPLOYEES BY DISCIPLINE

a. Function Code	b. Discipline	c. No. of Employees		a. Profile Code	b. Experience	c. Revenue Index Number (see below)
		(1) FIRM	(2) BRANCH			
2	Administrative	8		A02	Aerial Photography	1
7	Biologist	2	1	C07	Coastal Engineering	4
8	CADD	4		C15	Construction Management	2
12	Civil Engineer	2		D08	Dredging Studies and Design	2
24	Environmental Scientist	1		E09	Environmental Impact Studies/Assessments	2
29	GIS Technician	1		E10	Environmental & Natural Resources Mapping	2
33/38	Land/Hydrographic Surveyor	2		G04	GIS	1
48	Project Manager	2	1	H01	Harbors, jetties, etc	2
57	Structural Engineer	1		H13	Hydro Survey	1
	Coastal Engineer	1		P06	Planning (Site, Installation & Project)	2
				R06	Rehabilitations (Buildings/Structures)	1
				R11	Rivers, Canals, Waterways	1
				S04	Sewage Collection, Treatment & Disposal	2
				S09	Structural Design	1
				S13	Stormwater Handling	2
				T04	Topographic Survey	1
				W03	Water Supply Treatment & Distribution	1
				R04	Recreational Facilities (Parks, Marinas)	2
Total		23	2			

11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUE OF FIRM FOR LAST 3 YEARS

(insert revenue index number shown at right)

a. Federal Work	0
b. Non-Federal Work	6
c. Total Work	6

PROFESSIONAL SERVICES REVENUE INDEX NUMBER

1. Less than \$100,000
2. \$100,000 to less than \$250,000
3. \$250,000 to less than \$500,000
4. \$500,000 to less than \$1 million
5. \$1 million to less than \$2 million
6. \$2 million to less than \$5 million
7. \$5 million to less than \$10 million
8. \$10 million to less than \$25 million
9. \$25 million to less than \$50 million
10. \$50 million or greater

12. AUTHORIZED REPRESENTATIVE The foregoing is a statement of facts

a. SIGNATURE

c. NAME AND TITLE

Andres Perez, P.E., Engineering Department Head

b. DATE

April 5, 2017

1. SOLICITATION NUMBER (If any)

(If a firm has branch offices, complete for each specific branch office seeking work.)

9. EMPLOYEES BY DISCIPLINE

11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUES OF FIRM FOR LAST 3 YEARS

(Insert revenue index number shown at right)

PROFESSIONAL SERVICES REVENUE INDEX NUMBER

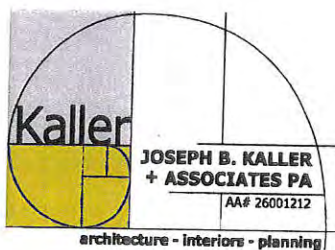
1. Less than \$100,000
2. \$100,00 to less than \$250,000
3. \$250,000 to less than \$500,000
4. \$500,000 to less than \$1 million
5. \$1 million to less than \$2 million
6. \$2 million to less than \$5 million
7. \$5 million to less than \$10 million
8. \$10 million to less than \$25 million
9. \$25 million to less than \$50 million
10. \$50 million or greater

The foregoing is a statement of facts.

AUTHORIZED FOR LOCAL REPRODUCTION



PROFILE OF CONSULTANT



PROFILE OF CONSULTANT

A. State whether your organization is national regional or local.

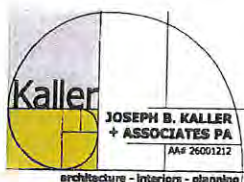
Response: Joseph B. Kaller & Associates, P.A., is a licensed, insured and registered Architectural, Planning and Interior Design Firm in the State of Florida. In addition, Joseph B. Kaller, AIA, the principal, is LEED Certified, which is nationally recognized.

B. State the location of the office from which your work will be performed.

Response: The Firm's Office is located at 2417 Hollywood Boulevard, Hollywood, Florida, less than two blocks east of the City of Hollywood's Main Municipal Building, and approximately five blocks west of the City of Hollywood's Community Redevelopment Offices.

C. Describe the firm, including the size, range of activities, etc.

Response: Joseph B. Kaller & Associate, P.A., is made up of the Principal and Architect, Joseph B. Kaller, AIA; Executive Assistant Laurie Yoder and Eight (8) Full Time Technical and Designed based employees. The employees act as Project Managers as they carry projects from start to finish, dealing directly with the Client, the Building Department and the General Contractor. The Firm enjoys an eclectic design resume. From office buildings to hospitality, residential (single & multi-family), to educational and Public Buildings, our Firm has designed a wide range of projects that also range in size from a small addition to a home in West Hollywood to a large 5 story hotel in Coral Springs to an 8 Story Multi-Family Mixed Use Project in the City of North Miami Beach.



Information on Savino & Miller Design Studio, Delta "G" Engineering and Gary Bloom GGB Engineering, and the remaining Consultants of the Team have included their Standard Form 330 Sections H and Part II.

D. Engagements in the last four years.

Response: The following are a list and description of similar Municipal and other engagements performed within the past four (4) years.

1. Garfield Garage and Community Center
300 Connecticut Street
Hollywood, Florida 33019
Description: A new 408 vehicle Five Story Cast-In Place parking Garage, with a Two Story Community Center with a connection to Charnow Park.
Representative: Lorie Mertens-Black
Telephone #: (954) 921-3535
2. Hollywood Beach Resort Parking Garage
101 North Ocean Drive 4
Hollywood, Florida 33019
Description: An Exterior Façade Renovation and Life Safety Upgrade of an existing 800 vehicle Parking Garage.
Representative: Gary Jaffe
Telephone #: (301) 652-6366
3. Barry University
421 North 21st Avenue
Hollywood, Florida 33020
Description: Interior & Exterior Renovation and Adaptive Reuse of a City Fire Station #5, into a University Campus of Anesthesia and Related Medical Sciences.
Representative: Jitendra Patel
Telephone #: (954) 921-3900
4. Sheldon Hotel
1000 North Broadwalk
Hollywood, Florida 33019
Description: Interior & Exterior Renovation of an existing 4-Story, 44 Room, 1940's Post War Building located along the Historical Hollywood Central Beach Broadwalk.
Representative: Sebastian Soladz
Telephone #: (917) 664-6926



CAPITAL PROJECT

PROJECT NO: CRA17-017



5. Nick's Bar & Grille
1214 North Broadwalk
Hollywood, Florida 33019
Description: New 3-Story Restaurant and bar Building to be located along the Hollywood Central Beach Broadwalk.
Representative: Carl Ferro
Telephone #: (954) 471-3034
6. Hollywood Boulevard Intracoastal Bridge
Hollywood, Florida 33019
Description: Design of a New Bridge Operator's Tower and the Renovation of the existing Bridge Operator's Tower located on the Hollywood Boulevard Intracoastal Bridge.
Representative: Susan Goldberg
Telephone #: (954) 924-2980
7. Nevada Nebraska Garage
327 Nebraska St
Hollywood, Florida
Description: Design of a New 7 Story, 304 Space, Cast-In Place Public Parking Garage.
Representative: Susan Goldberg and Moe Anuar
Telephone #: (954) 921-3993

E. Litigation History:

Response: There is a Litigation "Pending" on a Renovation of a Single Family Residence. The Owner of the Residence directly hired an uninsured Surveyor who incorrectly surveyed the existing Finish Floor Elevation of the Residence.

F. Describe the experience in conducting similar projects for each of the staff assigned to the engagement. Describe the relevant educational background of each individual.

Response: The attached individual resumes describe the background, experience with similar projects and the educational background of each individual assigned to this project.



CAPITAL PROJECT
PROJECT NO: CRA17-017



Commitment: Our team is committed to using the same personnel consistently under the Contract to achieve accuracy and completeness of documents and efficient project execution.

G. Describe the organization of the proposed project team, detailing the level of involvement, field of expertise and estimated hours for each member of the team. The Architectural Firm must be the primary firm and registered in the State of Florida.

Response: The project team will be headed by Joseph B. Kaller & Associates, the primary firm registered in the State of Florida with Savino & Miller Design Studio, Delta "G" and GGB Engineering, Inc. as the Key team members along with Wingerter Laboratories, Inc. and Coastal Systems International, Kimley Horn and Stephen Gibbs Surveyors. An organizational chart of the proposed team and team member roles is attached.

