

**Invitation to Bid  
Job Order Contracting Services  
In the State of Florida**

**Contract Number: 23-909-027**

**August 11, 2022**

**Section Two:**

- **Bid Submission and Required Forms**
  - **Submittals Check List**
  - **Bid Pricing Forms**
  - **Performance, Capability, Qualification and Experience Forms**
  - **Federal Funds Certifications and Forms**
  - **FEMA Special Conditions**

## Section Three: Bid Submission and Required Forms

### **INTEGRITY OF BID DOCUMENTS**

Bidders shall use the original Bid Proposal Forms provided by the Purchasing Department and enter information only in the spaces where a response is requested. Bidders may use an attachment as an *addendum* to the Bid Proposal Form if sufficient space is not available on the original form for the Bidders to enter a complete response. Any modifications or alterations to the original bid documents by the Bidders, whether intentional or otherwise, will constitute grounds for rejection of a bid. Any such modifications or alterations that a Bidders wishes to propose must be clearly stated in the Bidder's proposal response and presented in the form of an addendum to the original bid documents.

### **FILLABLE BID FORMS**

For your convenience, some of the forms which must be completed and submitted along with your bid will be posted along with the bid document on the Public Purchase website in a protected Word file format which will enable you to type your responses on the forms. The file will be named **Job Order Contracting Services In the State of Florida 23-906-027 bid forms**. Please use these forms to avoid the need to hand write information. If sufficient room has not been provided on the form to enable you to enter a complete response, please include a supplemental attachment if necessary. **Please note that this file may not include all the forms that should be submitted with your bid proposal so please check the Submittals Checklist for a complete list of requested and required submittals.**

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## SUBMITTALS CHECKLIST

Company Name: \_\_\_\_\_ CALADESI CONSTRUCTION CO. \_\_\_\_\_

Signature of Buyer: \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_

To help ensure that you include all the submittals necessary to complete a thorough evaluation of your bid proposal, we ask that you use this checklist to make sure you have enclosed all **Required** submittals before sealing and mailing your proposal.

The list below comprises the **Required Submittals**, and they **must be** submitted at the time you submit your bid or your bid will be declared non-responsive. **Submit One (1) complete hard copy of your bid, and one complete electronic copy on a flash drive.** Flash Drive must be labeled with Bid Number and Company Name.

**Bidders Must fill out separate Bid Forms 1 & 2 for each individual Trade, Contract Opportunity and Geographic Region being bid. To be considered for all opportunities bidders must submit Bid Forms 1 and 2 for each contract opportunity separately. For example, if you were going to respond to Region 1, Northwest Florida General Construction Contracts bidders will need to fill out 8 separate Bid Form 1 and 8 Separate Bid Form 2 to be considered for all 8 General Construction Contracts available. Please see Section One Instruction to Bidders and Award Process, 4. Solicitation Tables for information on Geographical Regions, Contract numbers, and Contract Trades available.**

**Bidders need only submit Bid Forms 3-16 once regardless of how many contracts or geographical regions they are bidding**

Verified by Bidders	Verified by Buyer	Verified by Evaluator	Description of Required Submittal	Page No.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 1:</b> The Adjustment Factors	4-5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 2:</b> Calculation of the Combined Adjustment Factors	6-7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 3:</b> Addendum Acknowledgement Form	8
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 4:</b> Sworn Statement Under Section 287.133(3)(A), Florida Statutes, Public Entity Crimes	9-10
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 5:</b> Pinellas County District Schools Bid Protest Procedure	11-12

Section Three: Bid Submission and Required Forms | Submittals Checklist

Verified by Bidders	Verified by Buyer	Verified by Evaluator	Description of Required Submittal	Page No.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 6:</b> Certificate of Insurance including evidence of workers compensation coverage	13-14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 7:</b> Company Profile Questionnaire	15-18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 8:</b> Diversity Vendor Certification Participation	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 9:</b> Bonding Capacity Statement	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 10:</b> Management Personnel	21-23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 11:</b> References and Experience Questionnaire	24
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 12:</b> Value Add Questionnaire	25-28
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 13:</b> Agreement to work in all Regions of the State	29
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 14:</b> Federal Certifications	30-35
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 15:</b> FEMA Special Conditions	36-50
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bid Form 16:</b> Signature Form	51

Items listed should be submitted at the time you submit your bid to facilitate the bid evaluation process.

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### BID FORM 3: ADDENDUM ACKNOWLEDGEMENT FORM

**ADDENDA ACKNOWLEDGMENT:** The undersigned also acknowledges the receipt of the following Addenda:

<i>ADDENDUM NO.</i>	<u>  1  </u>	DATED	<u>  09/02/2022  </u>	<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>
<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>	<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>
<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>	<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>
<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>	<i>ADDENDUM NO.</i>	<u>      </u>	DATED	<u>      </u>

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**BID FORM 4: SWORN STATEMENT UNDER SECTION 287.133(3)(A),  
FLORIDA STATUTES, PUBLIC ENTITY CRIMES**

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted with Bid, Proposal or Contract No. 23-909-027-08-CG
  
2. This sworn statement is submitted by Caladesi Construction Co.  
1390 DONEGAN ROAD, LARGO, FL 33771 (Name of entity submitting sworn statement) whose  
business address is 1390 Donegan Rd. Largo, Fl. 33771  
\_\_\_\_\_
  
3. and (if applicable) its Federal Employer Identification Number (FEIN) is 52-0667823. If the  
entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:  
262-79-5943.
  
4. My name is Scott D. Hinrichs and my relationship  
to the Caladesi Construction Co. (please print  
name of individual signing) entity name above is Corp. Sec..
  
5. 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 with 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 of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
  
6. I understand that “convicted” or “conviction” as defined in Paragraph 287.133(1)(b), Florida Statutes, means a violation 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 a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
  
7. I understand that an “affiliate” as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
  1. A predecessor or successor of a person convicted of a public entity crime; or
  2. as entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term “affiliate” includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm’s length agreement, shall be a prima facie case that one person controls another person. A person

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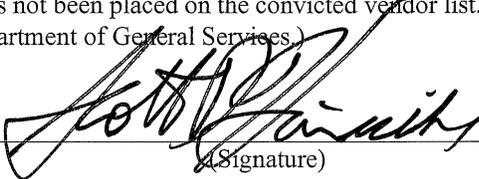
who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

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

\_\_\_\_\_ Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, not any affiliate of the entity have 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 the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in 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, AND (Please indicate which additional statement applies.)

X The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

  
\_\_\_\_\_  
(Signature)

SCOTT D. HINRICHS

Date: SEPTEMBER 15, 2022

STATE OF FLORIDA

COUNTY OF PINELLAS

SCOTT D. HINRICHS APPEARED IN PERSON BEFORE ME (the undersigned authority), who is

personally known to me ~~or provided the following identification~~ \_\_\_\_\_, and affixed his/her signature in

the space provided above on this 15<sup>TH</sup> day of SEPTEMBER, 2022.

\_\_\_\_\_  
NOTARY PUBLIC

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My commission expires: SEPT. 21, 2022

**BID FORM 5: PINELLAS COUNTY DISTRICT SCHOOLS BID PROTEST PROCEDURE**

*Bidders who wishes to file a protest pertaining to a bid must file such notice in accordance with procedures prescribed by 120.57(3) FS enumerated below. For bids solicited by the purchasing department, the notice must be filed with the director of purchasing. For bids solicited by the facilities department, the notice must be filed with the director of facilities.*

1. Any person who is adversely affected by the District decision or intended decision shall file with the Director of Purchasing a notice of protest in writing within 72 hours after the posting of the bid tabulation or after receipt of the notice of the District decision or intended decision and shall file a formal written protest within 10 days after filing the notice of protest. With respect to a protest of the specifications contained in an invitation to bid or in a request for proposals, the notice of protest shall be filed in writing within 72 hours after the receipt of notice of the project plans and specifications or intended project plans and specifications in an invitation to bid or request for proposals, and the formal written protest shall be filed within 10 days after the date the notice of protest is filed. Failure to file a notice of protest or failure to file a formal written protest shall constitute a waiver of proceedings under this chapter. The formal written protest shall state with particularity the facts and law upon which the protest is based. Saturdays, Sundays, and legal holidays shall be excluded in the computation of the 72-hour time periods provided by this paragraph.
2. Any person who files an action protesting a decision or intended decision pertaining to a bid pursuant to FS 120.57(3)(b), shall post at the time of filing the formal written protest, a bond payable to the Pinellas County School District in an amount equal to 1 percent (1%) of the total estimated contract value, but not less than \$500 nor more than \$5,000, which bond shall be conditioned upon the payment of all costs which may be adjudged against the protester in the administrative hearing in which the action is brought and in any subsequent appellate court proceeding. In lieu of a bond, a cashier's check, certified bank check, bank certified company check, money order or U.S. currency will be acceptable form of security. If, after completion of the administrative hearing process and any appellate court proceedings, the District prevails, it shall recover all costs and charges which shall be included in the final order or judgment, including charges made by the Division of Administrative Hearings, but excluding attorney's fees. Upon payment of such costs and charges by the protester, the protest security shall be returned. If the protester prevails, he or she shall recover from the District all costs and charges which shall be included in the final order of judgment, excluding attorney's fees.
3. Upon receipt of the formal written protest and protest bond which has been timely filed, the District shall stop the bid solicitation process or the contract award process until the subject of the protest is resolved by final District action, unless the Superintendent sets forth in writing particular facts and circumstances which require the continuance of the bid solicitation process or the contract award process without delay in order to avoid an immediate and serious danger to the public health, safety, or welfare.
4.
  - a) The District shall provide an opportunity to resolve the protest by mutual agreement between the parties within 7 days, excluding Saturdays, Sundays, and legal holidays, after receipt of a formal written protest.
  - b) If the subject of a protest is not resolved by mutual agreement within 7 days, excluding Saturdays, Sundays, and legal holidays, after receipt of the formal written protest, and if there is no disputed issue of material fact, an informal proceeding shall be conducted pursuant to 120.57(2) FS and applicable District rules before a person whose qualifications have been prescribed by rules of the District.
  - c) If the subject of a protest is not resolved by mutual agreement within 7 days, excluding Saturdays, Sundays, and legal holidays, after receipt of the formal written protest, and if there is a disputed issue of material fact, the District shall refer the protest to the Division of Administrative Hearings for proceedings under 120.57(1) FS.
5. Upon receipt of a formal written protest referred pursuant to this subsection, the director of the Division of Administrative Hearings shall expedite the hearing and assign an administrative law judge who shall commence a hearing within 30 days after the receipt of the formal written protest by the division and enter a recommended order within 30 days after the hearing or within 30 days after receipt of the hearing transcript by the administrative law judge, whichever is later. Each party shall be allowed 10 days in which to submit written exceptions to the recommended order. A final order shall be entered by the District within 30 days of the entry of a recommended order. The provisions of this paragraph may be waived upon stipulation by all parties.
6. In a competitive-procurement protest, no submissions made after the bid or proposal opening amending or supplementing the bid or proposal shall be considered. Unless otherwise provided by statute, the burden of proof shall rest with the party

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proof for such proceedings shall be whether the proposed District action was clearly erroneous, contrary to competition, arbitrary, or capricious. In any bid-protest proceeding contesting an intended District action to reject all bids, the standard of review by an administrative law judge shall be whether the District's intended action is illegal, arbitrary, dishonest, or fraudulent.

