

**ESCAMBIA COUNTY
FLORIDA**

REQUEST FOR LETTERS OF INTEREST

Design Build Services for Bellview Fire Department Emergency Vehicle Signal

Specification Number PD 07-08.115

Proposals Will Be Received Until: 1:30 p.m., CDT, Wednesday, August 27, 2008

**Office of Purchasing, Room 11.101
213 Palafox Place, Pensacola, FL 32502
Matt Langley Bell III Building
Post Office Box 1591
Pensacola, FL 32597-1591**

Board of County Commissioners
Gene Valentino, Chairman
Marie Young, Vice Chairman
Grover Robinson IV
Kevin W. White
Mike Whitehead

**From:
Claudia Simmons
Purchasing Chief**

All requests for assistance should be made in writing when possible. Responses will be provided to all known submitters in writing. No verbal responses will be provided.

Assistance:

Paul R. Nobles, CPPO, CPPB, FCN, FCPM, FCCM
Purchasing Supervisor
Office of Purchasing
Matt Langley Bell III Building
213 Palafox Place
2nd Floor, Room 11.101
Pensacola, FL 32502
T: 850.595.4918
F: 850.595.4805
e-mail: paul_nobles@co.escambia.fl.us

NOTICE

It is the specific legislative intent of the Board of County Commissioners that NO CONTRACT under this solicitation shall be formed between Escambia County and the awardee vendor until such time as the contract is executed by the last party to the transaction.
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SPECIAL ACCOMMODATIONS:

Any person requiring special accommodations to attend or participate, pursuant to the Americans with Disabilities Act, should call the Office of Purchasing, (850) 595-4980 at least five (5) working days prior to the solicitation opening. If you are hearing or speech impaired, please contact the Office of Purchasing at (850) 595-4684 (TTY).

**Escambia County Florida
Request For Letters of Interest
Proposer's Checklist
Design Build Services for Bellview Fire Department Emergency Vehicle Signal
Specification PD 07-08.115**

How To Submit Your Proposal

- Please review this document carefully. Offers that are accepted by the county are binding contracts. **Incomplete proposals are not acceptable.** All documents and submittals shall be received by the office of purchasing on or before date and hour for specified for receipt. Late proposals will be returned unopened.

One (1) original and six (6) copies of the following documents shall be included with the proposal:

- Letter Of Interest
- GSA Standard Form 330
 - Part II
 - Part I
- Project Approach
- Statements And Documentation

The Following Submittals Are Required Upon Notice Of Award:

- Certificate of Insurance
- Performance & Payment Bonds

Before You Submit Your Proposal, Have You:

- Placed your proposal with all required submittal items in a sealed envelope clearly marked for specification number, project name, name of proposer, and due date and time of proposal receipt?

This form is for your convenience to assist in filling out your proposal only.
Do not return with your proposal

**Design Build Services for Bellview Fire Department Emergency Vehicle Signal
PD 07-08.115**

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Forms marked with a (Double Asterisk) should be returned with Offer.**

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**BELLVIEW FIRE DEPARTMENT – PINE
FOREST RD.**

DESIGN CRITERIA

Escambia County, Florida

Prepared For
ESCAMBIA COUNTY



Prepared By



ENGINEERING & PLANNING RESOURCES, P.C.
PENSACOLA, FL



Bellview Fire Department- Pine Forest Rd. Emergency Vehicle Traffic Signal Improvements

Design Criteria

General Statement

The following design criteria delineates the tasks and the responsibilities of a pre-approved design/build team and Escambia County in connection with the above referenced design/build project. The roadway and traffic control improvements include design and installation of an emergency vehicle traffic signal at the subject location. All design features and construction activities must comply with current Florida Department of Transportation (FDOT) and Escambia County design, construction standards, and specifications.

This criterion memorandum will be updated periodically either in part or in whole as deemed appropriate by Escambia County Office of Transportation and Traffic Operations or Escambia County Fire Rescue. Any updates or modifications to the memorandum will take precedence over previous versions or criteria at the time of approval of the updated material or sections of the memorandum.