Level of Involvement, field of expertise and estimated hours for each member of the team are as listed below. It should be noted that the time involvement for each member will vary based on the project requirements, scope of the work and phase of the project. The estimate of hours below for the key individuals is based upon a probable cost of construction of approximately One Million Dollars and it is provided only as an estimated range.

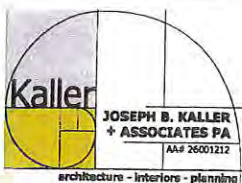
Joseph B. Kaller			
Joseph Kaller	Architecture	Project Architect and Project Manager & Principal	150- 250 (Varies based on Project Scope)
Michele Sherlock	Architecture	Design Architect	200-300 (Varies on Project Scope)
Jaime Gianoli	Architecture	Design Architect	200-300 (Varies on Project Scope)



CAPITAL PROJECT
PROJECT NO: CRA17-017



Savino & Miller			
Adriana Savino	Architectural Urban Design	Principal	150-200 (Varies based on Project Scope)
Barry Miller	Landscape Architecture	Principal	150-200 (Varies on Project Scope)
Qingxin Yu	Landscape Architecture	Landscape Design	200-300
Edward Bann Williams	Landscape Architecture	Landscape Design	200-300
John Sharon	Landscape Architecture	Landscape Design	200-300
Delta "G"			
George San Juan	MEP Engineering	Principal	150-200
Bryce Toolan	Electrical Engineering	Electrical Designer	200-300
Stephen Bender	Mechanical Engineering	Mechanical Designer	200-300
Dario Senalle	Electrical Engineering	Electrical Designer	150-200
Alfred Esqunel	Electrical Engineering	Principal Electrical Designer	
Nolelkis Roman	Plumbing Engineering	Plumbing Designer	200-300
GGB Engineering			
Gary Bloom	Civil Engineering	Civil Design	200-250
Wingerter Labs	Geotechnical Investigation, Testing, Threshold	Geotechnical Investigation, Testing, Threshold	Will Vary Based on Project Needs
Coastal Systems Internations	Coastal Construction	Permitting	Will Vary Based on Project Needs
Gibbs Land Surveyor's			
Stephen K. Seeley	Surveyor	President	30
Stephen H. Gibbs	Surveyor	Project Surveyor	30
Kimley Horn	Traffic Study	Traffic Analysis	Will Vary Based on Project Needs



H. Describe what Municipal Staff Support is anticipated for this type of Engagement.

Response: Municipal Staff support will include the Community Redevelopment Agency, the Planning and Zoning Division, the Utilities and Engineering Division, the Parks and Recreation Division, the Building Department and the Fire Division. The design team will interface with these Municipal Departments as necessary to solicit review and approval of functional, aesthetic, environmental and codes related issues.

I Describe your approach to performing the work. This should include the following points:

I-1 Your role and the Role of other parties involved in the data gathering, data analysis and recommendation process

Response: Should our Firm be so honored by being selected as one of the Firms, the sequence in which we would approach the task would be as follows:

- Carefully Review the requests and requirements of the Project as described by the Client, the City of Hollywood and the Community Redevelopment Agency.
- Gather data on the Site such as location, size, configuration, zoning district and zoning requirements, such as height, setbacks, active uses, parking standards, etc.
- Gather all consultants, including, civil, landscape, lighting, MEP, coastal construction consultant and soil engineer to discuss design and direction. Together we will work and tackle any site challenges that may arise, including but not limited to FEMA requirements and Florida Fish and Wildlife requirements along the coastal areas, traffic flow and the requirements of the Florida Department of Transportation and the Broward County's Traffic Ways Plan.
- All findings would be incorporated into a design development by our office and all of our Consultant Team Members.
- The preliminary design would be presented to the City of Hollywood for any feedback both technical, aesthetic and otherwise. The preliminary design would include both technical information and visual aids to convey the design style of the Project.



CAPITAL PROJECT

PROJECT NO: CRA17-017



- All provided feedback would be incorporated into the Project in order to move forward through the City Design Review process into the Building Permit Review process.

1-2. Your plan for this project outlining major tasks and responsibilities, project time schedule and staff assignment

Response: Our plan for future proposed projects outlining major tasks and responsibilities and staff assignment will be as shown below.

Prior to the beginning of each task, we will meet with representatives from the City of Hollywood and the Community Redevelopment Agency to review the schedule, requirements, approvals and other issues.

SCHEMATIC DESIGN PHASE

1. Meet with City representatives to evaluate possible structure location, capacity requirements, design and aesthetic criteria, etc.
2. Research record documents available with the City's Archive Department to investigate and evaluate site constraints and permitted conditions.
3. Review specific requirements for the proposed Scope of Work as applicable to the specific project and make recommendations to meet the requirements.
4. Review and discuss the alternate options with the Community Redevelopment Agency.
5. Meet with the City staff to discuss and verify compliance with the proposed design standards.
6. Discuss and review incorporation of other ideas to the specific Project. Present and discuss any other innovative features and solutions beyond the stated scope requirements that could be incorporated within the available budget of the Project.
7. Meet with the City Fire Marshal to review code related issues if required.
8. Develop conceptual layouts and prepare conceptual drawings for presentation to City representatives.
9. Evaluate short-term and long-term cost, construction schedule and overall suitability for the proposed Project.



10. Review available geotechnical and site survey information and assist in determining what additional information should be obtained, if required.
11. Prepare schematic phase drawings for the proposed Project and provide copies for review by the City.

DESIGN DEVELOPMENT

Upon written approval of the schematic design phase, further refine the design concepts of the Proposed Project.

1. Functional and Architectural Design
 - a) Prepare Design Development Plans reflecting possible Site Plans, Urban Designs, and or possible renovation and or new construction of proposed public facilities
 - b) Further develop architectural details and selection of materials.
2. Structural Design (If Applicable)
 - a) Further evaluate the structural system selected in the schematic phase design and lay out the structural grid system if the Project is a proposed New Public Facility.
3. Electrical Design
 - a) Evaluate and select type of lighting system and fixtures based upon considerations of construction, economy, and payback periods on potential energy savings for alternative systems.
 - b) Layout the Lighting Plan to provide for economy while considering necessary intensities for security, if applicable.
 - c) Recommend switching and circuitry for energy savings.
4. Landscape Design
 - a.) Prepare Design Development for possible Landscape, Hardscapes and Art in public places.
5. Prepare design development phase drawings that will form the basis for the Construction Documents and present them to the City.
6. Meet with City representatives to review progress of the design and obtain any code interpretations or aesthetic input.



CAPITAL PROJECT

PROJECT NO: CRA17-017



CONSTRUCTION DOCUMENTS

1. Upon written approval of the design development documents, prepare (depending on the Scope of Work), civil, possible environmental remediation, landscape, architectural, structural, signage, electrical, mechanical and plumbing construction drawings.
2. Meet with designated team members to review progress at 30%, 50% and 95% Construction document stages.
3. Perform an in-house quality control review of Construction Documents.

BIDDING

1. Print and distribute plans and specifications.
2. Assist the City in obtaining bids or negotiations with the selected GMP or General Contractor.
3. Prepare any required addenda and clarifications during bidding.
4. Attend a pre-bid conference.
5. Review and advise relative to the acceptability of any proposed substitute materials and equipment proposed by bidders.
6. Review successful bidder's proposal and assist the City in Contractor selection.

CONSTRUCTION ADMINISTRATION

1. Provide construction phase architectural and engineering services, if required during the proposed Project including reviewing shop drawings and material sample submittals, and periodic site visits to the project to verify conformance with the Contract Documents.
2. Provide periodic site visits to observe progress and quality of construction. Written field reports will be issued after each site visit. Site visits will be provided on an as required basis and it is anticipated that an average of one site visit every two weeks will be required during the construction phase for Owner/Designer/ Contractor meetings as necessary.
3. Prepare a final punch list for the project at the substantial completion stage.



CAPITAL PROJECT
PROJECT NO: CRA17-017



4. Provide project closeout services including final inspection, closeout documents and warranties review.
5. Provide a final walk-thru inspection following the final completion of the Project.

PROJECT SCHEDULE

Based on the limited information of the Scope of Services, we propose a guesstimated schedule of time as follows:

Schematic Design	Four weeks (Estimated)
Design Development	Six weeks (Estimated)
Construction Documents	Ten weeks (Estimated)
Bidding & Selection	Six weeks (Estimated)
Construction	Pending the type and scale of the Project.

NOTE: Adequate time will be provided in-between the design phases for City reviews and input. Project time scheduling would be more exact when the Project and Scope of Services are more defined.