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## BID FORM 6: CERTIFICATE OF INSURANCE INCLUDING EVIDENCE OF WORKERS COMPENSATION COVERAGE

Insurance is required from all contractors who will be performing work. Please provide proof of insurance based on the requirements listed below.

The name of the insurance company(ies) listed on the Certificate of Insurance on file in the Risk Management Department shall be the same as it appears in **Best's Financial Strength Rating**. The insurance company named on the Certificate of Insurance shall have a rating of "A-V" or better as stated in **Best's Financial Strength Rating**.

### 1. GENERAL LIABILITY INSURANCE

The contractor shall provide the ISO Commercial General Liability Policy. The Owner shall be exempt from, and in no way liable for, any sums of money which may represent a deductible in any insurance policy. The payment of such deductible shall be the responsibility solely of the contractor or subcontractor providing such insurance.

The **Commercial General Liability Policy (CGL)** is a method of automatically providing a broad range of common coverage extensions to the CGL policy that firms often need and overlook. By having a CGL policy, it will reduce the overall cost of providing those other coverage's at a future date and allows for a wide distribution of those packaged coverage's.

The **CGL** policy shall provide coverage of at least the following items:

- a) **General Aggregate:**
  - i) **Premises Operation** which will include XCU coverage except when work does not include foundation, structural work, pressure fired vessels or materials or construction techniques which could explode.
  - ii) **Independent Contractor's Protective** which provides coverage for injury to others arising out of the independent contractors work. General Contractors may opt to provide this coverage in lieu of naming the School Board of Pinellas County as "Additional Insured".
  - iii) **Broad Contractual Liability** which is liability assumed by the insured under any contract agreement. This includes any oral or written contract or agreement relating to the conduct of the named insured's business. If excluded, exception for liability is assumed in an insured contract.
- b) **Products and Completed Operations**
- c) **Personal & Advertising Injury Liability**

The contractor shall obtain insurance which shall at least meet the following minimum limits:

**For projects/contracts under \$500,000.00:**

- \$1,000,000.00 per occurrence, \$2,000,000.00 general aggregate.

**For projects/contracts \$500,000.00 and over:**

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- \$5,000,000.00 per occurrence, \$5,000,000.00 general aggregate.

**2. AUTOMOTIVE LIABILITY INSURANCE**

The contractor shall obtain Business Coverage Automobile Insurance which shall protect the contractor from claims for damage for personal injury, bodily injury including accidental death, as well as claims for property damages which may arise from operations under this contract whether such operations are by himself or by anyone directly or indirectly employed by him. Coverage shall include owned, non-owned, hired and rented vehicles.

The contractor shall obtain insurance which shall at least meet the following minimum limits:

- \$300,000.00 Combined Single Limit
- \$100,000.00 Bodily Injury (per person), \$300,000.00 Bodily Injury (per accident)
- \$100,000.00 Property Damage

**3. WORKERS' COMPENSATION INSURANCE**

The contractor shall take out and maintain during the life of this Contract, Workers' Compensation Insurance for all employees connected with the work of this Project and, in case any work is sublet, the contractor shall require the subcontractors similarly to provide Workers' Compensation Insurance as required by FS 440 for all the latter's employees unless such employees are covered by the protection of the contractor. The following limits shall be obtained:

The contractor shall obtain insurance which shall at least meet the following minimum limits:

- State Worker's Compensation: Statutory
- Employer's Liability: \$100,000.00 Each Accident  
\$500,000.00 Disease, Policy Limit  
\$100,000.00 Disease, Each Employee

(insuranc.dot) mar 1/1/1/1 (Rev 04/11)

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## BID FORM 7: COMPANY PROFILE QUESTIONNAIRE

1. What is your company's official registered name?

CALADESI CONSTRUCTION CO.

2. What is/are your corporate office location(s)?

1390 DONEGAN ROAD  
LARGO, FL 33771

3. Please provide a brief history and description of your company, including experience providing similar products/services and the year it was established.

WE ARE A STATE CERTIFIED GENERAL CONTRACTOR CGC058861. WE HAVE FOR THE PAST 8 YEARS COMPLETED 4 CONTRACTS FOR PINELLAS COUNTY AND 4 FOR HILLSBOROUGH COUNTY. CALADESI CONSTRUCTION CO. HAS BEEN IN BUSINESS FOR 50 + YEARS I PINELLAS COUNTY AREA.

4. Who is your competition in the marketplace?

BRANDON CONSTRUCTION  
PARK & ELEAZER CONSTRUCTION  
HAWKINS CONSTRUCTION  
EVELAND BROTHERS CONSTRUCTION  
EMA CONSTRUCTION  
BILTMORE CONSTRUCTION

5. What is the total number and location of employees, and if applicable, sales persons, employed?

CALADESI CONSTRUCTION CO. HAS 17 FIELD EMPLOYEES AND 6 OFFICE EMPLOYEES ALL LIVING IN THE PINELLAS COUNTY AREA.

6. What is the number and location of support centers, if applicable, and location of corporate office?

WE HAVE ONE CORPORATE OFFICE AND SERVICE ALL OF PINELLAS AND HILLSBOROUGH COUNTIES.

7. What was your annual construction volume over last three (3) fiscal years?

JANUARY 31, 2022 - \$7,735,205.00  
JANUARY 31, 2021 - \$5,907,990.00  
JANUARY 31, 2020 - \$9,457,703.00

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8. **Submit FEIN and Dunn & Bradstreet report.**

52-0667823

9. **What are your overall public sector sales, excluding Federal Government, for last three (3) years?**

COMMERCIAL, INDUSTRY, CHURCH, AUTOMOBILE, MINI-STORAGE AND MUNICIPALITIES.

10. **What is your strategy to increase market share in the public sector?**

WITH THE PRESENT LACK OF MANPOWER OUR STRATEGY IS TO KEEP OUR PRESENT STRATEGY TOWARD CONSTRUCTION MANAGEMENT UNTIL SHORTAGE IN MAN POWER CHANGES.

11. **What differentiates your company from competitors in the public sector?**

CALADESI REPUTATION, NAME AND IN BUSINESS FOR 50 YEARS+. ALSO A SECOND GENERATION FAMILT BUSINESS.

12. **Describe any green or environmental initiatives or policies.**

CALADESI CONSTRUCTION CO. DOES NOT HAVE ANY GREEN OR ENVIRONMENTAL POLICIES AT THIS TIME.

13. **Diversity program - Do you currently have a diversity program or any diversity partners that you do business with?**

Yes

No

a. **If the answer is yes, do you plan to offer your program or partnership through this contract opportunity?**

Yes

No

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14. Provide a copy of any diversity certifications indicated above.

THESE WOULD BE OUR SUBCONTRACTOR THAT WE HAVE USED IN PINELLAS AND HILLSBOROUGH COUNTIES. (SEE ATTACHED)

15. List any relationships with subcontractors or affiliates intended to be used when providing services and identify if subcontractors meet minority-owned standards. If any, list which certifications subcontractors hold and certifying agency.

AS REFERENCED ABOVE - SEE ATTACHED

16. Describe any present or past litigation, bankruptcy or reorganization involving supplier.

PAST LITIGATION WITH THE FOLLOWING:  
CANCO FOR SUBCONTRACTOR OF METALL BUILDING FOR THE CITY OF ST. PETERSBURG, - AIRPORT JOB.

17. Felony Conviction Notice: Indicate if the supplier

- a. is a publicly held corporation and this reporting requirement is not applicable;
- b. is not owned or operated by anyone who has been convicted of a felony; or
- c. is owned or operated by and individual(s) who has been convicted of a felony and provide the names and convictions.

18. Describe any debarment or suspension actions taken against supplier

NONE

19. Provide your safety record, safety rating, EMR and worker's compensation rate where available.

.75. SEE ATTACHED WORKER'S COMPENSATION CERTIFICATE.

20. Provide any additional necessary details as it relates to standard ordering methods and payment terms.

NET 15.

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**22. Provide your company's subcontracting plan, as described in the scope herein.**

CALADESI CONSTRUCTION CO. ISSUES A MASTER CONTRACT FOLLOWED BY A JOB SPECIFIC PURCHASE ORDER FOR THE SUBCONTRACTOR AFFILATED WITH A JOB.

**23. If Supplier requires additional agreements with Participating Public Agencies, provide a copy of the proposal agreement herein.**

CALADESI CONSTRUCTION CO. HAS NOT RUN INTO THIS SITUATION TO DATE. CALADESI CONTRUCTION CO. WOULD DO WHAT IS REQUIRED IN ORDER TO BENEFIT THE END CUSTOMER.

**(The rest of this page is intentionally left blank)**

## BID FORM 8: DIVERSITY VENDOR CERTIFICATION PARTICIPATION

Diversity Vendor Certification Participation - It is the policy of some Members participating in Omnia Partners to involve minority and women business enterprises (M/WBE), small and/or disadvantaged business enterprises, disabled veterans business enterprises, historically utilized businesses (HUB) and other diversity recognized businesses in the purchase of goods and services. Respondents shall indicate below whether or not they hold certification in any of the classified areas and include proof of such certification with their response.

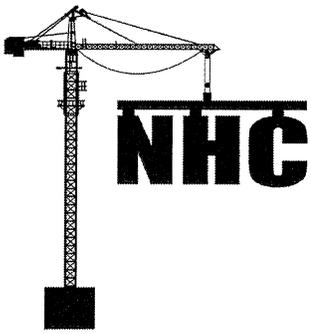
- a. Minority Women Business Enterprise  
Respondent certifies that this firm is an MWBE Yes No  
List certifying agency: \_\_\_\_\_
- b. Small Business Enterprise (SBE) or Disadvantaged Business Enterprise (DBE)  
Respondent certifies that this firm is a SBE or DBE Yes No  
List certifying agency: \_\_\_\_\_
- c. Disabled Veterans Business Enterprise (DVBE)  
Respondent certifies that this firm is an DVBE Yes No  
List certifying agency: \_\_\_\_\_
- d. Historically Underutilized Businesses (HUB)  
Respondent certifies that this firm is an HUB Yes No  
List certifying agency: \_\_\_\_\_
- e. Historically Underutilized Business Zone Enterprise (HUBZone)  
Respondent certifies that this firm is an HUBZone Yes No  
List certifying agency: \_\_\_\_\_
- f. Other  
Respondent certifies that this firm is a recognized diversity certificate holder Yes No  
List certifying agency: \_\_\_\_\_

## **BID FORM 9: BONDING CAPACITY STATEMENT**

**Provide a letter from your bonding company setting forth your company's available bonding capacity and availability and confirming that, if required, your company could provide labor and material payment bonds and performance bonds for certain projects up to the bonding capacity.**

(Insert bonding company statement here)

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**NIELSON, WOJTOWICZ, NEU & ASSOCIATES**  
A NIELSON HOOVER GROUP COMPANY



September 15th, 2022

**School Board of Pinellas County**  
**Contract Number: 23-909-027**

**Re: Caladesi Construction Company**

To Whom It May Concern:

This is to advise you that our office provides bid, performance, and payment bonds for **Caladesi Construction Company**. The name of their surety is **The Ohio Casualty Insurance Company** located at 175 Berkeley Street, Boston, MA 02116. They carry an A.M. Best Rating of **A XV**, and is listed in the Department of Treasury's Federal Register.