Signalization Design:

1. Prepare a complete set of construction contract documents (plans and related specifications) for an emergency vehicle traffic signal.
2. The design shall be developed in accordance (but not limited) to following reference guidelines:
 - FDOT Traffic Engineering Manual - FDOT Manual Number 750-000-005 – March 1999. Sections number 3.4 and 3.5
 - Manual on Uniform Traffic Control Devices (MUTCD) 2003 Edition – Chapter 4F, Traffic Control Signal For Emergency Vehicle Access
 - FDOT Plan Preparation Manual (2007)
 - FDOT Standard Specification for Roadway and Bridge ConstructionAll reference material utilized shall include any updates provided by the originating agency.
3. Activation of this emergency traffic signal shall be initiated by a push button located at the Bellview Fire Station.
4. Coordinate with representatives of Escambia County Fire Rescue to determine optimum location of the push button and time clearance requirements for fire trucks to clear the subject intersection. Provide a memorandum of understanding per the coordination.
5. Coordinate with county traffic engineer regarding equipment and specific design preferences (i.e. signal head phasing preferences and etc.). Provide a memorandum of understanding per the coordination.

6. Coordinate with utilities to identify potential conflicts and proposed power service location.
7. Provide the individual controller timings for this signal.
8. Provide documentation for structural calculations related to the mast arm and foundation design.
9. Provide Maintenance of Traffic (MOT) plans as part of the plan set.
10. Coordinate with County staff as required.
11. Provide design documentation including meeting minutes, traffic technical memorandum, special technical specifications (if required), design calculations, and design recommendations.

Survey Services:

1. Topographic survey on a 50-foot grid from right-of-way to right-of-way referenced to State Plane Coordinates and USC&G Datum; invert, size, and type of all storm water drainage structures in the right-of-way; location of all visible utilities. Underground utilities shall be survey based on utility locates using the Sunshine One system. Survey shall include elevation of lowest line on existing overhead utilities in proximity to the project location.
2. Survey the wetland area(s) if present.

Geotechnical Investigations:

1. Obtain and analyze soil samples from the proposed mast arm pole locations.
2. Prepare a geotechnical investigation report that includes soil borings logs and foundation recommendation.

Permitting:

1. Obtain any necessary permits required to construct this project.
2. Coordinate with FDOT, FDEP, or any other agency as needed to acquire permits.

Post Design Construction Assistance:

1. Provide answers to any RFI as per agreed upon time schedule.
2. Provide staff for Construction Engineering Inspection services.
3. The engineer shall review and approve shop drawings and the county will be provided a set for their review and concurrency as well.

Construction:

1. Construct all items as outlined in the roadway and signalization plans.
2. Maintain work zone in accordance with FDOT MOT Manual.
3. Contractor to submit "as-built" plans.

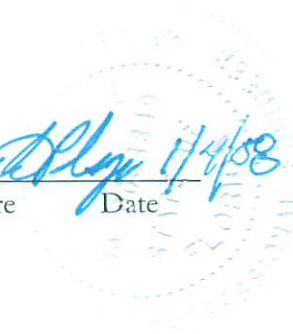
4. Contractor to submit shop drawings

Schedule:

1. The schedule is to be established in conjunction with the fee negotiation

Tasks to be performed by the Escambia County Office of Transportation and Traffic Operations and the Escambia County Fire Rescue:

1. Authorize consultant to proceed with design/build project.
2. Provide GIS data for the project area in digital format.
3. Review submittals and provide comments in ten days.


Leon D. Hays 1/4/08
Signature Date

I. **Information Package**

The intent of this solicitation is to select through the Competitive Consultants Negotiation Act (Florida State Statute 287.055) and Escambia County Code of Ordinance Sections 46-98 through 46-100, a design-build firm to provide design and construction services for Bellview Fire Department emergency vehicle signal.