STAFF ASSIGNMENT

The staff member roles and their respective responsibilities are described in the table in response to Item "G" earlier.

CURRENT CAPABILITY AND PROJECTED WORKLOAD:

The work for the proposed projects is estimated to start AFTER THE Contract has been executed on July 5th, 2017. That gives all assigned team members ample time to complete project work on hand and be available to meet any project time demands for the City of Hollywood projects starting on or after the Contract Execution. Even though the time demands will depend on the size of the assignment, the lead time available allows us to ensure availability of the assigned personnel to work on the future Projects.

1.3 Submit detailed information outlining the Scope of Services that the proposer is proposing. For any scope requirement Minimum Requirements and Specifications, proposed is to clearly articulate how the proposed solution satisfies the scope requirement. Proposers may offer complimentary or related services or solutions beyond the stated scope requirements. Responses shall be in sufficient detail and include supporting documentation, as applicable, which will allow the Evaluation Committee to complete a full review and score the proposed Scope of Services.



CAPITAL PROJECT

PROJECT NO: CRA17-017



Response:

The Scope of Services that includes Urban Design, Public Art and Municipal Projects each require very specific and specialized approaches in order to fully satisfy the program requirements unique to each. These programs requirements would be provided by the City of Hollywood.

Urban Design Projects implies "close quarters" or infill into an existing highly active, energetic environment. Working within the outline of the program provided by the City, attention would first and foremost be given to the adjacent and surrounding structures and environment as the project would need to work in harmony with the existing. The relationship between the proposed project and pedestrian movement is very important as well as the scale, orientation and accessibility of the project. The Urban Design Project would also need to transition from day to night uses and in that regard safety and security become priorities. Lighting design and the limiting of visual barriers would need to be incorporated into the design. Urban Design speaks to the heart of the City already in motion and any new project needs to contribute to that forward trajectory of the City.

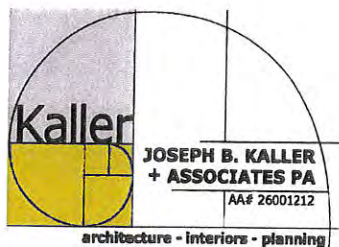
Public Art has helped to define a City and it allows a City to define itself. It can be used as a way that the City of Hollywood says Welcome to All. Public Art speaks to the soul of a City, it can inspire and evoke pride in its citizens. How Public Art is staged and displayed is very important to consider how it will be seen throughout the day and night as the light changes and shadows grow longer. Is the proposed installation meant to be experienced up close or from a distance, from above or below. All of these considerations would need to be explored in conjunction with the City, the Artist, the landscape designer and the lighting designer. Other consultants such as structural and civil may also be included depending on the size and scope of the specific programs. A close collaboration and open communication can evolve into a meaningful experience for all.

Municipal Projects are meant to serve the community in which they are built. They are the "We The People" spaces and places. The design approach should always start from a place of welcome. How will the design have clearly defined entrances and access points that are open and not intimidating. These projects should be oriented in such a way as to encourage easy pedestrian access as well as safe surroundings. Working with the City of Hollywood to clearly define the Scope of Work and with the Planning Department to obtain the zoning parameters that are attached to a specific location, the design team can then create a Schematic Design which represents and serves the community. Both the Building itself and the open spaces need to work in harmony as places to gather and reflect. Depending on the location of the municipal building, it might also be wise to meet with Civic and Community Leaders for their input. Openness and transparency throughout the process will only benefit the final outcome.





SAMPLE INSURANCE CERTIFICATES





CERTIFICATE OF LIABILITY INSURANCE

OP ID: KR

DATE (MM/DD/YYYY)

03/28/2017

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 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 Riemer Insurance Group Hallandale Branch PO Box 250 Hallandale, FL 33008-0250 Stephen L Riemer		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: KALLHO1		FAX (A/C, No):
INSURED Joseph B. Kaller & Assoc Inc 2417 Hollywood Blvd. Hollywood, FL 33020		INSURER(S) AFFORDING COVERAGE INSURER A: Mount Vernon Fire Ins. Co. INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		
		NAIC #		

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC		CP2562611F	01/17/2017	01/17/2018	EACH OCCURRENCE \$ 1,000,000
		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
		MED EXP (Any one person) \$ 5,000				
		PERSONAL & ADV INJURY \$ Excluded				
						GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COMP/OP AGG \$ Excluded
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ☐ NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (PER ACCIDENT) \$
						\$
						\$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DEDUCTIBLE RETENTION \$					EACH OCCURRENCE \$
						AGGREGATE \$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				WC STATU-TORY LIMITS ☐ OTH-ER ☐
						E.L. EACH ACCIDENT \$
						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
BUILDING OR PREMISES, BANK OFF ICE, MERCANTILE OR MFG

CERTIFICATE HOLDER**CANCELLATION**

City of Hollywood
2600 Hollywood Blvd
Hollywood, FL 33020

CITYHO1

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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/05/2017

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 The Gordon Agency 2101 NW Corporate Blvd Suite 211 Boca Raton FL 33431	CONTACT NAME: Kyle Helander	FAX (A/C, No): 561-988-3331	
	PHONE (A/C, No, Ext): 561-988-3330	E-MAIL ADDRESS: KYLE@TGAFL.COM	
INSURED Joseph B. Kaller & Associates, P.A. 2417 Hollywood Blvd Hollywood FL 33020	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A:		
	INSURER B:		
	INSURER C:		
	INSURER D: Associated Industries Insurance Company		
	INSURER E:		
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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPI/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
D	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 Y	N/A	AWC1074650	01/15/2017	01/15/2018	PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

Architectural Firm

CERTIFICATE HOLDER

Joseph B. Kaller & Associates, P.A.
2417 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

Kyle Helander

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ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/06/2017

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PRODUCER USI Insurance Services, LLC 1715 N. Westshore Blvd. Suite 700 Tampa, FL 33607		CONTACT NAME: PHONE (A/C, No, Ext): 813 321-7500 E-MAIL ADDRESS: FAX (A/C, No):	
INSURED Joseph B. Kaller & Associates, P.A. 2417 Hollywood Blvd. Hollywood, FL 33020		INSURER(S) AFFORDING COVERAGE INSURER A: Colony Specialty Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 36927	

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
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability			IAE132590	06/01/2016	06/01/2017	\$1,000,000 per claim \$1,000,000 annl aggr.

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

Professional Liability coverage is written on a claims-made basis.

CERTIFICATE HOLDER

CANCELLATION

For proposal purposes

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

[Signature]



GGBENGI

OP ID: KK

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/04/2017

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PRODUCER Newman Insurance Agency, Inc. 5700 Stirling Road Hollywood, FL 33021- HGF Insurance Services Inc		954-963-9626	CONTACT NAME: HGF Insurance Services Inc PHONE (A/C, No, Ext): 954-963-9626 FAX (A/C, No): E-MAIL ADDRESS:
INSURED GGB Engineering, Inc. 2699 Stirling Rd. # C-202 Ft. Lauderdale, FL 33312		INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Insurance Company INSURER B: Landmark American Ins.#33138 INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 29459	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			21SBABU6645	02/10/2017	02/10/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			21SBABU6645	02/10/2017	02/10/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☐ UMBRELLA LIAB ☐ EXCESS LIAB ☐ DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	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/A	21WECAJ7828	02/14/2017	02/14/2018	PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
B	Professional			LHR756934	04/22/2016	04/22/2017	Occurrence \$ 1,000,000 Aggregate \$ 2,000,000

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

BID CRA 17-017 : Additional Insured endorsement will be added upon acceptance of bid.

CERTIFICATE HOLDER

CANCELLATION

CITY004 CRA/City of Hollywood 2600 Hollywood Blvd. Hollywood, FL 33020	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
--	---

ACORD 25 (2016/03)

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ACORD CERTIFICATE OF LIABILITY INSURANCE**DATE 12/13/16****PRODUCER**

FULTON AGENCY, INC.
1301 E OAKLAND PARK BLVD
OAKLAND PARK, FL 33334
954 776-9015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THE CERTIFICATE DOES NOT AMEND, EXTEND, OR BELOW ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE**COMPANY****A** **NATIONWIDE INSURANCE COMPANY OF AMERICA****COMPANY**
B**COMPANY**
C**COMPANY**
D**INSURED**

DELTA G CONSULTING ENGINEERS, INC.
707 NE 3 AVENUE STE 200
FORT LAUDERDALE, FL 33304-2619

COVERAGES

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.