Based upon normal and standard underwriting criteria at the time of the request, **The Ohio Casualty Insurance Company** should be in a position to provide **Caladesi Construction Company** Performance and Payment Bonds for the single projects in the amount of **\$12,000,000.00** and aggregate support in the amount of **\$30,000,000.00**. We reserve the right to review final contractual documents, bond forms and obtain satisfactory evidence of funding prior to final commitment to issue bonds.

**Caladesi Construction Company** is an excellent contractor and we hold them in highest regard. We feel extremely confident in our contractor and encourage you to offer them an opportunity to execute any upcoming projects.

This letter is not an assumption of liability, nor is it a bid or performance and payment bond. It is issued only as a bonding reference requested by our respected client. We do not assume liability to any third party, including yourselves, if we do execute said bonds.

If you should have any questions, please do not hesitate to give me a call.

Sincerely,

Kevin Wojtowicz  
Surety Bond Agent

## BID FORM 10: MANAGEMENT PERSONNEL

Please provide contact information and resumes for the person(s) who will be responsible for the following areas. If not applicable, write 'Not Applicable'

### **Executive Contact**

Contact Person: DONALD J. HINRICHS

Title: PRESIDENT

Company: CALADESI CONSTRUCTION CO.

Address: 1390 DONEGAN ROAD, LARGO, FL 33771

City: LARGO State: FLORIDA Zip: 33771

Phone: 727 585 9945 Fax: 727 585 6881

Email: SHINRICHS@CALADESI.BIZ

### **Marketing**

Contact Person: SCOTT D. HINRICHS

Title: CORPORATE SECRETARY

Company: CALADESI CONSTRUCTION C.

Address: 1390 DONEGAN ROAD

City: LARGO State: FLORIDA Zip: 33771

Phone: 727 585 9945 Fax: 727 585 6881

Email: SHINRICHS@CALADESI.BIZ

### **Account Manager / Sales Lead**

Contact Person: SCOTT D. HINRICHS

Title: CORPORATE SECRETARY

Company: CALADESI CONSTRUCTION CO.

Address: 1390 DONEGAN ROAD

City: LARGO State: FLORIDA Zip: 33771

Phone: 727 585 9945 Fax: 727 585 6881

Email: SHINRICHS@CALADESI.BIZ

Section Three: Bid Submission and Required Forms | Performance, Capability, Qualification and Experience Forms

**Sales Support**

Contact Person: JOHN D. BRATANOV  
Title: SALES/PROJECT MANAGER  
Company: CALADESI CONSTRUCTION CO.  
Address: 1390 DONEGAN ROAD  
City: LARGO State: FLORIDA Zip: 33771  
Phone: 727 585 9945 Fax: 727 585 6881  
Email: JBRATANOV@CALADESI.BIZ

**Contract Management (if different than the Sales Lead)**

Contact Person: DENNIS BIRCHARD  
Title: PROJECT MANAGER  
Company: CALADESI CONSTRUCTION CO.  
Address: 1390 DONEGAN ROAD  
City: LARGO State: FLORIDA Zip: 33771  
Phone: 727 585 9945 Fax: 727 585 6881  
Email: DBIRCHARD@CALADESI.BIZ

**Financial Reporting**

Contact Person: SCOTT D. HINRICHS  
Title: CORPORATE SECRETARY  
Company: CALADESI CONSTRUCTION CO.  
Address: 1390 DONEGAN ROAD  
City: LARGO State: FLORIDA Zip: 33771  
Phone: 727 585 9945 Fax: 727 585 6881  
Email: SHINRICHS@CALADESI.BIZ

Section Three: Bid Submission and Required Forms | Performance, Capability, Qualification and Experience Forms

**Billing & Reporting/Accounts Payable**

Contact Person: ANNETTE HINRICHS

Title: BOOKKEEPER

Company: CALADESI CONSTRUCTION CO.

Address: 1390 DONEGAN ROAD

City: LARGO State: FLORIDA Zip: 33771

Phone: 727 585 9945 Fax: 727 585 6881

Email: PAYROLL@CALADESI.BIZ

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## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name  
PINELLAS COUNTY SCHOOL ADMINISTRATION
- b) Contact Name and Title  
NEIL
- c) City and State  
LARGO, FLORIDA
- d) Phone Number  
727 585 9945
- e) Years Served  
2 YEARS
- f) Description of Services FACILITY MAINTENANCE, REPAIR OF MINOR CONSTRUCTION  
PIGGYBACK PINELLAS COUNTY GOVERNMENT CONTRACT#167-0421-CP
- g) Annual Volume

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
SCOTT BARROW	167-0421-CP

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name HILLSBOROUGH COUNTY
- b) Contact Name and Title DORIS HENDRICKS PROCUREMENT OFFICER
- c) City and State TAMPA FLORIDA
- d) Phone Number 813.663.3226
- e) Years Served 4 YEAR
- f) Description of Services MISCELLANEOUS CONSTRUCTION SERVICES FOR SOLID WASTE
- g) Annual Volume 1 MILLION

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
WALTER GRAY PROJ MGR. 813 209 3059	PUD 8001

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name CITY OF ST. PETERSBURG
- b) Contact Name and Title MICHAEL SCHLESINGER BUYER
- c) City and State ST. PETERSBURG, FLORIDA
- d) Phone Number 727 893 7223
- e) Years Serviced 5 YEARS
- f) Description of Services JOC SERVICES FOR FACILITY MAINTENANCE, REPAIR. 2.5 MILLION FOR 5 YEARS
- g) Annual Volume

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name

Contract Number

PETER GREEN

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name HILLSBOROUGH COUNTY
- b) Contact Name and Title SYBIL TUCKER – PROCUREMENT OFFICER
- c) City and State TAMPA, FLORIDA
- d) Phone Number --
- e) Years Served 4 YEARS
- f) Description of Services MISCELLANEOUS FACILITIES CONSTRUCTION (LEVEL B) TERM CONTRACT 13.
- g) Annual Volume 3 MILLION 2YEARS WITH 2 YEAR RENEWAL.

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
ERTHEL HILL	813.272.7008

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name SOURCEWELL
- b) Contact Name and Title JEREMY SCHWARTZ DIRECTOR OF COOPERATIVE, CONTRACTS AND PROCUREMENT/CPO
- c) City and State STAPLES, MN 56479
- d) Phone Number 281.894.1930
- e) Years Served 5 YEARS
- f) Description of Services F-1WCA-GC06-041019-CAL
- g) Annual Volume 1 MILLION/YEAR

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
_____	_____
_____	_____
_____	_____
_____	_____

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name                      PINELLAS COUNTY PURCHASING DEPARTMENT
- b) Contact Name and Title      PAMELA ULRICH – PROCUREMENT OFFICER
- c) City and State                    CLEARWATER, FLORIDA
- d) Phone Number                  727.464.3150
- e) Years Served                     5 YEAR CONTRACT
- f) Description of Services        JOC WWTP AND WATER PLANT MAINTENANCE REPAIR  
CONSTRUCTION AND UNDERGROUND UTILITIES
- g) Annual Volume                  1 MILLION PER YEAR

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
<u>TOM MENKE</u>	<u>727.453.3611</u>
_____	_____
_____	_____
_____	_____

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 11: REFERENCES AND EXPERIENCE QUESTIONNAIRE

Provide a minimum of five (5) customer references for product and/or services of similar scope dating within the past 3 years. Please try to provide references for K12, Higher Education, City/County and State entities. Provide the following information for each reference:

- a) Entity Name                      PINELLAS COUNTY DEPARTMENT OF ADMIN SERVICES
- b) Contact Name and Title      MICHELLE JUREK – PROCUREMENT ANALYST
- c) City and State                    CLEARWATER, FLORIDA
- d) Phone Number                  --
- e) Years Serviced                  5 YEAR CONTRACT
- f) Description of Services        JOC FOR THE DEPARTMENT OF ADMIN SERVICES.
- g) Annual Volume                  \$80,000.00 PER YEAR

### Questions:

1. Identify any contracts with other cooperative or government group purchasing organizations of which your company is currently a part of:

Cooperative/GPO Name	Contract Number
<u>DEREK WEAVER</u>	

2. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable.
3. Describe your company's past experience with Job Order Contracting estimating and include specific examples of other cooperatives and public agencies where you have performed these services.

## BID FORM 12: VALUE ADD QUESTIONNAIRE

Bidder must agree to work in cooperation with Pinellas Public Schools and OMNIA Partners to develop a marketing strategy and provide avenues to equally market and drive sales through the Contract and program to all current and potential Members. Bidder agrees to actively market in cooperation with Pinellas Public Schools and OMNIA Partners all available services to current and potential Members.

1. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable. If certifications and other documentation were already previously provided in above sections, there is no need to duplicate.

Please also list and include copies of any certificates you hold that would show value for your response not already included above.

2. Acknowledge that your organization agrees to provide its company logo(s) to Pinellas Public Schools and OMNIA Partners and agrees to provide permission for reproduction of such logo in marketing communications and promotions.
3. Provide a detailed plan beginning from award date of the Master Agreement describing the strategy to immediately implement the Master Agreement as supplier's primary go to market strategy for Public Agencies to supplier's teams, to include, but not limited to:
  - a. Executive leadership endorsement and sponsorship of the award as the public sector go-to-market strategy within first 10 days
  - b. Training and education of Supplier's employees (and if applicable sales force) with participation from the Supplier's executive leadership, along with the OMNIA Partners team within first 90 days
4. Provide a detailed plan beginning from award date of the Master Agreement describing the strategy to market the Master Agreement to current Participating Public Agencies, existing Public Agency customers of Supplier, as well as to prospective Public Agencies immediately upon award, that could include, but is not limited to:
  - a. Creation and distribution of a co-branded press release to trade publications
  - b. Announcement, Master Agreement details and contact information published on the Supplier's website within first 90 days
  - c. Design, publication and distribution of co-branded marketing materials within first 90 days

Section Three: Bid Submission and Required Forms | Performance, Capability, Qualification and Experience Forms

- d. Commitment to attendance and participation with OMNIA Partners at regional (i.e. Regional NIGP Chapter Meetings, Regional Cooperative Summits, etc.) and supplier-specific trade shows, conferences and meetings throughout the term of the Master Agreement
  - e. Design and publication of regional advertising in trade publications throughout the term of the Master Agreement
  - f. Ongoing marketing and promotion of the Master Agreement throughout its term (case studies, collateral pieces, presentations, promotions, etc.)
  - g. Dedicated OMNIA Partners internet web-based homepage on Supplier's website with:
    - OMNIA Partners standard logo;
    - Copy of original Request for Proposal;
    - Copy of Master Agreement and amendments between Principal Procurement Agency and Supplier;
    - Summary of Products and pricing;
    - Marketing Materials
    - Electronic link to OMNIA Partners' website including the online registration page;
    - A dedicated toll-free number and email address for OMNIA Partners
5. Describe how Supplier will transition any existing Public Agency customers' accounts to the Master Agreement available through OMNIA Partners. Include a list of current cooperative contracts (regional and national) Supplier holds and describe how the Master Agreement will be positioned among the other cooperative agreements.
  6. Acknowledge Supplier agrees to provide its logo(s) to OMNIA Partners and agrees to provide permission for reproduction of such logo in marketing communications and promotions. Acknowledge that use of OMNIA Partners logo will require permission for reproduction, as well.
  7. Confirm Supplier will be proactive in direct sales of Supplier's goods and services to Public Agencies and the timely follow up to leads established by OMNIA Partners. All sales materials are to use the OMNIA Partners logo. At a minimum, the Supplier's sales initiatives should communicate:
    - a. Master Agreement was competitively solicited and publicly awarded by a Principal Procurement Agency
    - b. Best government pricing
    - c. No cost to participate
    - d. Non-exclusive
  8. Confirm Supplier will train its sales force on the Master Agreement. At a minimum, sales training should include:
    - a. Key features of Master Agreement