Anticipated Disciplines (Function Codes SF 330) for this project

Code	Description
12	<u>Civil Engineer</u>
60	Transportation Engineer

Anticipated Experience Categories (Profile Codes SF 330) for this project

Code	Description
C16	Construction Surveying
H07	Highways; Streets; Airfield Paving; Parking Lots
T03	Traffic and Transportation Engineering

II. **Submittal Instructions**

General Instructions to Submitters

All submissions to be considered shall be in the possession of the Office of Purchasing prior to the time of the receipt. Submissions may be mailed to 213 Palafox Place, Room 11.101, Pensacola, Florida 32502 or delivered to the Office of Purchasing, 2nd floor, Room 11.101, Matt Langley Bell, III Bldg., 213 Palafox Place, Pensacola, Florida 32501, in a sealed envelope clearly marked:

Specification Number PD 07-08.115, Design Build Services for Bellview Fire Department Emergency Vehicle Signal, Name of Submitting Firm, Time and Date due.

Note: If you are using a courier service; Federal Express, Airborne, UPS, etc., you must mark airbill and envelope or box with Specification Number and Project Name.

Design Firms desiring to provide on the above referenced project shall submit **one (1) original with manual signature and five (5) copies of their proposal containing all of the requested information by 1:30 p.m., CDT, Wednesday, August 27, 2008.** Submittals received after the above time and/or date shall not be accepted or considered. No exceptions will be made.

All information requested must be provided. Submittals which are substantially incomplete or lack key information may be rejected by the County at its discretion.

The submittals shall be in the format as described in Section IV. Submittal Format. No other formats will be acceptable. The submittal shall be limited to no more than

one hundred (100) pages. Bind each set with spiral or GBC-type binders. Ring notebooks are not acceptable.

Information submitted with your submittal should include documentation to demonstrate your firm's qualifications and abilities to provide the scope of services. The submittal should include sufficient information to permit a clear understanding of similar past projects, especially in Florida, staff experience and abilities, and any other additional, pertinent details to describe the team's capabilities.

All prospective submitters are hereby cautioned not to contact any Board member of Escambia County or any member of the Selection Committee after submittals are opened nor attempt to persuade or promote through other channels until notification that the Selection Committee has arrived at a recommendation of the most qualified firms. Until notification is received, all contacts shall be channeled through the Purchasing Office. Failure to comply with these procedures shall be cause for disqualification of the firm's proposal.

For questions and additional information, contact:

Paul R. Nobles, CPPO, CPPB, FCN, FCPM, FCCM Purchasing Coordinator
Office of Purchasing
Matt Langley Bell III Building
213 Palafox Place, Room 11.109
Pensacola, FL 32501
Tel: (850) 595-4918
Fax: (850) 595-4805
E-mail: paul_nobles@co.escambia.fl.us

Should a Submitter find discrepancies in the proposal documents, or should he be in doubt as to the meaning or intent of any part thereof, he/she must, no later than **seven (7) working days prior to the proposal due date**, request clarification in writing from the Office of Purchasing, which may, as required issue a written addendum to the proposal. Requests shall include the RFP name.

Oral explanations or instructions with respect to the RFP will not be binding; only written addenda shall be relied upon. Any addenda resulting from these requests will be E-Mailed to all listed holders of the RFP no later than **five (5) calendar days** prior to the proposal due date.

Any addendum / amendments to the RFP must be acknowledged with submission of the proposal.

III. FIRMS' EVALUATIONS AND SELECTION

The County shall follow the procedures of the Consultants' Competitive Negotiation Act, Title XIX, Chapter 287, Section 055 of the Florida Statutes. The selection

committee shall consider such factors as:

Selection Criteria and Weighted Importance by Percentage

1. Ability of professional personnel (60%);
Standard Form 330, Sections D, E, and G
2. Past performance (20%);
Standard Form 330, Section F
3. Willingness to meet time and budget requirements (5%);
Standard Form 330, Section H
4. Location (10%);
Standard Form 330, Section C
5. Recent, current, and projected workloads of the firms (5%)
Standard Form 330, Section H
6. Volume of work previously awarded to each firm by the agency, with the object of effecting an equitable distribution of contracts among qualified firms, provided such distribution does not violate the principle of selection of the most highly qualified firms (Criteria to be considered should there be a tie for the most highly qualified firm.)
Standard Form 330, Section H

Award(s) resulting from this solicitation shall be subject to the provisions of Chapter 1-9-5, CONSULTANTS of the Ordinances of Escambia County and Procedure PP-250 VENDOR PERFORMANCE EVALUATIONS of the Purchasing Policies and Procedures of Escambia County.