CO LT	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE MM/DD/YY	POLICY EXPIRATION DATE MM/DD/YY	LIMITS	
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY [] CLAIMS MADE [X] OCCUR OWNER'S CONTRACTOR PROTECTIVE BROAD FORM PROP DAMAGE	ACP5964706453	12/27/16	12/27/17	GENERAL AGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 300,000
					MED EXP (Any one person)	\$ 5,000
					COMBINED SINGLE LIMIT	\$ 1,000,000
A	AUTOMOBILE POLICY ___ ANY AUTO ___ ALL OWNED AUTOS ___ SCHEDULED AUTOS ___ HIRED AUTOS ___ X NON OWNED AUTOS	ACP5964706453	12/27/16	12/27/17	BODILY INJURY (Per Person)	\$
					BODILY INJURY (Per Accident)	\$
					PROPERTY DAMAGE	\$
	EXCESS LIAIBLTY ___ UMBRELLA FORM ___ OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	\$
					AGGREGATE	\$
	WORKER'S COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS	OTHER
					EL EACH ACCIDENT	\$
					EL DISEASE - POLICY LIMIT	\$
					EL DISEASE - EA EMPLOYEE	\$

DESCRIPTION OF OPERATION/LOCATIONS/VEHICLES/SPECIAL ITEMS -
SAME AND TEMPORARY WORK SITES ELSEWHERE IN THE STATE OF FLORIDA.

CERTIFICATE HOLDER
T B A**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/25/2016

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 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 Michael J Hall & Company A&E Professional Insurance Program Inc 19660 10th Ave NE Poulsbo WA 98370		CONTACT NAME: Michael J Hall & Company PHONE (A/C, No, Ext): 360-598-3700 FAX (A/C, No): E-MAIL: certificates@hallandcompany.com ADDRESS: certificates@hallandcompany.com	
INSURED Delta G Consulting Engineers Inc 707 NE 3rd Ave, Suite 200 Fort Lauderdale FL 33304		INSURER(S) AFFORDING COVERAGE INSURER A: Arch Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
2708		NAIC # 11150	

COVERAGES

CERTIFICATE NUMBER: 1805794175

REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$ ☐						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y ☒ N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU-TORY LIMITS ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liab: Claims Made			PAAEP0012500	4/26/2016	4/26/2017	\$3,000,000 Per Claim \$3,000,000 Aggregate

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

CERTIFICATE HOLDERDelta G Consulting Engineers Inc
707 NE 3rd Ave, Suite 200
Fort Lauderdale FL 33304**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

© 1988-2010 ACORD CORPORATION. All rights reserved.

ACORD CERTIFICATE OF LIABILITY INSURANCE**DATE 12/13/16****PRODUCER**

FULTON AGENCY, INC.
1301 E OAKLAND PARK BLVD
OAKLAND PARK, FL 33334
954 776-9015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THE CERTIFICATE DOES NOT AMEND, EXTEND, OR BELOW ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE**COMPANY****A** **NATIONWIDE INSURANCE COMPANY OF AMERICA****COMPANY****B****COMPANY****C****COMPANY****D****INSURED**

DELTA G CONSULTING ENGINEERS, INC.
707 NE 3 AVENUE STE 200
FORT LAUDERDALE, FL 33304-2619

COVERAGES

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.

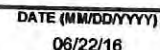
CO LT	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE MM/DD/YY	POLICY EXPIRATION DATE MM/DD/YY	LIMITS	
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY [] CLAIMS MADE [X] OCCUR OWNER'S CONTRACTOR PROTECTIVE BROAD FORM PROP DAMAGE	ACP5964706453	12/27/16	12/27/17	GENERAL AGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 300,000
					MED EXP (Any one person)	\$ 5,000
A	AUTOMOBILE POLICY ___ ANY AUTO ___ ALL OWNED AUTOS ___ SCHEDULED AUTOS ___ HIRED AUTOS X ___ NON OWNED AUTOS	ACP5964706453	12/27/16	12/27/17	COMBINED SINGLE LIMIT	\$ 1,000,000
					BODILY INJURY (Per Person)	\$
					BODILY INJURY (Per Accident)	\$
					PROPERTY DAMAGE	\$
	EXCESS LIAIBLTY ___ UMBRELLA FORM ___ OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	\$
					AGGREGATE	\$
	WORKER'S COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS	OTHER
					EL EACH ACCIDENT	\$
					EL DISEASE - POLICY LIMIT	\$
					EL DISEASE - EA EMPLOYEE	\$

DESCRIPTION OF OPERATION/LOCATIONS/VEHICLES/SPECIAL ITEMS -
SAME AND TEMPORARY WORK SITES ELSEWHERE IN THE STATE OF FLORIDA.

CERTIFICATE HOLDER**T B A****CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



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).

CONTACT NAME: Aon Risk Services, Inc of Florida	
PHONE (A/C, No, Ext): 800-743-8130	FAX (A/C, No): 800-522-7514
EMAIL ADDRESS: ADP.COI.Center@Aon.com	

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Illinois National Insurance Co		23817
INSURER B :		
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

CERTIFICATE NUMBER: 1402736

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. LIMITS SHOWN ARE AS REQUESTED.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES												LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		HEREIN IS SUBJECT TO ALL THE TERMS, LIMITS SHOWN ARE AS REQUESTED.	
INSR LTR	TYPE OF INSURANCE				ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS					
	COMMERCIAL GENERAL LIABILITY									EACH OCCURRENCE \$					
	☐ CLAIMS-MADE ☐ OCCUR									DAMAGE TO RENTED PREMISES (Ea occurrence) \$					
										MED EXP (Any one person) \$					
										PERSONAL & ADV INJURY \$					
	GEN'L AGGREGATE LIMIT APPLIES PER									GENERAL AGGREGATE \$					
	☐ POLICY ☐ PROJECT ☐ LOC									PRODUCTS - COMP/OP AGG \$					
	OTHER									\$					
	AUTOMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident) \$					
	☐ ANY AUTO OWNED AUTOS ONLY									BODILY INJURY (Per person) \$					
	☐ SCHEDULED AUTOS									BODILY INJURY (Per accident) \$					
	☐ HIRED AUTOS ONLY									PROPERTY DAMAGE (Per accident) \$					
	☐ NON-OWNED AUTOS ONLY									\$					
										\$					
	UMBRELLA LIAB									EACH OCCURRENCE \$					
	☐ OCCUR									AGGREGATE \$					
	EXCESS LIAB														
	☐ CLAIMS-MADE														
	DEC		RETENTION \$												
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC 061139701 FL	7/1/2016	7/1/2017	☒ PER STATUTE ☐ OTHER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y/N				N/A					E.L. EACH ACCIDENT \$ 2,000,000					
	(Mandatory in NH)									E.L. DISEASE - EA EMPLOYEE \$ 2,000,000					
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - POLICY LIMIT \$ 2,000,000					
DESCRIPTION OF OPERATIONS / LOCATION / ADDRESS															

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
All worksite employees working for DELTA G CONSULTING ENGINEERS, paid under ADP TOTALSOURCE, INC.'s payroll, are covered under the above stated policy. DELTA G CONSULTING ENGINEERS
is an alternate employer under this policy.

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

At-Risk Services, Inc. of Florida



CERTIFICATE OF LIABILITY INSURANCE

STEPH-3 OP ID: XG

DATE (MM/DD/YYYY)

12/05/2016

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 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
Brown & Brown of Florida, Inc.
1201 W Cypress Creek Rd # 130
P.O. Box 5727
Ft. Lauderdale, FL 33310-5727

CONTACT NAME: SBU/Commercial House Account
PHONE (A/C, No, Ext): 954-776-2222 **FAX (A/C, No):** 954-776-4446
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Twin City Fire Ins. Co.+ 29459**INSURER B:** Foremost Ins Co of Grand + 11185**INSURER C:** Foremost Signature Ins. Co.+ 41513**INSURER D:** Westchester Fire Ins. Co.+ 10030**INSURER E:****INSURER F:**

INSURED Stephen H. Gibbs Land Surveyor
2131 Hollywood Blvd. #204
Hollywood, FL 33020

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER: ☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ ALL OWNED AUTOS ☒ HIRED AUTOS ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS	X		PAS02935254	05/13/2016	05/13/2017	EACH OCCURRENCE 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 - COMPI/OP AGG \$ 4,000,000
B	☒ UMBRELLA LIAB ☐ EXCESS LIAB DED ☒ RETENTION \$ 0 ☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			PAS02935254	05/13/2016	05/13/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
A	☒ PROFESSIONAL LIAB			21WBCPK1118	12/31/2016	12/31/2017	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D				G24401418004	05/13/2016	05/13/2017	Each 1,000,000 Aggregate 1,000,000