Section Three: Bid Submission and Required Forms | Performance, Capability, Qualification and Experience Forms

- b. Working knowledge of the solicitation process
  - c. Awareness of the range of Public Agencies that can utilize the Master Agreement through OMNIA Partners
  - d. Knowledge of benefits of the use of cooperative contracts
9. Describe in detail how Supplier's organization (and if applicable, sales force) is structured, including contact information for the highest-level executive in charge of the sales team.
  - a. Explain in detail how the sales teams will work with Gordian and the OMNIA Partners team to implement, grow and service the program.
10. Explain in detail how Supplier will manage the overall program throughout the term of the Master Agreement, including ongoing coordination of marketing and sales efforts, timely new Participating Public Agency account set-up, timely contract administration, etc.
11. State the amount of Supplier's Public Agency sales for the previous fiscal year. Provide a list of Supplier's top 5 Public Agency customers, the total purchases for each for the previous fiscal year along with a key contact for each.
12. Describe Supplier's information systems capabilities and limitations regarding order management through receipt of payment, including description of multiple platforms that may be used for any of these functions.
13. Even though it is anticipated many Public Agencies will be able to utilize the Master Agreement without further formal solicitation, there may be circumstances where Public Agencies will issue their own solicitations. The following options are available when responding to a solicitation for Products covered under the Master Agreement.
  - a. Respond with Master Agreement pricing (Contract Sales reported to OMNIA Partners).
  - b. If competitive conditions require pricing lower than the standard Master Agreement not-to-exceed pricing, Supplier may respond with lower pricing through the Master Agreement. If Supplier is awarded the contract, the sales are reported as Contract Sales to OMNIA Partners under the Master Agreement.
  - c. Respond with pricing higher than Master Agreement only in the unlikely event that the Public Agency refuses to utilize Master Agreement (Contract Sales are not reported to OMNIA Partners).
  - d. If alternative or multiple proposals are permitted, respond with pricing higher than Master Agreement, and include Master Agreement as the alternate or additional proposal.
  - e. Detail Supplier's strategies under these options when responding to a solicitation.
14. Provide a copy of all current licenses, registrations and certifications issued by federal, state and local agencies, and any other licenses, registrations or certifications from any other governmental entity with jurisdiction, allowing Respondent to perform the covered services

Section Three: Bid Submission and Required Forms | Performance, Capability, Qualification and Experience Forms

including, but not limited to licenses, registrations or certifications. M/WBE, HUB, DVBE, small and disadvantaged business certifications and other diverse business certifications, as well as manufacturer certifications for sales and service must be included if applicable

Please also list and include copies of any certificates you hold that would show value for your response not already included above.

15. Please include any additional products and/or services not included in the scope of the solicitation that you think will enhance and/or add value to this contract participating agencies.
16. If applicable, provide details of and propose additional discounts for volume orders, special manufacturer's offers, minimum order quantity, total annual spend.

**(The rest of this page is intentionally left blank)**

### BID FORM 13: AGREEMENT TO WORK IN ALL REGIONS OF THE STATE

There are times that a Contractor may need to perform work for certain Members that have facilities in areas outside of the Geographic Region. By acknowledging your acceptance below, you are saying that you will consider performing work in such areas in the State or other States. The Contractor will use the awarded CTC and adjustment factor proposed. If a contractor holds multiple contracts when performing work outside an awarded area the contractor will use the contract that results in the lowest price for the Member. The Contractor will have the option to decline Projects outside of the Geographic Region.

Please circle your intention below:

Yes We agree to consider working in areas outside of the Geographic Region.

**(No)** We will NOT consider working outside of the Geographic Region.

Signature

The Bidder shall acknowledge this Bid by signing and completing the spaces provided below:

Name of Bidder: CALADESI CONSTRUCTION CO.

*Arturo Caladesi Corp. Scc.*

City/State/Zip: LARGO, FLORIDA 33771

Telephone No.: 5727.585.9945

If a partnership, names and addresses of partners:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Notarized**

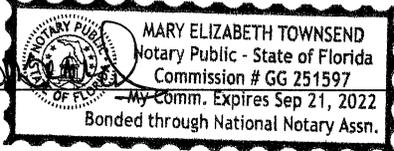
Subscribed and sworn to before me this 15TH day of SEPTEMBER, 2022

Notary Public in and for the County of PINELLAS

State of FLORIDA

My commission expires: SEPTEMBER 21, 2022

Signature: *Mary Elizabeth Townsend*  
MARY ELIZABETH TOWNSEND



## BID FORM 14: FEDERAL CERTIFICATIONS

### TO WHOM IT MAY CONCERN:

Participating Agencies may elect to use federal funds to purchase under the Master Agreement. This form should be completed and returned.

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### DEFINITIONS

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**Contract** means a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal award. The term as used in this part does not include a legal instrument, even if the non-Federal entity considers it a contract, when the substance of the transaction meets the definition of a Federal award or subaward

**Contractor** means an entity that receives a contract as defined in Contract.

**Cooperative agreement** means a legal instrument of financial assistance between a Federal awarding agency or pass-through entity and a non-Federal entity that, consistent with 31 U.S.C. 6302–6305:

(a) Is used to enter into a relationship the principal purpose of which is to transfer anything of value from the Federal awarding agency or pass-through entity to the non-Federal entity to carry out a public purpose authorized by a law of the United States (see 31 U.S.C. 6101(3)); and not to acquire property or services for the Federal government or pass-through entity's direct benefit or use;

(b) Is distinguished from a grant in that it provides for substantial involvement between the Federal awarding agency or pass-through entity and the non-Federal entity in carrying out the activity contemplated by the Federal award.

(c) The term does not include:

(1) A cooperative research and development agreement as defined in 15 U.S.C. 3710a; or

(2) An agreement that provides only:

(i) Direct United States Government cash assistance to an individual;

(ii) A subsidy;

(iii) A loan;

(iv) A loan guarantee; or

(v) Insurance.

**Federal awarding agency** means the Federal agency that provides a Federal award directly to a non-Federal entity

**Federal award** has the meaning, depending on the context, in either paragraph (a) or (b) of this section:

(a)(1) The Federal financial assistance that a non-Federal entity receives directly from a Federal awarding agency or indirectly from a pass-through entity, as described in § 200.101 Applicability; or

(2) The cost-reimbursement contract under the Federal Acquisition Regulations that a non-Federal entity receives directly from a Federal awarding agency or indirectly from a pass-through entity, as described in § 200.101 Applicability.

(b) The instrument setting forth the terms and conditions. The instrument is the grant agreement, cooperative agreement, other agreement for assistance covered in paragraph (b) of § 200.40 Federal financial assistance, or the cost-reimbursement contract awarded under the Federal Acquisition Regulations.

(c) Federal award does not include other contracts that a Federal agency uses to buy goods or services from a contractor or a contract to operate Federal government owned, contractor operated facilities (GOCOs).

(d) See also definitions of Federal financial assistance, grant agreement, and cooperative agreement.

**Non-Federal entity** means a state, local government, Indian tribe, institution of higher education (IHE), or nonprofit organization that carries out a Federal award as a recipient or subrecipient.

**Nonprofit organization** means any corporation, trust, association, cooperative, or other organization, not including IHEs, that:

(a) Is operated primarily for scientific, educational, service, charitable, or similar purposes in the public interest;

(b) Is not organized primarily for profit; and

*The School Board of Pinellas County Prohibits Discrimination In All Purchasing and Contracting*







Section Three: Bid Submission and Required Forms | Federal Funds Certifications and Forms

or modification of a Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all covered sub-awards exceeding \$100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.

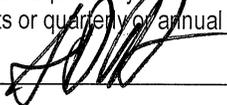
Does offeror agree? YES  Initials of Authorized Representative of offeror

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**RECORD RETENTION REQUIREMENTS FOR CONTRACTS INVOLVING FEDERAL FUNDS**

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When federal funds are expended by Participating Agency for any contract resulting from this procurement process, offeror certifies that it will comply with the record retention requirements detailed in 2 CFR § 200.333. The offeror further certifies that offeror will retain all records as required by 2 CFR § 200.333 for a period of three years after grantees or subgrantees submit final expenditure reports or quarterly or annual financial reports, as applicable, and all other pending matters are closed.

Does offeror agree? YES  Initials of Authorized Representative of offeror

---

**CERTIFICATION OF COMPLIANCE WITH THE ENERGY POLICY AND CONSERVATION ACT**

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When Participating Agency expends federal funds for any contract resulting from this procurement process, offeror certifies that it will comply with the mandatory standards and policies relating to energy efficiency which are contained in the state energy conservation plan issued in compliance with the Energy Policy and Conservation Act (42 U.S.C. 6321 et seq.; 49 C.F.R. Part 18).

Does offeror agree? YES  Initials of Authorized Representative of offeror

---

**CERTIFICATION OF COMPLIANCE WITH BUY AMERICA PROVISIONS**

---

To the extent purchases are made with Federal Highway Administration, Federal Railroad Administration, or Federal Transit Administration funds, offeror certifies that its products comply with all applicable provisions of the Buy America Act and agrees to provide such certification or applicable waiver with respect to specific products to any Participating Agency upon request. Purchases made in accordance with the Buy America Act must still follow the applicable procurement rules calling for free and open competition.

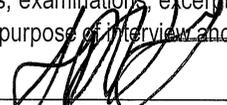
Does offeror agree? YES  Initials of Authorized Representative of offeror

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**CERTIFICATION OF ACCESS TO RECORDS – 2 C.F.R. § 200.336**

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Offeror agrees that the Inspector General of the Agency or any of their duly authorized representatives shall have access to any documents, papers, or other records of offeror that are pertinent to offeror's discharge of its obligations under the Contract for the purpose of making audits, examinations, excerpts, and transcriptions. The right also includes timely and reasonable access to offeror's personnel for the purpose of interview and discussion relating to such documents.

Does offeror agree? YES  Initials of Authorized Representative of offeror

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**CERTIFICATION OF APPLICABILITY TO SUBCONTRACTORS**

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Offeror agrees that all contracts it awards pursuant to the Contract shall be bound by the foregoing terms and conditions.



## **BID FORM 15: FEMA SPECIAL CONDITIONS**

Awarded Supplier(s) may need to respond to events and losses where products and services are needed for the immediate and initial response to emergency situations such as, but not limited to, water damage, fire damage, vandalism cleanup, biohazard cleanup, sewage decontamination, deodorization, and/or wind damage during a disaster or emergency situation. By submitting a proposal, the Supplier is accepted these FEMA Special Conditions required by the Federal Emergency Management Agency (FEMA).

“Contract” in the below pages under FEMA SPECIAL CONDITIONS is also referred to and defined as the “Master Agreement”.

“Contractor” in the below pages under FEMA SPECIAL CONDITIONS is also referred to and defined as “Supplier” or “Awarded Supplier”.