IV. SUBMITTAL FORMAT

The Submittal shall be divided into sections with tab dividers. The GSA Standard Form (SF)330 shall be used with the addition of three (3) section as described below:

First Item Letter of Interest

Letter of Interest prepared by a corporate officer or principal of the firm authorized to obligate the firm contractually, followed by:

Design Team

GSA Standard Forms 330 available at
<http://www.gsa.gov/Portal/gsa/ep/formslibrary.do?formtype=SF>

Tab 1 Standard Form (SF) 330, Part II

Tab 2 Standard Form (SF) 330, Part I, A-D

Tab 3 Standard Form (SF) 330, Part I, E

Tab 4 Standard Form (SF) 330, Part I, F

Tab 5 Standard Form (SF) 330, Part I, G

The proposers need not be limited to ten projects. List as many projects as necessary, provided they match the Disciplines (Function Codes SF 330) included in this solicitation, to adequately describe those listed in Block 7g. Include the name and telephone number of the Owner's Representative or Contact in Block 8c. *Escambia County checks references.* Be especially careful to provide names, current telephone numbers and fax numbers of owner's representatives that may be contacted by the County.

Tab 6 Standard Form (SF) 330, Part I, H

Build Team

Tab 8 Profile of Submitter

Give corporate profile of firm including:

- (1) brief history of firm including year first organized
- (2) organizational structure, (e.g. LLC, Corp., Partnership, etc.)
- (3) state of incorporation
- (4) number of years in business under present name
- (5) corporate officers
- (6) major shareholders/partners

Tab 9 Bonding / Financial Capacity

- a. Provide a letter from a surety company licensed to issue bonds in the State of Florida or that has an agent licensed to do business in the State of Florida indicating the Submitter's bonding capacity and bonding rate.
- b. Annual dollar workload listed for each of the last five (5) years inclusive of projects per year:

2005	#projects_____	\$_____	total
2004	#projects_____	\$_____	total
2003	#projects_____	\$_____	total
2002	#projects_____	\$_____	total
2001	#projects_____	\$_____	total

- c. List projects for which firm is currently committed including:
 - (1) name & location of each project

- (2) time frame to complete each project
- (3) construction cost of each project.

Tab 10 Key Personnel

- a. List of key personnel who will be assigned to the project indicating their project roles. Such personnel should include, but are not limited to, the Project Manager, Architects, Engineers, On-site Manager (Superintendent), and other key personnel who may be required.
- b. Include a statement committing to the assignment of these proposed persons to the project if firm is selected.
- c. Attach project organization chart indicating the placement of each of the persons listed in response to items “a” above.

For each of the personnel listed above provide the following information:

- 1. Individual's Name and Title
- 2. That Individual's Assignment on this Project
- 3. Number of Years:
 - a. With This Firm
 - b. With Other Firms
- 4. Education
- 5. Current Certification(s) / Registration(s) and state(s) in which held
- 6. Describe specific experience and qualifications relevant to this project

Tab 11 Specific Project Experience

Provide the following information for each of the projects of similar complexity completed by the firm within the past five years:

- 1. Name of Project
- 2. Location of Project
- 3. Owner of Project
- 4. General Scope of Project
- 5. Your Role (Prime, Joint Venture, or Subcontractor) and work your company self-performed
- 6. Construction Cost
- 7. Extent and Type of Work you Subcontracted Out
- 8. Dates of Construction :
 - a. Began
 - b. Completed
- 9. Your Performance Evaluation by Owner, if known
- 10. Were You Terminated or Assessed Liquidated Damages ?
(If yes, attach an explanation)

11. Owner's Point of Contact for Reference

- a. Name
- b. Company
- c. Phone Number
- d. Fax Number

Design / Build Team

Tab 12 Project Approach

Tab 13 Value, Quality and Budget Control

Provide a description of concepts proposed to enhance value, quality and to control costs. Include a description of how construction change orders are minimized and a history of firm performance in this area.