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

City of Hollywood is an additional insured in respects to general and auto liability as required by contract

CERTIFICATE HOLDER**CANCELLATION**

HOLLYWO

City of Hollywood
2600 Hollywood Blvd.
Hollywood, FL 33020

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



CERTIFICATE OF LIABILITY INSURANCE

WINGE-1

OP ID: PA

DATE (MM/DD/YYYY)

02/09/2017

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 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

M&L Insurance Agency, Inc.
2855 N. University Dr. Ste. 110
Coral Springs, FL 33085
David Vaandering

CONTACT

NAME: David Vaandering

PHONE

(A/C, No, Ext): 877-304-2323

FAX

(A/C, No): 954-840-0320

E-MAIL**ADDRESS:****INSURER(S) AFFORDING COVERAGE****NAIC #****INSURER A:** Berkley Assurance Company**INSURER B:** Plaza Insurance Company

30945

INSURER C:**INSURER D:****INSURER E:****INSURER F:****INSURED**

WINGERTER LABORATORIES INC
1820 NE 144TH ST
NORTH MIAMI, FL 33181

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:		VUMC0078541-02	01/27/2017	01/27/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ☒ NON-OWNED AUTOS ☒ MED PAY ☒ 2,000 ☐ UMBRELLA LIAB ☐ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		PALGMI000398-03	01/27/2017	01/27/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000 EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

MATERIAL TESTING LABORATORY
SEE ATTACHED VEHICLE SCHEDULE

CERTIFICATE HOLDER**CANCELLATION**

PROOF OF INSURANCE

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

David Vaandering



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/14/2017

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 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

Iron Ridge Insurance
4971 Royal Gulf Circle

Fort Myers FL 33966

INSURED

Wingert Laboratories, Inc.
1820 NE 144th Street

North Miami FL 33181

CONTACT NAME: Terrie Williams**PHONE (A/C No. Ext):** (800) 775-8526**FAX (A/C No.):** (239) 288-7544**E-MAIL ADDRESS:** twilliams@ironridgeinsurance.com**INSURER(S) AFFORDING COVERAGE****NAIC #****INSURER A:** Scottsdale Insurance Company (A+) **41297****INSURER B:****INSURER C:****INSURER D:****INSURER E:****INSURER F:****COVERAGES****CERTIFICATE NUMBER:** CL1731403253**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 WOD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY						
	☐ CLAIMS-MADE ☐ OCCUR						EACH OCCURRENCE \$
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
							PRODUCTS - COMP/OP AGG \$
							\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	☐ POLICY ☐ PRO-JECT ☐ LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						
	☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$
	☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE \$
	☐ DED ☐ RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						PER STATUTE ☐ OTH-ER ☐
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability			VR80002758	3/15/2017	3/15/2018	Per Claim \$1,000,000 Annual Aggregate \$2,000,000

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

CERTIFICATE HOLDER**CANCELLATION****PROOF OF INSURANCE**

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

Lisa Scholder/TERRIE

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/21/2017

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 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
TriGen Insurance Solutions, Inc.
315 SE Misner Blvd
Suite 213
Boca Raton FL 33432

CONTACT
NAME:
PHONE
(A/C, No. Ext): (877) 987-4436 FAX (A/C, No): (954) 252-4426
E-MAIL
ADDRESS: certa@trigensolutions.com

INSURED
Convergence Employee Leasing, Inc.
Convergence Employee Leasing II, Inc.
Convergence Employee Leasing III, Inc.
3951 Baymeadows Road
Jacksonville FL 32217

(904) 731-9014

INSURER(S) AFFORDING COVERAGE
INSURER A: Wesco Insurance Company NAIC # 25011
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

COVERAGES

CERTIFICATE NUMBER: Cert ID 18797

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
	COMMERCIAL GENERAL LIABILITY						
	☐ CLAIMS-MADE ☐ OCCUR						
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	☐ POLICY ☐ PRO-JECT ☐ LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						
	☐ ANY AUTO ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						
	☐ ALL OWNED AUTOS ☐ HIRED AUTOS						
	UMBRELLA LIAB ☐ EXCESS LIAB						
	☐ OCCUR ☐ CLAIMS-MADE						
	DED RETENTION \$						
A	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/A	WNC3235166	9/30/2016	9/30/2017	☒ PER STATUTE ☐ 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
							\$
							\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Coverage provided for all leased employees but not subcontractors of: Wingerter Laboratories, Inc.
Location coverage effective: 9/30/2016

CERTIFICATE HOLDER

CANCELLATION

PROOF OF INSURANCE

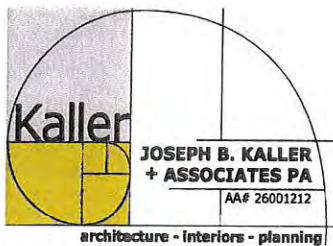
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Carla Bisset



LICENSES AND SMALL/MINORITY BUSINESS INFORMATION



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF ARCHITECTURE & INTERIOR DESIGN

LICENSE NUMBER

AA26001212

The ARCHITECT CORPORATION
Named below IS CERTIFIED
Under the provisions of Chapter 481 FS.
Expiration date: FEB 28, 2019

JOSEPH B. KALLER & ASSOCIATES PA
2417 HOLLYWOOD BLVD
HOLLYWOOD FL 33020



ISSUED: 01/08/2017

DISPLAY AS REQUIRED BY LAW

SEQ # L1701080001221

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF ARCHITECTURE & INTERIOR DESIGN

LICENSE NUMBER

AR0009239

The ARCHITECT
Named below IS LICENSED
Under the provisions of Chapter 481 FS.
Expiration date: FEB 28, 2019

KALLER, JOSEPH B
2417 HOLLYWOOD BLVD
HOLLYWOOD FL 33020



ISSUED: 01/08/2017

DISPLAY AS REQUIRED BY LAW

SEQ # L1701080001142



State of Florida

*Minority, Women &
Service-Disabled Veteran*

Business Certification

Savino Miller Design Studio PA

Is certified under the provisions of
287 and 295.187, Florida Statutes for a period from:

July 29, 2015 to July 29, 2017

Torey Alston, Executive Director

*Florida Department of Management Services
Office of Supplier Diversity*

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF LANDSCAPE ARCHITECTURE

LICENSE NUMBER	
LA6666726	

The LANDSCAPE ARCHITECT
Named below HAS REGISTERED
Under the provisions of Chapter 481 F.S.
Expiration date: NOV 30, 2017

WILLIAMS, EDWARD BANN
41 NORTHEAST 109TH STREET
MIAMI SHORES FL 33161

ISSUED: 10/07/2015

DISPLAY AS REQUIRED BY LAW

SEQ # L1510070001750





STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

BOARD OF LANDSCAPE ARCHITECTURE
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

MILLER, BARRY R
12345 NE 6TH AVE
SUITE A
NORTH MIAMI FL 33161

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

LA0000866

ISSUED: 10/18/2015

REGISTERED LANDSCAPE ARCHITECT
MILLER, BARRY R

HAS REGISTERED under the provisions of Ch. 481 FS.
Expiration date . NOV 30, 2017 L1510180003441

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF LANDSCAPE ARCHITECTURE

LICENSE NUMBER

LA0000866

The LANDSCAPE ARCHITECT
Named below HAS REGISTERED
Under the provisions of Chapter 481 FS.
Expiration date: NOV 30, 2017

MILLER, BARRY R
12345 NE 6TH AVE
SUITE A
NORTH MIAMI FL 33161



ISSUED: 10/18/2015

DISPLAY AS REQUIRED BY LAW

SEQ # L1510180003441



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

BOARD OF ARCHITECTURE & INTERIOR DESIGN
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783

(850) 487-1395

SAVINO & MILLER DESIGN STUDIO, P.A.
12345 NE 6TH AVENUE
SUITE A
NORTH MIAMI FL 33161

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STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

AA0002463

ISSUED: 11/30/2016

ARCHITECT CORPORATION
SAVINO & MILLER DESIGN STUDIO, P.A.