### **Conflicts of Interest**

No employee, officer, or agent may participate in the selection, award, or administration of a contract supported by a FEMA award if he or she has a real or apparent conflict of interest. Such a conflict would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of these parties, has a financial or other interest in or a tangible personal benefit from a firm considered for award. 2 C.F.R. § 200.318(c)(1); See also Standard Form 424D, ¶ 7; Standard Form 424B, ¶ 3. i. FEMA considers a “financial interest” to be the potential for gain or loss to the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of these parties as a result of the particular procurement. The prohibited financial interest may arise from ownership of certain financial instruments or investments such as stock, bonds, or real estate, or from a salary, indebtedness, job offer, or similar interest that might be affected by the particular procurement. ii. FEMA considers an “apparent” conflict of interest to exist where an actual conflict does not exist, but where a reasonable person with knowledge of the relevant facts would question the impartiality of the employee, officer, or agent participating in the procurement. c. Gifts. The officers, employees, and agents of the Participating Public Agency nor the Participating Public Agency (“NFE”) must neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts. However, NFE’s may set standards for situations in which the financial interest is de minimus, not substantial, or the gift is an unsolicited item of nominal value. 2 C.F.R. § 200.318(c)(1). d. Violations. The NFE’s written standards of conduct must provide for disciplinary actions to be applied for violations of such standards by officers, employees, or agents of the NFE. 2 C.F.R. § 200.318(c)(1). For example, the penalty for a NFE’s employee may be dismissal, and the penalty for a contractor might be the termination of the contract.

### **Contractor Integrity**

A contractor must have a satisfactory record of integrity and business ethics. Contractors that are debarred or suspended as described in Chapter III, ¶ 6.d must be rejected and cannot receive contract awards at any level.

### **Public Policy**

A contractor must comply with the public policies of the Federal Government and state, local government, or tribal government. This includes, among other things, past and current compliance with the:

a. Equal opportunity and nondiscrimination laws

*The School Board of Pinellas County Prohibits Discrimination In All Purchasing and Contracting*

- b. Five affirmative steps described at 2 C.F.R. § 200.321(b) for all subcontracting under contracts supported by FEMA financial assistance; and FEMA Procurement Guidance June 21, 2016 Page IV- 7
- c. Applicable prevailing wage laws, regulations, and executive orders

**Affirmative Steps**

For any subcontracting opportunities, Contractor must take the following Affirmative steps:

1. Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
2. Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
3. Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
4. Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; and
5. Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.

**Prevailing Wage Requirements**

When applicable, the awarded Contractor (s) and any and all subcontractor(s) agree to comply with all laws regarding prevailing wage rates including the Davis-Bacon Act, applicable to this solicitation and/or Participating Public Agencies. The Participating Public Agency shall notify the Contractor of the applicable pricing/prevailing wage rates and must apply any local wage rates requested. The Contractor and any subcontractor(s) shall comply with the prevailing wage rates set by the Participating Public Agency.

**Federal Requirements**

If products and services are issued in response to an emergency or disaster recovery the items below, located in this FEMA Special Conditions section of the Federal Funds Certifications, are activated and required when federal funding may be utilized.

**2 C.F.R. § 200.326 and 2 C.F.R. Part 200, Appendix II, Required Contract Clauses**

1. Termination for Convenience:

The right to terminate this Contract for the convenience of the Participating Public Agency is retained by the Participating Public Agency. In the event of a termination for convenience by the Participating Public Agency, the Participating Public Agency shall, at least ten (10) calendar days in advance, deliver written notice of the termination for convenience to Contractor. Upon Contractor's receipt of such written notice, Contractor immediately shall cease the performance of the Work and shall take reasonable and appropriate action to secure and protect the Work then in place. Contractor shall then be paid by the Participating Public Agency, in accordance with the terms and provisions of the Contract Documents, an amount not to exceed the actual labor costs incurred, the actual cost of all materials installed and the actual cost of all materials stored at the project site or away from the project site, as approved in writing by the Participating Public Agency but not yet paid for and which cannot be returned, and actual, reasonable and documented demobilization costs, if any, paid by Contractor and approved by the Participating Public Agency in connection with the Scope of Work in place which is completed as of the date of termination by the Participating Public Agency and that is in conformance with the Contract

Documents, less all amounts previously paid for the Work. No amount ever shall be owed or paid to Contractor for lost or anticipated profits on any part of the Scope of Work not performed or for consequential damages of any kind.

2. Equal Employment Opportunity:

The Participating Public Agency highly encourages Contractors to implement Affirmative Action practices in their employment programs. This means Contractor should not discriminate against any employee or applicant for employment because of race, color, religion, sex, pregnancy, sexual orientation, political belief or affiliation, age, disability or genetic information.

During the performance of this contract, the contractor agrees as follows:

(1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, or national origin. The contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, sexual orientation, gender identity, or national origin. Such action shall include, but not be limited to the following: Employment, upgrading, demotion, or transfer, recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of this nondiscrimination clause.

(2) The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, or national origin.

(3) The contractor will not discharge or in any other manner discriminate against any employee or applicant for employment because such employee or applicant has inquired about, discussed, or disclosed the compensation of the employee or applicant or another employee or applicant. This provision shall not apply to instances in which an employee who has access to the compensation information of other employees or applicants as a part of such employee's essential job functions discloses the compensation of such other employees or applicants to individuals who do not otherwise have access to such information, unless such disclosure is in response to a formal complaint or charge, in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or is consistent with the contractor's legal duty to furnish information.

(4) The contractor will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding, a notice to be provided by the agency contracting officer, advising the labor union or workers' representative of the contractor's commitments under section 202 of Executive Order 11246 of September 24, 1965, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

(5) The contractor will comply with all provisions of Executive Order 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.

(6) The contractor will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by the rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records, and accounts by the contracting agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.

(7) In the event of the contractor's non-compliance with the nondiscrimination clauses of this contract or with any of such rules, regulations, or orders, this contract may be canceled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts in accordance with procedures authorized in Executive Order 11246 of September 24, 1965, and such other sanctions may be imposed and remedies invoked as provided in Executive Order 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.

(8) The contractor will include the provisions of paragraphs (1) through (8) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as may be directed by the Secretary of Labor as a means of enforcing such provisions including sanctions for noncompliance: *Provided*, however, that in the event the contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

3. "During the performance of this contract, the contractor agrees as follows:

- (1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, or national origin. The contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment without regard to their race, color, religion, sex, or national origin. Such action shall include, but not be limited to the following: Employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided setting forth the provisions of this nondiscrimination clause.
- (2) The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive considerations for employment without regard to race, color, religion, sex, or national origin.
- (3) The contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding, a notice to be provided advising the said labor union or workers' representatives of the contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- (4) The contractor will comply with all provisions of Executive Order 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.
- (5) The contractor will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records, and accounts by the administering agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules,

regulations, and orders.

- (6) In the event of the contractor's noncompliance with the nondiscrimination clauses of this contract or with any of the said rules, regulations, or orders, this contract may be canceled, terminated, or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts or federally assisted construction contracts in accordance with procedures authorized in Executive Order 11246 of September 24, 1965, and such other sanctions as may be imposed and remedies invoked as provided in Executive Order 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided bylaw.
- (7) The contractor will include the portion of the sentence immediately preceding paragraph (1) and the provisions of paragraphs (1) through (7) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions, including sanctions for noncompliance: Provided, however, That in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the administering agency the contractor may request the United States to enter into such litigation to protect the interests of the United States."

4. Davis Bacon Act and Copeland Anti-Kickback Act.

- a. Applicability of Davis-Bacon Act. The Davis-Bacon Act only applies to the emergency Management Preparedness Grant Program, Homeland Security Grant Program, Nonprofit Security Grant Program, Tribal Homeland Security Grant Program, Port Security Grant Program, and Transit Security Grant Program. **It does not apply to other FEMA grant and cooperative agreement programs, including the Public Assistance Program.**
- b. All prime construction contracts in excess of \$2,000 awarded by non-Federal entities must include a provision for compliance with the Davis-Bacon Act (40 U.S.C. §§ 3141-3144 and 3146-3148) as supplemented by Department of Labor regulations at 29 C.F.R. Part 5 (Labor Standards Provisions Applicable to Contracts Covering Federally Financed and Assisted Construction)). See 2 C.F.R. Part 200, Appendix II, ¶ D.
- c. In accordance with the statute, contractors must be required to pay wages to laborers and mechanics at a rate not less than the prevailing wages specified in a wage determination made by the Secretary of Labor. In addition, contractors must be required to pay wages not less than once a week.
- d. The non-Federal entity must place a copy of the current prevailing wage determination issued by the Department of Labor in each solicitation. The decision to award a contract or subcontract must be conditioned upon the acceptance of the wage determination. The non-Federal entity must report all suspected or reported violations to the Federal awarding agency.
- e. In contracts subject to the Davis-Bacon Act, the contracts must also include a provision for compliance with the Copeland "Anti-Kickback" Act (40 U.S.C. § 3145), as supplemented by Department of Labor regulations at 29 C.F.R. Part 3 (Contractors

and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States). The Copeland Anti- Kickback Act provides that each contractor or subrecipient must be prohibited from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he or she is otherwise entitled. The non-Federal entity must report all suspected or reported violations to FEMA.

- f. The regulation at 29 C.F.R. § 5.5(a) does provide the required contract clause that applies to compliance with both the Davis-Bacon and Copeland Acts. However, as discussed in the previous subsection, the Davis-Bacon Act does not apply to Public Assistance recipients and subrecipients. In situations where the Davis-Bacon Act does not apply, neither does the Copeland “Anti-Kickback Act.” However, for purposes of grant programs where both clauses do apply, FEMA requires the following contract clause:

“Compliance with the Copeland “Anti-Kickback” Act.

- (1) Contractor. The contractor shall comply with 18 U.S.C. § 874, 40U.S.C. § 3145, and the requirements of 29 C.F.R. pt. 3 as may be applicable, which are incorporated by reference into this contract.
- (2) Subcontracts. The contractor or subcontractor shall insert in any subcontracts the clause above and such other clauses as the FEMA may by appropriate instructions require, and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for the compliance by any subcontractor or lower tier subcontractor with all of these contract clauses
- (3) Breach. A breach of the contract clauses above may be grounds for termination of the contract, and for debarment as a contractor and subcontractor as provided in 29 C.F.R. § 5.12.”

5. Contract Work Hours and SafetyStandards Act.

- a. Applicability: This requirement applies to all FEMA grant and cooperative agreement programs.
- b. Where applicable (see 40 U.S.C. § 3701), all contracts awarded by the non-Federal entity in excess of \$100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. §§ 3702 and 3704, as supplemented by Department of Labor regulations at 29 C.F.R. Part 5. See 2 C.F.R. Part 200, Appendix II, ¶ E.
- c. Under 40 U.S.C. § 3702, each contractor must be required to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than one and a half times the basic rate of pay for all hours worked in excess of 40 hours in the workweek.
- d. The requirements of 40 U.S.C. § 3704 are applicable to construction work and provide that no laborer or mechanic must be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous. These requirements do not apply to the purchases of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.

- e. The regulation at 29 C.F.R. § 5.5(b) provides the required contract clause concerning compliance with the Contract Work Hours and Safety Standards Act:

“Compliance with the Contract Work Hours and Safety Standards Act.