Tab 14 Statements And Documentation

Litigation

- a. List by case name and case number all pending litigation in which submitter is involved as a party or submitter's officers are involved as parties in their official capacity. Include cases pending in any Federal or State jurisdiction, court, commission, regulatory body or other authority having the power to determine the rights of parties appearing before it. Also list all arbitrations submitter is involved in as a party and include the name, location and name & address of the arbitrator(s) for each listing.
- b. Within last five (5) years, has any contract for construction of submitter's been considered in default, suspended or terminated for cause? If so, please attach an explanation of the matter including the name and location of the project, the name and address of the owner's representative, and all pertinent details of the default, suspension or termination.
- c. Within the last five (5) years, has submitter's contract or any portion of the work connected to the contract been completed by the Owner or submitter's surety? If so, please attach an explanation providing the name and location of the project, the name and address of the owner's representative, and all pertinent details of the matter.
- d. Within the last five (5) years, has submitter been debarred or suspended for any reason by any federal, state or local government procurement agency or refrained from bidding on a public project due to an agreement with such procurement agency? If so, please attach a full

explanation.

- e. Within the last five (5) years, has submitter been named in any action, administrative proceeding, or arbitration in which it was alleged that the submitter failed to comply with prompt payment of subcontractors? If so, please attach a full explanation.
- f. Within the last ten (10) years, has the submitter or any predecessor or related entities, or any officers, shareholders/partners or key personnel of the submitter ever been convicted of or pleaded guilty to any crime (a) related to the bid process for contracts on public or private projects or (b) involving fraud or misrepresentation? If so, please attach a full explanation.

Proof of licenses/certifications.

Provide proof of proper State of Florida business licensure and professional certifications/registration(s) in the State of Florida. (As applicable for firms and for architectural/engineering key personnel.)

Provide proof of corporate registration to operate in the State of Florida by the Department of State, Division of Corporations. Information concerning certification with the Secretary of State can be obtained at: <http://ccfcorp.dos.state.fl.us/index.html>.

Conflict of Interest Statement

Provide a notarized statement certifying that no member of your firm ownership, management or staff has vested interest in any aspect of any department of Escambia County. Submittal shall include the disclosure of any potential conflict of interest due to any other clients, contracts or property interests for this project only or a statement saying that there are no conflicts of interest.

Sworn Statement Pursuant To Section 287.133(3)(a), Florida Statutes, On Entity Crimes

Information Sheet for Transactions and Conveyances Corporate Identification.

Provide the information on the forms provided herein for the prime firm or each firm in the professional team if joint venture.

Drug-Free Workplace Form

Certificate Of Authority To Do Business From The State Of Florida

Florida Department of Business and Professional Regulation - License(s), Certification(s), And/Or Registration(s)

Acknowledgment of Addenda (if applicable).

Include any additional information to represent your firm for consideration.

V. INSURANCE

The contractor shall procure and maintain the following described insurance, except for coverages specifically waived by the County. Such policies shall be from insurers with a minimum financial size of VII according to the latest edition of the AM Best Rating Guide. An A or better Best Rating is “preferred”; however, other ratings if “Secure Best Ratings” may be considered. Such policies shall provide coverages for any or all claims which may arise out of, or result from, the services, work and operations carried out pursuant to and under the requirements of the contract documents, whether such services, work and operations be by the contractor, its employees, or by subcontractor(s), or anyone employed by or under the supervision of any of them, or for whose acts any of them may be legally liable.

The contractor shall require, and shall be responsible for assuring throughout the time the agreement is in effect, that any and all of its subcontractors obtain and maintain until the completion of that subcontractor’s work, such of the insurance coverages described herein as are required by law to be provided on behalf of their employees and others.

The required insurance shall be obtained and written for not less than the limits of liability specified hereinafter, or as required by law, whichever is greater.

These insurance requirements shall not limit the liability of the contractor. The County does not represent these types or amounts of insurance to be sufficient or adequate to protect the contractor’s interests or liabilities, but are merely minimums.

Except for workers compensation and professional liability, the contractor’s insurance policies shall be endorsed to name Escambia County as an additional insured to the extent of its interests arising from this agreement, contract or lease.