IS CERTIFIED under the provisions of Ch.481 FS.
Expiration date : FEB 28, 2019 L1611300001508

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF ARCHITECTURE & INTERIOR DESIGN

LICENSE NUMBER	
AA0002463	

The ARCHITECT CORPORATION
Named below IS CERTIFIED
Under the provisions of Chapter 481 FS.
Expiration date: FEB 28, 2019

SAVINO & MILLER DESIGN STUDIO, P.A.
12345 NE 6TH AVENUE
SUITE A
NORTH MIAMI FL 33161



ISSUED: 11/30/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1611300001508



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

BOARD OF LANDSCAPE ARCHITECTURE
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

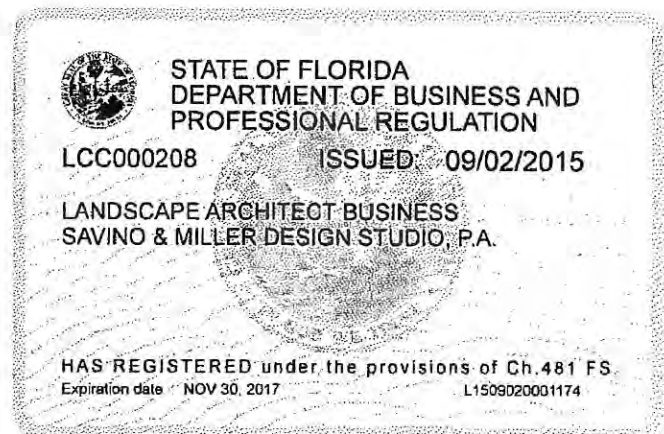
(850) 487-1395

SAVINO & MILLER DESIGN STUDIO, P.A.
12345 NE 6TH AVE
SUITE A
N. MIAMI FL 33161

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

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DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF LANDSCAPE ARCHITECTURE

LICENSE NUMBER	
LCC000208	

The LANDSCAPE ARCHITECT BUSINESS
Named below HAS REGISTERED
Under the provisions of Chapter 481 FS.
Expiration date: NOV 30, 2017

SAVINO & MILLER DESIGN STUDIO, P.A.
12345 NE 6TH AVE
SUITE A
N. MIAMI FL 33161



ISSUED: 09/02/2015

DISPLAY AS REQUIRED BY LAW

SEQ # L1509020001174



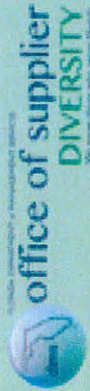
Minority Business Certification

Delta G Consulting Engineers

Is certified under the provisions of
287 and 295.187, Florida Statutes, for a period from:

03/15/2017 to 03/15/2019

Chad Poppell, Secretary
Florida Department of Management Services





**OFFICE OF ECONOMIC AND SMALL BUSINESS DEVELOPMENT
Governmental Center Annex**

115 S. Andrews Avenue, Room A680 • Fort Lauderdale, Florida 33301
954-357-6400 • FAX 954-357-5674 • TTY 954-357-5664

June 29, 2016

**Mr. George San Juan
DELTA G CONSULTING ENGINEERS, INC.
707 NE 3rd Avenue, Suite 200
Fort Lauderdale, Florida 33304**

ANNIVERSARY DATE – Annually, on June 14th

Dear Mr. San Juan:

Broward County is pleased to announce that **Delta G Consulting Engineers, Inc.** has renewed its certification as a **Disadvantaged Business Enterprise [DBE]** in Florida, under a **Unified Certification Program [UCP]** in accordance with 49 CFR, PART 26.

DBE certification continues from your anniversary date, but is contingent upon Delta G Consulting Engineers, Inc. renewing its eligibility annually through this office, Office of Economic and Small Business Development (OESBD). OESBD will notify you in advance of your obligation to provide continuing eligibility documents; however, to assure continued certification is your responsibility. Failure to continue your eligibility will result in immediate action to remove Delta G Consulting Engineers, Inc. as a DBE.

As long as Delta G Consulting Engineers, Inc. is listed in the DBE Directory, it is considered DBE Certified by all Florida UCP Members.

DBE Certification is subject to actions by governmental agencies impacting the disadvantaged status of Delta G Consulting Engineers, Inc.

Delta G Consulting Engineers, Inc. will be listed in Florida's **UCP DBE Directory** which can be accessed via the internet, at <http://www3b.dot.state.fl.us/EqualOpportunityOfficeBusinessDirectory>.

DBE certification is **NOT** a guarantee of work, but enables Delta G Consulting Engineers, Inc. to compete for, and perform, contract work on all USDOT Federal Aid (FAA, FTA and FHWA) projects in Florida as a DBE contractor, sub-contractor, consultant, and sub-consultant or material supplier.

Broward County Board of County Commissioners

Mark D. Bogen • Beam Furr • Dale V.C. Holness • Marty Kiar • Chip LaMarca • Tim Ryan • Barbara Sharief • Lois Wexler
www.broward.org

State of Florida

Board of Professional Engineers

Attests that

Alfred Esquivel , P.E.



FBPE
FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

Is licensed as a Professional Engineer under Chapter 471, Florida Statutes

Expiration: 2/28/2019

Audit No: 228201923002 R

P.E. Lic. No:

45863

State of Florida

Board of Professional Engineers

Attests that

Delta G Consulting Engineers, Inc.



FBPE
FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

Is authorized under the provisions of Section 471.023, Florida Statutes, to offer engineering services to the public through a Professional Engineer, duly licensed under Chapter 471, Florida Statutes.

Expiration: 2/28/2019

Audit No: 228201900758 R

CA Lic. No:

9181

State of Florida

Board of Professional Engineers

Attests that

Stephen Jay Bender, P.E.



Is licensed as a Professional Engineer under Chapter 471, Florida Statutes

Expiration: 2/28/2019

Audit No: 228201924402 R

P.E. Lic. No:

58998

State of Florida

Board of Professional Engineers

Attests that

J. George Sanjuan , P.E.



FBPE
FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

Is licensed as a Professional Engineer under Chapter 471, Florida Statutes

Expiration: 2/28/2019

Audit No: 228201906378 R

P.E. Lic. No:

46100



**OFFICE OF ECONOMIC AND SMALL BUSINESS DEVELOPMENT
Governmental Center Annex**

115 S. Andrews Avenue, Room A680 • Fort Lauderdale, Florida 33301
954-357-6400 • FAX 954-357-5674 • TTY 954-357-5664

February 13, 2017

Mr. George San Juan
DELTA G. CONSULTING ENGINEERS, INC.
707 NE 3rd Avenue, Suite 200
Fort Lauderdale, Florida 33304

Dear Mr. San Juan:

The Broward County Office of Economic and Small Business Development is pleased to announce that your firm's **County Business Enterprise (CBE)** certification has been renewed.

Your firm's certification is continuing from your anniversary date, but is contingent upon the firm verifying its eligibility annually through this office. You will be notified in advance of your obligation to continue eligibility in a timely fashion. However, the responsibility to assure continued certification is yours. Failure to document your firm's continued eligibility for the CBE program within **thirty (30) days** from your anniversary may result in the expiration of your firm's certification. Should you continue to be interested in certification after it has expired, you will need to submit a new application and all required supporting documentation for review.

To review current Broward County Government bid opportunities visit: www.broward.org/Purchasing and click on "Current Solicitations and Results." Also, from this website, you can log into your firm's profile in BidSync to ensure you have added all appropriate classification codes. Bid opportunities over \$3,500 will be advertised to vendors via e-mail and according to classification codes, so please ensure that both the Purchasing Division and OESBD are apprised of your current e-mail address.

Your primary certification group is: **Architecture and Engineering Services**. This is also how your listing in our directory will read. You may access your firm's listing by visiting the Office of Economic and Small Business Development Directory, located on the internet at: www.broward.org/EconDev and click on "Certified Firm Directories."

Your firm may compete for, and perform work on Broward County projects in the following areas:

NAICS CODE: 541330

We look forward to working with you to achieve greater opportunities for your business through county procurement.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sandy-Michael McDonald", is written over a blue circular stamp.

Sandy-Michael McDonald, Director
Office of Economic and Small Business Development

Cert Agency: BC-CBE
ANNIVERSARY DATE: FEBRUARY 15th



Florida Department of Transportation

RICK SCOTT
GOVERNOR

605 Suwannee Street
Tallahassee, FL 32399-0450

JIM BOXOLD
SECRETARY

February 14, 2016

Jill Chin-You, President
WINGERTER LABORATORIES, INC.
1820 NE 144th Street
North Miami, Florida 33181

Dear Ms. Chin-You:

The Florida Department of Transportation has reviewed your application for qualification package and determined that the data submitted is adequate to technically qualify your firm for the following types of work:

- Group 9 - Soil Exploration, Material Testing and Foundations
 - 9.1 - Soil Exploration
 - 9.2 - Geotechnical Classification Laboratory Testing
 - 9.3 - Highway Materials Testing

Your firm is now technically qualified to do work for the Department for minor projects only, enabling your firm to compete for Professional Services projects with fees estimated at below \$500,000.00. This status shall be valid until February 14, 2017 for contracting purposes.