- (1) Overtime requirements. No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such workweek unless such laborer or mechanic receives compensation at a rate not less than one and one-half times the basic rate of pay for all hours worked in excess of forty hours in such workweek.
- (2) Violation; liability for unpaid wages; liquidated damages. In the event of any violation of the clause set forth in paragraph (1) of this section the contractor and any subcontractor responsible therefor shall be liable for the unpaid wages. In addition, such contractor and subcontractor shall be liable to the United States (in the case of work done under contract for the District of Columbia or a territory, to such District or to such territory), for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in paragraph (1) of this section, in the sum of \$10 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in paragraph (1) of this section.
- (3) Withholding for unpaid wages and liquidated damages. The (write in the name of the Federal agency or the loan or grant recipient) shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any moneys payable on account of work performed by the contractor or subcontractor under any such contract or any other Federal contract with the same prime contractor, or any other federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor, such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in paragraph (2) of this section.
- (4) Subcontracts. The contractor or subcontractor shall insert in any subcontracts the clauses set forth in paragraph (1) through (4) of this section and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for compliance by any subcontractor or lower tier subcontractor with the clauses set forth in paragraphs (1) through (4) of this section.”

6. Rights to Inventions Made Under a Contract or Agreement.

- a. Stafford Act Disaster Grants. This requirement **does not apply to the Public Assistance, Hazard Mitigation Grant Program, Fire Management Assistance Grant Program, Crisis Counseling Assistance and Training Grant Program, Disaster Case Management Grant Program, and Federal Assistance to Individuals and Households – Other Needs**

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Assistance Grant Program, as

FEMA awards under these programs do not meet the definition of “funding agreement.”

- b. If the FEMA award meets the definition of “funding agreement” under 37 C.F.R. § 401.2(a) and the non-Federal entity wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the non-Federal entity must comply with the requirements of 37 C.F.R. Part 401 (Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements), and any implementing regulations issued by FEMA. See 2 C.F.R. Part 200, Appendix II, ¶ F.
  - c. The regulation at 37 C.F.R. § 401.2(a) currently defines “funding agreement” as any contract, grant, or cooperative agreement entered into between any Federal agency, other than the Tennessee Valley Authority, and any contractor for the performance of experimental, developmental, or research work funded in whole or in part by the Federal government. This term also includes any assignment, substitution of parties, or subcontract of any type entered into for the performance of experimental, developmental, or research work under a funding agreement as defined in the first sentence of this paragraph.
7. Clean Air Act and the Federal Water Pollution Control Act. Contracts of amounts in excess of \$150,000 must contain a provision that requires the contractor to agree to comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act (42 U.S.C. §§ 7401-7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. §§ 1251-1387). Violations must be reported to FEMA and the Regional Office of the Environmental Protection Agency. See 2 C.F.R. Part 200, Appendix II, ¶ G.

- a. The following provides a sample contract clause concerning compliance for contracts of amounts in excess of \$150,000:

“Clean Air Act

- (1) The contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.
- (2) The contractor agrees to report each violation to the (name of the state agency or local or Indian tribal government) and understands and agrees that the (name of the state agency or local or Indian tribal government) will, in turn, report each violation as required to assure notification to the (name of recipient), Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- (3) The contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.

Federal Water Pollution Control Act

- (1) The contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. 1251 et seq.

- (2) The contractor agrees to report each violation to the (name of the state agency or local or Indian tribal government) and understands and agrees that the (name of the state agency or local or Indian tribal government) will, in turn, report each violation as required to assure notification to the (name of recipient), Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- (3) The contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.”

8. Debarment and Suspension.

- a. Applicability: This requirement applies to all FEMA grant and cooperative agreement programs.
- b. Non-federal entities and contractors are subject to the debarment and suspension regulations implementing Executive Order 12549, *Debarment and Suspension* (1986) and Executive Order 12689, *Debarment and Suspension* (1989) at 2 C.F.R. Part 180 and the Department of Homeland Security’s regulations at 2 C.F.R. Part 3000 (Non procurement Debarment and Suspension).
- c. These regulations restrict awards, subawards, and contracts with certain parties that are debarred, suspended, or otherwise excluded from or ineligible for participation in Federal assistance programs and activities. See 2 C.F.R. Part 200, Appendix II, ¶ H; and *Procurement Guidance for Recipients and Subrecipients Under 2 C.F.R. Part 200 (Uniform Rules): Supplement to the Public Assistance Procurement Disaster Assistance Team (PDAT) Field Manual* Chapter IV, ¶ 6.d, and Appendix C, ¶ 2 [hereinafter *PDAT Supplement*]. A contract award must not be made to parties listed in the SAM Exclusions. SAM Exclusions is the list maintained by the General Services Administration that contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549. SAM exclusions can be accessed at [www.sam.gov](http://www.sam.gov). See 2 C.F.R. § 180.530; *PDAT Supplement*, Chapter IV, ¶ 6.d and Appendix C, ¶ 2.
- d. In general, an “excluded” party cannot receive a Federal grant award or a contract within the meaning of a “covered transaction,” to include subawards and subcontracts. This includes parties that receive Federal funding indirectly, such as contractors to recipients and subrecipients. The key to the exclusion is whether there is a “covered transaction,” which is any non-procurement transaction (unless excepted) at either a “primary” or “secondary” tier. Although “covered transactions” do not include contracts awarded by the Federal Government for purposes of the non-procurement common rule and DHS’s implementing regulations, it does include some contracts awarded by recipients and subrecipient.
- e. Specifically, a covered transaction includes the following contracts for goods or services:
  - (1) The contract is awarded by a recipient or subrecipient in the amount of at least \$25,000.
  - (2) The contract requires the approval of FEMA, regardless of amount.
  - (3) The contract is for federally required audit services.
  - (4) A subcontract is also a covered transaction if it is awarded by the contractor of a recipient or subrecipient and requires either the approval of FEMA or is in excess of \$25,000.

- d. The following provides a debarment and suspension clause. It incorporates an optional method of verifying that contractors are not excluded or disqualified:

“Suspension and Debarment

- (1) This contract is a covered transaction for purposes of 2 C.F.R. pt. 180 and 2 C.F.R. pt. 3000. As such the contractor is required to verify that none of the contractor, its principals (defined at 2 C.F.R. § 180.995), or its affiliates (defined at 2 C.F.R. § 180.905) are excluded (defined at 2 C.F.R. § 180.940) or disqualified (defined at 2 C.F.R. § 180.935).
- (2) The contractor must comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C and must include a requirement to comply with these regulations in any lower tier covered transaction it enters into.
- (3) This certification is a material representation of fact relied upon by (insert name of subrecipient). If it is later determined that the contractor did not comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, in addition to remedies available to (name of state agency serving as recipient and name of subrecipient), the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment.
- (4) The bidder or proposer agrees to comply with the requirements of 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C while this offer is valid and throughout the period of any contract that may arise from this offer. The bidder or proposer further agrees to include a provision requiring such compliance in its lower tier covered transactions.”

9. Byrd Anti-Lobbying Amendment.

- a. Applicability: This requirement applies to all FEMA grant and cooperative agreement programs.
- b. Contractors that apply or bid for an award of \$100,000 or more must file the required certification. See 2 C.F.R. Part 200, Appendix II, ¶ I; 44 C.F.R. Part 18; *PDAT Supplement*, Chapter IV, 6.c; Appendix C, ¶ 4.
- c. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. § 1352. Each tier must also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the non-Federal award. See *PDAT Supplement*, Chapter IV, ¶ 6.c and Appendix C, ¶ 4.
- d. The following provides a Byrd Anti-Lobbying contract clause:

“Byrd Anti-Lobbying Amendment, 31 U.S.C. § 1352 (as amended)

Contractors who apply or bid for an award of \$100,000 or more shall file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract,

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grant, or any other award covered by 31 U.S.C. § 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the recipient.”

APPENDIX A, 44 C.F.R. PART 18 – CERTIFICATION REGARDING LOBBYING

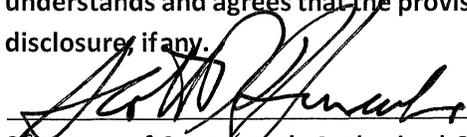
Certification for Contracts, Grants, Loans, and Cooperative Agreements (To be submitted with each bid or offer exceeding \$100,000)

The undersigned [Contractor] certifies, to the best of his or her knowledge, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form- LLL, “Disclosure Form to Report Lobbying,” in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995). Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The Contractor, CALADESI CONSTRUCTION CO., certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. § 3801 *et seq.*, apply to this certification and disclosure, if any.

  
\_\_\_\_\_  
Signature of Contractor's Authorized Official

9-15-2022  
\_\_\_\_\_  
Date

SCOTT D. HINRICHS, CORPORATE SECRETARY  
\_\_\_\_\_  
Name and Title of Contractor's Authorized Official

10. Procurement of Recovered Materials.

- a. Applicability: This requirement applies to all FEMA grant and cooperative agreement programs.
- b. A non-Federal entity that is a state agency or agency of a political subdivision of a state and its contractors must comply with Section 6002 of the Solid Waste Disposal Act, Pub. L. No. 89-272 (1965) (codified as amended by the Resource Conservation and Recovery Act at 42 U.S.C. § 6962). See 2 C.F.R. Part 200, Appendix II, ¶ J; 2 C.F.R. § 200.322; *PDAT Supplement*, Chapter V, ¶ 7.
- c. The requirements of Section 6002 include procuring only items designated in guidelines of the EPA at 40 C.F.R. Part 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired by the preceding fiscal year exceeded \$10,000; procuring solid waste management services in a manner that maximizes energy and resource recovery; and establishing an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.
- d. The following provides the clause that a state agency or agency of a political subdivision of a state and its contractors can include in contracts meeting the above contract thresholds:

“(1) In the performance of this contract, the Contractor shall make maximum use of products containing recovered materials that are EPA- designated items unless the product cannot be acquired—

- (i) Competitively within a timeframe providing for compliance with the contract performance schedule;
- (ii) Meeting contract performance requirements; or
- (iii) At a reasonable price.

(2) Information about this requirement, along with the list of EPA- designate items, is available at EPA’s Comprehensive Procurement Guidelines web site, <https://www.epa.gov/smm/comprehensive-procurement-guideline-cpg-program>.”

11. Additional FEMA Requirements.

- a. The Uniform Rules authorize FEMA to require additional provisions for non-Federal entity contracts. FEMA, pursuant to this authority, requires or recommends the following:
- b. Changes.  
To be eligible for FEMA assistance under the non-Federal entity’s FEMA grant or cooperative agreement, the cost of the change, modification, change order, or constructive change must be allowable, allocable, within the scope of its grant or cooperative agreement, and reasonable for the completion of project scope. FEMA recommends, therefore, that a non-Federal entity include a changes clause in its contract that describes how, if at all, changes can be made by either party to alter the method, price, or schedule of the work without breaching the contract. The language of the clause may differ depending on the nature of the contract and the end-item

procured.

c. Access to Records.

All non-Federal entities must place into their contracts a provision that all contractors and their successors, transferees, assignees, and subcontractors acknowledge and agree to comply with applicable provisions governing Department and FEMA access to records, accounts, documents, information, facilities, and staff. See DHS Standard Terms and Conditions, v 3.0, ¶ XXVI (2013).

d. The following provides a contract clause regarding access to records:

“Access to Records. The following access to records requirements apply to this contract:

(1) The contractor agrees to provide (insert name of state agency or local or Indian tribal government), (insert name of recipient), the FEMA Administrator, the Comptroller General of the United States, or any of their authorized representatives access to any books, documents, papers, and records of the Contractor which are directly pertinent to this contract for the purposes of making audits, examinations, excerpts, and transcriptions.