The contractor waives its right of recovery against the County, to the extent permitted by its insurance policies.

The contractor’s deductibles/self-insured retentions shall be disclosed to the County and may be disapproved by the County. They shall be reduced or eliminated at the option of the County. The contractor is responsible for the amount of any deductible or self-insured retention.

Insurance required of the contractor or any other insurance of the contractor shall be considered primary, and insurance of the County, if any, shall be considered excess, as may be applicable to claims obligations which arise out of this agreement, contract or lease.

Workers Compensation Coverage

The contractor shall purchase and maintain workers compensation insurance for all workers compensation obligations imposed by state law and with employers liability limits of at least \$100,000 each accident and \$100,000 each employee/\$500,000 policy limit for disease, or a valid certificate of exemption issued by the state of Florida, or an affidavit in accordance with Section 440.02(13)(d) and 440.10(1)(g) Florida Statutes.

Contractor shall also purchase any other coverages required by law for the benefit of employees.

General, Automobile and Excess or Umbrella Liability Coverage

The contractor shall purchase and maintain coverage on forms no more restrictive than the latest editions of the commercial general liability and business auto policies of the insurance services office.

Minimum limits of \$1,000,000 per occurrence for all liability must be provided, with excess or umbrella insurance making up the difference, if any, between the policy limits of underlying policies (including employers liability required in the workers compensation coverage section) and the total amount of coverage required.

General Liability Coverage - Occurrence Form Required

Coverage A shall include bodily injury and property damage liability for premises, operations, products and completed operations, independent contractors, contractual liability covering this agreement, contract or lease, broad form property damage coverages, and property damage resulting from explosion, collapse or underground (X,C,U) exposures.

Coverage B shall include personal injury.

Coverage C, medical payments, is not required.

The contractor is required to continue to purchase products and completed operations coverage, at least to satisfy this agreement, contract or lease, for a minimum of three years beyond the County's acceptance of renovation or construction projects.

Business Auto Liability Coverage

Business auto liability coverage is to include bodily injury and property damage arising out of ownership, maintenance or use of any auto, including owned, non-

owned and hired automobiles and employee non-ownership use.

Excess or Umbrella Liability Coverage

Umbrella liability insurance is preferred, but an excess liability equivalent may be allowed. Whichever type of coverage is provided, it shall not be more restrictive than the underlying insurance policy coverages. Umbrella coverage shall drop down to provide coverage where the underlying limits are exhausted.

Professional Liability/Malpractice/Errors or Omissions Insurance

The contractor shall purchase and maintain professional liability or malpractice or errors or omissions insurance with minimum limits of \$1,000,000 per occurrence.

If a claims made form of coverage is provided, the retroactive date of coverage shall be no later than the inception date of claims made coverage, unless the prior policy was extended indefinitely to cover prior acts.

Coverage shall be extended beyond the policy year either by a supplemental extended reporting period (erp) of as great duration as available, and with no less coverage and with reinstated aggregate limits, or by requiring that any new policy provide a retroactive date no later than the inception date of claims made coverage.

BUILDERS RISK COVERAGE

Builders Risk insurance is to be purchased to cover subject property for all risks of loss, subject to a waiver of coinsurance, and covering off-site storage, transit and installation risks as indicated in the Installation Floater and Motor Truck Cargo insurance described hereafter, if such coverages are not separately provided.

The Builders Risk insurance is to be endorsed to cover the interests of all parties, including the County and all contractors and subcontractors. The insurance is to be endorsed to grant permission to occupy.

Evidence/Certificates of Insurance

Required insurance shall be documented in certificates of insurance. If and when required by the County, certificates of insurance shall be accompanied by documentation that is acceptable to the County establishing that the insurance agent and/or agency issuing the certificate of insurance has been duly authorized, in writing, to do so by and on behalf of each insurance company underwriting the insurance coverage(s) indicated on each certificate of insurance.

New certificates of insurance are to be provided to the County at least 30 days prior to coverage renewals. Failure of the contractor to provide the County with such renewal certificates may be considered justification for the County to terminate this agreement, contract or lease.