Should you have any questions, please feel free to contact me by email at carliayn.kell@dot.state.fl.us or by phone at 850-414-4597.

Sincerely,

A handwritten signature in blue ink that reads "Carliayn Kell". The signature is written in a cursive, flowing style.

Carliayn Kell
Professional Services
Qualification Administrator

004863

Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY



5331897

BUSINESS NAME/LOCATION

SCHULER ROBERT H PE
1820 NE 144 ST
NORTH MIAMI FL 33181

RECEIPT NO.

RENEWAL
5569182

**EXPIRES
SEPTEMBER 30, 2017**

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER

SCHULER ROBERT H PE

SEC. TYPE OF BUSINESS

212 PROFESSIONAL
PG1030

**PAYMENT RECEIVED
BY TAX COLLECTOR**

\$60.00 09/16/2016
ECHECK-16-177508

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector

000139

Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY



213538

BUSINESS NAME/LOCATION
WINGERTER LABORATORIES INC
1820 NE 144 ST
NORTH MIAMI FL 33181

RECEIPT NO.
RENEWAL
213538

EXPIRES
SEPTEMBER 30, 2017

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER
WINGERTER LABORATORIES INC

SEC. TYPE OF BUSINESS
213 SERVICE BUSINESS

Employee(s) 21

PAYMENT RECEIVED
BY TAX COLLECTOR
\$94.50 09/19/2016
ECHECK-16-178047

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



This is to certify that this laboratory has been accredited for technical competence and found to meet the requirements for performing the test methods listed below for the inspection and testing of construction materials.

Wingter Laboratories Inc

1820 NE 144 Street
North Miami, FL 33181
United States

Reinspection Due Date: 7/15/2017

Accreditation ID: 1004291

AASHTO R18

Aggregate

ASTM Methods: ASTM C117, ASTM C127, ASTM C128, ASTM C131, ASTM C136, ASTM C142, ASTM C28, ASTM C40, ASTM C835, ASTM C866, ASTM C702, ASTM C88, ASTM D4791, ASTM D75, ASTM Specification C1077 - Aggregate
AASHTO Methods: AASHTO T104, AASHTO T11, AASHTO T112, AASHTO T19, AASHTO T2, AASHTO T21, AASHTO T248, AASHTO T255, AASHTO T27, AASHTO T84, AASHTO T85, AASHTO T98

Concrete

ASTM Methods: ASTM C1064, ASTM C1231, ASTM C138, ASTM C143, ASTM C172, ASTM C173, ASTM C231, ASTM C31, ASTM C39, ASTM C42, ASTM C466, ASTM C511, ASTM C817, ASTM C78, ASTM C803, ASTM C805, ASTM C839, ASTM Specification C1077 - Concrete
AASHTO Methods: AASHTO M201, AASHTO R60, AASHTO T118, AASHTO T121, AASHTO T162, AASHTO T169, AASHTO T169, AASHTO T22, AASHTO T23, AASHTO T231, AASHTO T24, AASHTO T308, AASHTO T87

Masonry

ASTM Methods: ASTM C1019, ASTM C140

Soil

ASTM Methods: ASTM D1140, ASTM D1557, ASTM D1583, ASTM D2216, ASTM D2487, ASTM D421, ASTM D422, ASTM D4318 (1), ASTM D4318 (2), ASTM D4944, ASTM D6836, ASTM D698, ASTM Specification D5740 - Soil
AASHTO Methods: AASHTO R58, AASHTO T180, AASHTO T183, AASHTO T217, AASHTO T285, AASHTO T287, AASHTO T310, AASHTO T88, AASHTO T89, AASHTO T90, AASHTO T98
State Methods: FM 5 614, FM 5 615, FM 5 650, FM 5 651, FM 5 652, FM 5 653

Accreditation Date: 8/14/2016

Expiration Date: 10/3/2017

David A. Savage

David A. Savage
Director of Accreditation

The current scope of accreditation can be obtained by visiting the CMEC
Directory of Accredited Laboratories (www.cmec.org)

Christopher J. Robinson

Christopher J. Robinson, P.E.
Executive Director



City of North Miami
776 N.E. 125 Street • North Miami, FL 33161 • 305-893-6511
Business Tax/Certificate of Use Receipt

Issued Date: 10/1/2016
Expiration Date: 9/30/2017
Business Tax Receipt #: BT-000315

ENGINEERING TESTING LABORATORY

WINGERTER LABORATORIES, INC.
1820 NE 144 ST
NORTH MIAMI, FL 33181

Business Name / Address:
WINGERTER LABORATORIES, INC.
1820 NE 144 ST
NORTH MIAMI, FL 33181

A handwritten signature in black ink, appearing to read "Michael A. Etienne", written over a circular stamp or seal.

Michael A. Etienne, Esquire, City Clerk

**NOTICE: BUSINESS TAX RECEIPT MUST BE
TRANSFERRED WHEN BUSINESS IS MOVED
OR SOLD**

NON-TRANSFERABLE • POST IN A CONSPICUOUS PLACE • NON-TRANSFERABLE

STATE OF FLORIDA
WATER WELL CONTRACTOR LICENSE

Issued to
Leon Chin-You

License No. 11325 Expires 7/31/2017

Chushi Chen
DISTRICT CERTIFICATION OFFICER

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BOARD OF PROFESSIONAL GEOLOGISTS

LICENSE NUMBER	
GB480	

The GEOLOGY BUSINESS
Named below IS CERTIFIED
Under the provisions of Chapter 492 FS.
Expiration date: JUL 31, 2018

WINGERTER LABORATORIES INC
1820 NE 144TH ST
NORTH MIAMI FL 33181



ISSUED: 06/13/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1606130001085

Laboratory
Certificate



Miami-Dade County, Florida
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
BOARD AND CODE ADMINISTRATION DIVISION

PRODUCT CONTROL SECTION

11805 S.W. 26 Street-Room 208
Miami, Florida 33175-2474

T (786) 315-2590 Fax (786) 315-2599

This certifies that Wingerter Laboratories, Inc. located at 1820 N.E. 144 St., Miami, FL 33181 is an approved Testing Laboratory in accordance with Miami-Dade County Department of Regulatory and Economic Resources and Protocol TAS301-94, and is Certified to perform the following tests:

TAS105
TAS106
TAS112
TAS114 Appendix D
TAS124 (Excludes Bell Chamber Test)
TAS126 (Nuclear Method Only)
ASTM C67
Asphalt, Soils, Foundation and Concrete (Per Public Works Department Certification)

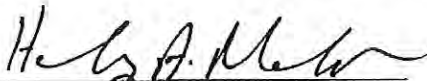
Results of the above mentioned test shall be properly submitted to the Miami-Dade County Department of Regulatory and Economic Resources per TAS301-94, along with all other documentation required for the approval of products. Approved engineer(s) for this laboratory:

Robert H. Schuler, P.E.

This Certification and Registration Approved: February 11, 2016

This Certification and Registration Expires : March 17, 2021

Certification No. : 15-1223.01 Renews: 11-0214.01


Helmy A. Makar, P.E., M.S.
Product Control Section Supervisor
Product Control Section


Americo Segura, M.S.
Quality Assurance Unit Supervisor
Product Control Section

The Miami-Dade County Department of Regulatory and Economic Resources reserves the right to remove this certification for non-compliance with rules and regulations as set by Protocol TAS301-94.