(2) The Contractor agrees to permit any of the foregoing parties to reproduce by any means whatsoever or to copy excerpts and transcriptions as reasonably needed.

(3) The contractor agrees to provide the FEMA Administrator or his authorized representatives access to construction or other work sites pertaining to the work being completed under the contract.”

12. DHS Seal, Logo, and Flags.

- a. All non-Federal entities must place in their contracts a provision that a contractor shall not use the DHS seal(s), logos, crests, or reproductions of flags or likenesses of DHS agency officials without specific FEMA pre-approval. See DHS Standard Terms and Conditions, v 3.0, ¶ XXV (2013).
- b. The following provides a contract clause regarding DHS Seal, Logo, and Flags: “The contractor shall not use the DHS seal(s), logos, crests, or reproductions of flags or likenesses of DHS agency officials without specific FEMA pre-approval.”

13. Compliance with Federal Law, Regulations, and Executive Orders.

- a. All non-Federal entities must place into their contracts an acknowledgement that FEMA financial assistance will be used to fund the contract along with the requirement that the contractor will comply with all applicable federal law, regulations, executive orders, and FEMA policies, procedures, and directives.
- b. The following provides a contract clause regarding Compliance with Federal Law, Regulations, and Executive Orders: “This is an acknowledgement that FEMA financial assistance will be used to fund the contract only. The contractor will comply will all applicable federal law, regulations, executive orders, FEMA policies, procedures, and directives.”

14. No Obligation by Federal Government.

- a. The non-Federal entity must include a provision in its contract that states that the Federal Government is not a party to the contract and is not subject to any obligations or liabilities to the non-Federal entity, contractor, or any other party pertaining to

*The School Board of Pinellas County Prohibits Discrimination In All Purchasing and Contracting*

any matter resulting from the contract.

- b. The following provides a contract clause regarding no obligation by the Federal Government: “The Federal Government is not a party to this contract and is not subject to any obligations or liabilities to the non-Federal entity, contractor, or any other party pertaining to any matter resulting from the contract.”

15. Program Fraud and False or Fraudulent Statements or Related Acts.

- a. The non-Federal entity must include a provision in its contract that the contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to its actions pertaining to the contract.
- b. The following provides a contract clause regarding Fraud and False or Fraudulent or Related Acts: “The contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the contractor’s actions pertaining to this contract.”

Additional contract clauses per 2 C.F.R. § 200.325

For applicable construction/reconstruction/renovation and related services: A payment and performance bond are both required for 100 percent of the contract price. A “performance bond” is one executed in connection with a contract to secure fulfillment of all the contractor’s obligations under such contract. A “payment bond” is one executed in connection with a contract to assure payment as required by law of all persons supplying labor and material in the execution of the work provided in the contract.

**Offeror agrees to comply with all terms and conditions outlined in the FEMA Special Conditions section of this solicitation.**

Offeror’s Name:

CALADESI CONSTRUCTION CO.

Address, City, State, and Zip Code:

1390 DONEGAN ROAD, LARGO FLORIDA 33771

Phone Number: 727.585.9945 Fax Number: 727.585.6881

Printed Name and Title of Authorized Representative: SCOTT D. HINRICHS, CORPORATE SEC.

Email Address: SHINRICHS@CALADESI.BIZ

Signature of Authorized Representative: 

Date: 9-15-2022

## BID FORM 15: SIGNATURE FORM

The undersigned hereby proposes and agrees to furnish goods and/or services in strict compliance with the terms, specifications and conditions at the prices proposed within response unless noted in writing. The undersigned further certifies that he/she is an officer of the company and has authority to negotiate and bind the company named below and has not prepared this bid in collusion with any other Respondent and that the contents of this bid as to prices, terms or conditions of said bid have not been communicated by the undersigned nor by any employee or agent to any person engaged in this type of business prior to the official opening of this bid.

Company Name: CALADESI CONSTRUCTION CO.

Address: 1390 DONEGAN ROAD

City/ State/ Zip: LARGO, FLORIDA 33771

Telephone No: 727.585.9945

Fax No: 727.585.6881

Email Address: SHINRICHS@CALADESI.BIZ

Printed Name: SCOTT D. HINRICHS

Position with Company: CORPORATE SECRETARY

Authorized Signature 

The term of the Master Agreement will be three (3) years following the contract award date with the option to renew for two (2) additional one (1) year periods. The anticipated full term of the contract is five (5) years.

\_\_\_\_\_  
Pinellas County Schools Authorized Agent

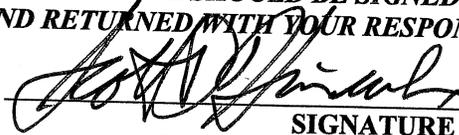
\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name



**DATE:** September 2, 2022  
**TO:** Prospective Proposers  
**FROM:** Joe Benjamin, NIGP-CPP, CPPO, CPPB  
 Director of Purchasing  
**SUBJECT: ADDENDUM NO. 1, RFP NO. 23-909-027**

**NOTE: THIS ADDENDUM SHOULD BE SIGNED AS ACKNOWLEDGMENT OF ITS RECEIPT AND RETURNED WITH YOUR RESPONSE TO THE RFQ.**



**SIGNATURE**

SCOTT D. HINRICHS

CALADESI CONSTRUCTION CO.

**COMPANY NAME**

The following should be recognized as **Addendum No. 1** to the **RFP No. 23-909-027** for Job Order Contracting Services In the State of Florida dated **August 11, 2022**, and due **September 15, 2022**.

**PLEASE NOTE THE FOLLOWING:**

Header in Section 2, pages 1 -51, is wrong. The Header currently reads, Section Three: Bid Submission and Required Forms and should read, Section Two: Bid Submission and Required Forms.

**THE FOLLOWING QUESTIONS AND ANSWERES ARE FOR INFORMATION PURCOSES ONLY:**

1. Are Bid Bonds required to bid on this opportunity?
  - **Answer:** No, Bid Bonds are not required to bid on this opportunity?
2. Verify we are to submit a hard copy and flash drive for all the regions we pursue.
  - **Answer:** Yes, we need you to submit a hard copy and a flash drive containing electronic copies of your submission. All the information can be copied on one flash drive if you are able. Flash Drive must be labeled with Bid Number and Company Name.
3. There are 8 separate GC contract numbers in region 1. Do you need to submit on all the contracts in order to receive a possible award in the region? How will the awards be distributed?
  - **Answer:** Yes, you will need to submit bid forms 1 and 2 for all separate contract opportunities within the region(s) to be considered for award. Awards are based on the lowest, responsive, responsible bidder based on the Combined Adjustment Factor. No bidder will be awarded more than on same scope contract within a Geographic Region. In the event a bidder submits the lowest bid on more than one Solicitation,



Pinellas County Schools may determine which contract will be awarded based on the combination of bids resulting in the lowest overall cost.

4. Is there an opportunity to adjust our Adjustment Factors at any time during the entire 5 years (including renewals) or do we need to figure this risk into our Adjustment Factor?
  - **Answer:** The Adjustment Factors submitted with the Contractor's Proposal shall be used for the full term of the Contract. On the anniversary of this contract (i.e. January 1, 2023 and each January 1st thereafter during the term) a new Construction Task Catalog will be furnished to address the escalation or de-escalation of costs of materials and services.
5. Is there a historical data of the number of projects between certain dollar values that may be run through this contract to help set an appropriate adjustment factor based on anticipated project sizes?
  - **Answer:** We have applied an estimated value of this contract at approximately \$10,000,000 annually, excluding renewal options. This is only an estimate and the actual amount could vary up or down.
6. Are we allowed to reject invitations of certain project sizes to match our set Adjustment Factors or must we accept all invitations and submit price proposals?
  - **Answer:** Acceptance of invitations and submission of price proposals is a business decision for the contractor. Through this program contractors are not required to accept all invitations that may come forward.
7. There is an inconsistency with the bid opening Room - A308 or A318.
  - **Answer:** The Bid Opening Room is A308.
8. Is there a published attendance list from the recent virtual pre-bid and will notes from that meeting be provided?
  - **Answer:** There is not an attendance list available sine the meeting was non-mandatory. The link to the meeting recording is:  
<https://gordian.zoom.us/rec/share/o3MBaxYAWYORG4GjDNaYlaqxEnfg3bmjvakqiPGg5OUW923GEP80aWiu78yUor2J.PC11pCfPZKIFUrRX>
9. In addition to the Trades listed in the Regional Tables for General Construction, Electrical Construction, Plumbing Construction, Asphalt Paving/Concrete Construction, Civil Construction will trades which are typically represented in the Gordian CTC for Roofing/Waterproofing and HVAC Construction be added to the list or are they assumed to be included under one of the trades listed and if so, which would they apply too?
  - **Answer:** Additional Trades will not be added to this solicitation. Complete Roofing/Waterproofing and HVAC construction is covered in all of the CTC's giving the ability for each trade awarded to use line items from those sections of the CTC to complete any scope of work. Major Roofing/Waterproofing and HVAC Construction would typically be covered through the General Construction Contracts for this solicitation.
10. Can you please explain this verbiage in greater detail, as it regards to proposal or purchase orders on this project? Is this to mean that if a purchase order of \$10,000 is issued under the



contract, the contractor is required to issue a \$750 payment to the Gordian Group? Please clarify.

*“9. FEES*

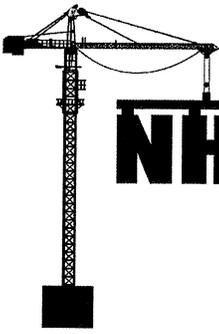
*The Bidder must include an Administrative Fee in calculating the Proposer’s Adjustment Factors. The Administrative Fee will be calculated at the rate of 7.5% of the total Purchase Order Price.*

*The Administrative Fee will be remitted by the Contractor to the designated Gordian contract administrator, within thirty (30) days of the submission of an invoice to a Participating Public Agency by Contractor. The Contractor will be assessed a one percent (1%) per month late fee for any Administrative Fees not paid by the due date set forth herein.”*

- **Answer:** Yes, if a purchase order of \$10,000 is issued under the contract, the contractor is required to issue a \$750 payment to the Gordian Group. Bidders must include the administrative fee in their responding adjustment factors. This ensures the administrative fee is included in the final work order price. Once the project is completed Gordian then invoices the contractor for the administrative fee due.

**NOTE:** Any questions pertaining to this addendum should be submitted in writing to:

**Joe Benjamin, NIGP-CPP, CPPO, CPPB at [benjaminst@pcsb.org](mailto:benjaminst@pcsb.org)**



**NHC**

**NIELSON, WOJTOWICZ, NEU & ASSOCIATES**  
A NIELSON HOOVER GROUP COMPANY

**ACRISURE**  
AGENCY PARTNER

September 15th, 2022

**School Board of Pinellas County**  
**Contract Number: 23-909-027**

**Re: Caladesi Construction Company**

To Whom It May Concern:

This is to advise you that our office provides bid, performance, and payment bonds for **Caladesi Construction Company**. The name of their surety is **The Ohio Casualty Insurance Company** located at 175 Berkeley Street, Boston, MA 02116. They carry an A.M. Best Rating of A XV, and is listed in the Department of Treasury's Federal Register.

Based upon normal and standard underwriting criteria at the time of the request, **The Ohio Casualty Insurance Company** should be in a position to provide **Caladesi Construction Company** Performance and Payment Bonds for the single projects in the amount of **\$12,000,000.00** and aggregate support in the amount of **\$30,000,000.00**. We reserve the right to review final contractual documents, bond forms and obtain satisfactory evidence of funding prior to final commitment to issue bonds.