Certificates should contain the following additional information:

1. Indicate that Escambia County is an additional insured on the general liability policy.
2. Include a reference to the project and the Office of Purchasing number.
3. Disclose any self-insured retentions in excess of \$1,000.
4. Designate Escambia County as the certificate holder as follows:
Escambia County
Attention: Paul R. Nobles, CPPO, CPPB, FCN, FCPM, FCCM, Purchasing Coordinator
Office of Purchasing, Room 11.101
P.O. Box 1591
Pensacola, FL 32597-1591
Fax (850) 595-4805
5. Indicate that the County shall be notified at least 30 days in advance of cancellation.

Receipt of certificates or other documentation of insurance or policies or copies of policies by the county, or by any of its representatives, which indicate less coverage than required does not constitute a waiver of the contractor's obligation to fulfill the insurance requirements herein.

If requested by the County, the contractor shall furnish complete copies of the contractor's insurance policies, forms and endorsements, and/or such additional information with respect to its insurance as may be requested.

For commercial general liability coverage the contractor shall, at the option of the County, provide an indication of the amount of claims payments or reserves chargeable to the aggregate amount of liability coverage.

VI. INDEX OF ATTACHED SAMPLE FORMS

- Sworn Statement Pursuant to Section (287.133) (3)(a), Florida Statutes, on Entity Crimes
- Information Sheet for Transactions and Conveyances Corporate Identification
- Drug-Free Workplace Form

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

1. This sworn statement is submitted to _____
(print name of the public entity)

by _____
(print individual's name and title)

for _____
(print name of entity submitting sworn statement)

whose business address is

and (if applicable) its Federal Employer Identification Number (FEIN) is:

(If the entity has no FEIN, include the Social Security Number of the Individual signing this sworn statement: _____)

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

those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

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

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

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

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. **(attach a copy of the final order)**

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

(signature)

Sworn to an subscribed before me this _____ day of _____, 19_____

Personally known _____

OR produced identification _____ Notary Public - State of _____

_____ My commission expires _____
(Type of identification)

(Printed typed or stamped commissioned name of notary public)

**Information Sheet
for Transactions and Conveyances
Corporation Identification**

The following information will be provided to the Escambia County legal department for incorporation in legal documents. It is, therefore, vital all information is accurate and complete. Please be certain all spelling, capitalization, etc. is exactly as registered with the state or federal government.

Is this a Florida Corporation: (Please Circle One)
Yes or No

If not a Florida Corporation,
In what state was it created:
Name as spelled in that State:

What kind of corporation is it: "For Profit" or "Not for Profit"

Is it in good standing: Yes or No

**Authorized to transact business
in Florida:** Yes or No

State of Florida Department of State Certificate of Authority Document No.: _____

Does it use a registered fictitious name: Yes or No

Names of Officers:

President: _____	Secretary: _____
Vice President: _____	Treasurer: _____
Director: _____	Director: _____
Other: _____	Other: _____

Name of Corporation (As used in Florida):

(Spelled exactly as it is registered with the state or federal government)

Corporate Address: _____

Post Office Box: _____

City, State Zip: _____

Street Address: _____

City, State, Zip: _____

(Please provide post office box and street address for mail and/or express delivery; also for recorded instruments involving land)

(Please continue and complete page 2)

Federal Identification Number: _____

(For all instruments to be recorded, taxpayer's identification is needed)

Contact person for company:

Telephone Number: _____ Facsimile Number: _____

Name of individual who will sign the instrument on behalf of the company:

(Contract must be signed by the President or Vice-President. Any other officer must have permission to sign via a resolution approved by the Board of Directors on behalf of the company. Awarded contractor shall submit a copy of the resolution together with the executed contract to the Office of Purchasing)

(Spelled exactly as it would appear on the instrument)

Title of the individual named above who will sign on behalf of the company:

END

(850) 488-9000 Verified by: _____ Date: _____

Drug-Free Workplace Form

The undersigned vendor, in accordance with Florida Statute 287.087 hereby certifies that _____ does:

Name of Business

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

Check one:

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

_____ As the person authorized to sign this statement, this firm **does not** comply fully with the above requirements.

Submitter's Signature

Date