PQ Certificate No.: 2010-590594442-14
Approval Date: 10/7/2016
Expiration Date: 10/31/2016

Miami-Dade County, Florida
Internal Services Department

**ARCHITECTURE/ENGINEERING (A/E)
PRE-QUALIFICATION CERTIFICATE**

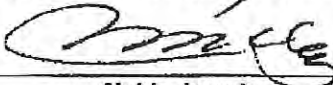
This certificate is hereby issued to: Wingerter Laboratories, Inc.
1820 NE 144th Street
North Miami, FL 33181

The above named applicant is pre-qualified to provide professional A/E services for Miami-Dade County for the period indicated above. The applicant has committed its firm to comply with the specific conditions listed below:

1. Pre-Qualified to offer professional services only in the Miami-Dade County technical categories shown in the "Statement of Technical Qualifications." All technical category restrictions must be strictly adhered to.
2. Pre-Qualification Certification (PQC) consolidates the technical certification, affirmative action plan, and vendor registration into one streamlined certification process resulting in the issuance of a Pre-Qualification Certificate.
3. Report any significant changes, such as contact person, qualifier, ownership, firm address, etc., to Professional Services Certification located at 111 NW 1st Street, Suite 1300, Miami, FL 33128, within 30 days of such a change. Failure to report said changes to the County may result in the immediate suspension or termination of your firm's Pre-Qualification Certification.
4. Firms are responsible for observing and adhering to Miami-Dade County's Administrative Order 3-39 "Standard process for construction of capital improvements, acquisition of professional services, construction contracting, change orders and reporting".
5. Failure to renew your firm's PQC at least thirty (30) days prior to your firm's current expiration date may result in the suspension and/or termination from County programs and current or future contracts until your firm's Pre-Qualification Certification has been properly renewed. Any lapses in the certification of any of the required PQC areas (vendor registration, affirmative action plan, or technical certification) will result in a lapse in your PQC. Firms are responsible for observing and adhering to all submission deadlines.
6. Any renewal applications and/or supporting documents submitted after the application deadline might delay the review of your firm's PQC certification to the next available Technical Certification Committee meeting. The PQC application, submission deadlines, and the Technical Certification Committee meeting calendar can be found on Procurement Management web site located at: <http://www.miamidade.gov/Internalservices/pre-qualification-certification.asp>
7. Permit Miami-Dade County representatives to have access during normal business hours to audit books and records to verify information submitted with this application. This right of access shall commence on the approval date of this certificate and shall terminate on its expiration date.

Please note that if at any time Miami-Dade County's has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the County may refer the matter to the State Attorney's Office and/or other investigative agencies, initiate debarment procedures, and/or pursue sanctions or other legal remedies in accordance with Miami-Dade County policy and/or applicable federal, state and local laws.




Nubla Jarquin
Professional Services Certification
305-375-5637

State of Florida

Department of State

I certify from the records of this office that WINGERTER LABORATORIES INC is a corporation organized under the laws of the State of Florida, filed on January 18, 1949.

The document number of this corporation is 156963.

I further certify that said corporation has paid all fees due this office through December 31, 2016, that its most recent annual report/uniform business report was filed on March 3, 2016, 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 Third day of March, 2016*



Ken DeFuria
Secretary of State

Tracking Number: CC7033392303

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

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

State of Florida

Board of Professional Engineers

Attest:

Wingert Laboratories, Inc.



FBPE
FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

is authorized under the provisions of Section 471.03, Florida Statutes, to offer engineering services to the public through a Professional Engineer, duly licensed under Chapter 471, Florida Statutes.

Expiration: 2/28/2017

Audit No: 228201702205

CA Lic. No:

614

State of Florida

Board of Professional Engineers

Attest:

Wingenter Laboratories, Inc.



FBPE

FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

is authorized under the provisions of Section 471.023, Florida Statutes, to offer engineering services to the public through a Professional Engineer, duly licensed under Chapter 471, Florida Statutes.

Expiration: 2/28/2017

Audit No: 228201702205

CA Lic. No:

614



City of North Miami

776 N.E. 125 Street • North Miami, FL 33161 • 305-893-6511

Business Tax/Certificate of Use Receipt

Issued Date: 10/1/2016

Expiration Date: 9/30/2017

Business Tax Receipt #: BT-000315

ENGINEERING TESTING LABORATORY

Business Name / Address:

WINGERTER LABORATORIES, INC.
1820 NE 144 ST
NORTH MIAMI, FL 33181

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1820 NE 144 ST
NORTH MIAMI, FL 33181

Michael A. Etienne, Esquire, City Clerk

**NOTICE: BUSINESS TAX RECEIPT MUST BE
TRANSFERRED WHEN BUSINESS IS MOVED
OR SOLD**

NON-TRANSFERABLE • POST IN A CONSPICUOUS PLACE • NON-TRANSFERABLE



MIAMI-DADE EXPRESSWAY AUTHORITY

3790 N.W. 21 St. Miami, FL 33142 | 305.637.3277 | 305.637.3283

www.mdxway.com

11-01-2016

Ms. Jill Wingerter Chin-You
President
Wingerter Laboratories, Inc.
1820 NE 144th Street
North Miami, Florida 33181

RE: Local Business Certification

CERTIFICATION #: 16 - 10 - 1242 - 2

EFFECTIVE DATE: 11 / 01 / 2016

EXPIRATION DATE: 10 / 31 / 2017

Dear Ms. Wingerter Chin-You,

The Miami-Dade Expressway Authority ("MDX"), is in receipt of the Local Business Certification Application inclusive of all required documentation, (the "Application"), submitted by your firm, (the "Applicant"). MDX has reviewed and processed the Application pursuant to the requirements of the MDX Local Business Participation Policy (the "Policy").

Based on the information included in the Application, MDX hereby certifies the Applicant as a Local Business that has met the criteria described in the Policy. This certification is valid for one (1) year from the effective date on this letter, conditioned upon the Applicant's continuous compliance with the criteria described in the Policy.

It is the responsibility of the Applicant to ensure its annual recertification prior to expiration. To avoid a lapse in certification, the Applicant shall submit a completed Application along with required documentation to MDX in sufficient time to allow for processing.

An Applicant that provides fraudulent information on the Application or misrepresents its qualifications as a Local Business in a Proposal or Bid submitted to MDX will lose the privilege to Local Business Certification for a period of up to two (2) years. In addition, the firm may be suspended from all future MDX procurements for a period not to exceed two (2) years from the date the misrepresentation was discovered by MDX.

It is the responsibility of the Applicant to notify MDX of any changes in the information provided in the Application that may affect the Applicant's certification status. In addition, MDX reserves the right to require further verification and updated information at any time.

Should you have any questions, please feel free to contact me.

Sincerely,

Helen M. Cordero

Helen M. Cordero, CPPB
Manager of Procurement & Contract Administration



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

BUILDING CODE ADMINISTRATORS & INSPECTOR
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399

(850) 487-1395

CHINYOU, LEON
1820 NE 144TH STREET
NORTH MIAMI FL 33181

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridallicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

BN3292

ISSUED: 09/30/2015

STANDARD INSPECTOR
CHINYOU, LEON

IS CERTIFIED under the provisions of Ch.488 FS.
Expiration date : NOV 30, 2017 L150930002568

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BUILDING CODE ADMINISTRATORS & INSPECTOR

LICENSE NUMBER	CATEGORY
BN3292	BLDG

The STANDARD INSPECTOR
Named below IS CERTIFIED
Under the provisions of Chapter 488 FS.
Expiration date: NOV 30, 2017

CHINYOU, LEON
1820 NE 144 ST
NORTH MIAMI

FL 33181



ISSUED: 09/30/2015

DISPLAY AS REQUIRED BY LAW

SEC # L150930002568



SOUTH FLORIDA WATER MANAGEMENT DISTRICT

REGISTERED VENDOR NO.: 115792

December 2, 2014

Ms. Jill W. Chin-You, President
Wingerter Laboratories, Inc.
1820 NE 144 Street
North Miami, FL 33181

CERTIFICATION EXPIRATION DATE
December 2, 2017

Dear Ms. Chin-You:

Congratulations, the South Florida Water Management District (District) has certified your firm as a Small Business Enterprise (SBE). This certification is valid for three (3) years and may only be applied when business is conducted in the following area(s):

Water Well Contracting & Engineering Testing Lab

Your submittal of bids or proposals to supply other products or services outside of the specialty area(s) noted above will not count toward SBE participation. If you require certification in other specialty areas, please contact the Procurement Bureau, SBE Section, for additional information.

Renewal is required every three (3) years and should be requested a minimum of 45 days prior to the above expiration date.

If any changes occur within your company during the certification period such as ownership, affiliate company status, address, telephone number, licensing status, gross revenue, or any information that relates to your SBE Certification status, you must notify this office in writing immediately. It is imperative that we maintain current information on your company at all times. **FAILURE TO REPORT CHANGES MAY RESULT IN DECERTIFICATION.**

Certification is not a guarantee that your firm will receive work, nor an assurance that your firm will remain in the District's vendor database.

We look forward to a mutually beneficial working relationship.

Sincerely,

A handwritten signature in blue ink that reads "Sandra Hammerstein".

Sandra Hammerstein
Sr. Compliance Specialist
Procurement Bureau

/sh