**Caladesi Construction Company** is an excellent contractor and we hold them in highest regard. We feel extremely confident in our contractor and encourage you to offer them an opportunity to execute any upcoming projects.

This letter is not an assumption of liability, nor is it a bid or performance and payment bond. It is issued only as a bonding reference requested by our respected client. We do not assume liability to any third party, including yourselves, if we do execute said bonds.

If you should have any questions, please do not hesitate to give me a call.

Sincerely,

Kevin Wojtowicz  
Surety Bond Agent



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS –  
AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION  
AGREEMENT WITH YOU – ONGOING OPERATIONS AND  
PRODUCTS-COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

**SCHEDULE (OPTIONAL)**

<b>Name of Additional Insured Persons or Organizations</b>
(As required by written contract or agreement per Paragraph A. below.) .

<b>Locations of Covered Operations</b>
(As per the written contract or agreement, provided the location is within the "coverage territory".) .

(Information required to complete this Schedule, if not shown above, will be shown in the Declarations.)

A. **Section II – Who Is An Insured** is amended to include as an additional insured:

1. Any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement in effect during the term of this policy that such person or organization be added as an additional insured on your policy; and
2. Any other person or organization you are required to add as an additional insured under the contract or agreement described in Paragraph 1. above; and

3. The particular person or organization, if any, scheduled above.

Such person(s) or organization(s) is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" occurring after the execution of the contract or agreement described in Paragraph 1. above and caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf in the performance of your ongoing operations for the additional insured; or
3. "Your work" performed for the additional insured and included in the "products-completed operations hazard" if such coverage is specifically required in the written contract or agreement.

However, the insurance afforded to such additional insured(s) described above:

1. Only applies to the extent permitted by law;
  2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured;
  3. Will not be broader than that which is afforded to you under this policy; and
  4. Nothing herein shall extend the term of this policy.
- B. The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
1. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
  2. Supervisory, inspection, architectural or engineering activities.
- C. This insurance is excess over any other valid and collectible insurance available to the additional insured whether on a primary, excess, contingent or any other basis; unless the written contract or agreement requires that this insurance be primary and non-contributory, in which case this insurance will be primary and non-contributory relative to insurance on which the additional insured is a Named Insured.

D. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits of Insurance**:

The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement described in Paragraph A.1.; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

E. **Section IV – Commercial General Liability Conditions** is amended as follows:

The Duties In The Event of Occurrence, Offense, Claim or Suit condition is amended to add the following additional conditions applicable to the additional insured:

An additional insured under this endorsement must as soon as practicable:

1. Give us written notice of an "occurrence" or an offense which may result in a claim or "suit" under this insurance, and of any claim or "suit" that does result;
2. Send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions; and
3. Tender the defense and indemnity of any claim or "suit" to any provider of other insurance which would cover the additional insured for a loss we cover under this endorsement and agree to make available all such other insurance. However, this condition does not affect Paragraph C. above.

We have no duty to defend or indemnify an additional insured under this endorsement until we receive from the additional insured written notice of a claim or "suit".

- F. This endorsement does not apply to any additional insured or project that is specifically identified in any other additional insured endorsement attached to the Commercial General Liability Coverage Form.

# FIRST CHOICE CONTRACTORS LIABILITY ENDORSEMENT

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## FIRST CHOICE CONTRACTORS LIABILITY ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

NOTE: The following are additions, replacements and amendments to the Commercial General Liability Coverage Form, and will apply unless excluded by separate endorsement(s) to the Commercial General Liability Coverage Form.

The **COMMERCIAL GENERAL LIABILITY COVERAGE FORM** is amended as follows:

**SECTION I - COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE** is amended as follows:

**1. Extended "Property Damage"**

Exclusion 2.a., Expected or Intended Injury, is replaced with the following:

- a. "Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect persons or property.

**2. Non-owned Watercraft**

Exclusion 2.g. (2) (a) is replaced with the following:

- (a) Less than 51 feet long; and

**3. Property Damage Liability – Borrowed Equipment**

The following is added to Exclusion 2.j. (4):

Paragraph (4) of this exclusion does not apply to "property damage" to borrowed equipment while at a jobsite and not being used to perform operations. The most we will pay for "property damage" to any one borrowed equipment item under this coverage is \$25,000 per "occurrence". The insurance afforded under this provision is excess over any other valid and collectible property insurance (including deductible) available to the insured, whether primary, excess, contingent or on any other basis.

**4. Limited Electronic Data Liability**

Exclusion 2.p. is replaced with the following:

- p. Electronic Data

Damages arising out of the loss of, loss of use of, damage to, corruption of, inability to access, or inability to manipulate "electronic data" that does not result from physical injury to tangible property.

The most we will pay under Coverage A for "property damage" because of all loss of "electronic data" arising out of any one "occurrence" is \$10,000.

We have no duty to investigate or defend claims or "suits" covered by this Limited Electronic Data Liability coverage.

The following definition is added to **SECTION V – DEFINITIONS** of the Coverage Form:

"Electronic data" means information, facts or programs stored as or on, created or used on, or transmitted to or from computer software (including systems and applications software), hard or floppy disks, CD-ROMS, tapes, drives, cells, data processing devices or any other media which are used with electronically controlled equipment.

For purposes of this **Limited Electronic Data Liability** coverage, the definition of "Property Damage" in **SECTION V – DEFINITIONS** of the Coverage Form is replaced by the following:

17. "Property damage" means:

- a. Physical injury to tangible property, including all resulting loss of use of that property. All such loss of use shall be deemed to occur at the time of the physical injury that caused it;
- b. Loss of use of tangible property that is not physically injured. All such loss of use shall be deemed to occur at the time of the "occurrence" that caused it;
- c. Loss of, loss of use of, damage to, corruption of, inability to access, or inability to properly manipulate "electronic data", resulting from physical injury to tangible property. All such loss of "electronic data" shall be deemed to occur at the time of the "occurrence" that caused it.

For purposes of this insurance, "electronic data" is not tangible property.

**SECTION I – COVERAGES, COVERAGE B. PERSONAL AND ADVERTISING INJURY LIABILITY** is amended as follows:

Paragraph 2.e. Exclusions – the Contractual Liability Exclusion is deleted.

**SECTION I – COVERAGES, the following coverages are added:**

**COVERAGE D. VOLUNTARY PROPERTY DAMAGE**

**1. Insuring Agreement**

We will pay, at your request, for "property damage" caused by an "occurrence", to property of others caused by you, or while in your possession, arising out of your business operations. The amount we will pay for damages is described in SECTION III LIMITS OF INSURANCE.

**2. Exclusions**

This insurance does not apply to:

"Property Damage" to:

- a. Property at premises owned, rented, leased or occupied by you;
- b. Property while in transit;
- c. Property owned by, rented to, leased to, loaned to, borrowed by, or used by you;
- d. Premises you sell, give away, or abandon, if the "property damage" arises out of any part of those premises;
- e. Property caused by or arising out of the "products-completed operations hazard";
- f. Motor vehicles;
- g. "Your product" arising out of it or any part of it; or
- h. "Your work" arising out of it or any part of it.

**3. Deductible**

We will not pay for loss in any one "occurrence" until the amount of loss exceeds \$250. We will then pay the amount of loss in excess of \$250 up to the applicable limit of insurance.

**4. Cost Factor**

In the event of a covered loss, you shall, if requested by us, replace the damaged property or furnish the labor and materials necessary for repairs thereto at your actual cost, excluding profit or overhead charges.

The insurance afforded under COVERAGE D is excess over any other valid and collectible property or inland marine insurance (including the deductible applicable to the property or inland marine coverage) available to you whether primary, excess, contingent or any other basis.

Coverage D covers unintentional damage or destruction, but does not cover disappearance, theft, or loss of use.

The insurance under COVERAGE D does not apply if a loss is paid under COVERAGE E.

## **COVERAGE E. CARE, CUSTODY OR CONTROL**

### **1. Insuring Agreement**

We will pay those sums that the insured becomes legally obligated to pay as damages because of "property damage" caused by an "occurrence", to property of others while in your care, custody, or control or property of others as to which you are exercising physical control if the "property damage" arises out of your business operations. The amount we will pay for damages is described in SECTION III LIMITS OF INSURANCE.

### **2. Exclusions**

This insurance does not apply to:

"Property Damage" to:

- a. Property at premises owned, rented, leased or occupied by you;
- b. Property while in transit;
- c. Premises you sell, give away, or abandon, if the "property damage" arises out of any part of those premises;
- d. Property caused by or arising out of the "products-completed operations hazard";
- e. Motor vehicles;
- f. "Your product" arising out of it or any part of it; or
- g. "Your work" arising out of it or any part of it.

### **3. Deductible**

We will not pay for loss in any one "occurrence" until the amount of loss exceeds \$250. We will then pay the amount of loss in excess of \$250 up to the applicable limit of insurance.

### **4. Cost Factor**

In the event of a covered loss, you shall, if requested by us, replace the damaged property or furnish the labor and materials necessary for repairs thereto at your actual cost, excluding profit or overhead charges.

The insurance afforded under COVERAGE E is excess over any other valid and collectible property or inland marine insurance (including the deductible applicable to the property or inland marine coverage) available to you whether primary, excess, contingent or any other basis.

The insurance under COVERAGE E does not apply if a loss is paid under COVERAGE D.

## **COVERAGE F. LIMITED PRODUCT WITHDRAWAL EXPENSE**

### **1. Insuring Agreement**

- a. If you are a "seller", we will reimburse you for "product withdrawal expenses" associated with "your product" incurred because of a "product withdrawal" to which this insurance applies.

The amount of such reimbursement is limited as described in SECTION III - LIMITS OF INSURANCE. No other obligation or liability to pay sums or perform acts or services is covered.

- a. This insurance applies to a "product withdrawal" only if the "product withdrawal" is initiated in the "coverage territory" during the policy period because:
  - (1) You determine that the "product withdrawal" is necessary; or
  - (2) An authorized government entity has ordered you to conduct a "product withdrawal".
- c. We will reimburse only those "product withdrawal expenses" which are incurred and reported to us within one year of the date the "product withdrawal" was initiated.
- d. The initiation of a "product withdrawal" will be deemed to have been made only at the earliest of the following times:
  - (1) When you have announced, in any manner, to the general public, your vendors or to your employees (other than those employees directly involved in making the determination) your decision to conduct a "product withdrawal" This applies regardless of whether the determination to conduct a "product withdrawal" is made by you or is requested by a third party;
  - (2) When you received, either orally or in writing, notification of an order from an authorized government entity to conduct a "product withdrawal"; or
  - (3) When a third party has initiated a "product withdrawal" and you communicate agreement with the "product withdrawal", or you announce to the general public, your vendors or to your employees (other than those employees directly involved in making the determination) your decision to participate in the "product withdrawal", whichever comes first.
- e. "Product withdrawal expenses" incurred to withdraw "your products" which contain:
  - (1) The same "defect" will be deemed to have arisen out of the same "product withdrawal"; or
  - (2) A different "defect" will be deemed to have arisen out of a separate "product withdrawal" if newly determined or ordered in accordance with paragraph 1.b of this coverage.

## 2. Exclusions

This insurance does not apply to "product withdrawal" expenses" arising out of:

- a. Any "product withdrawal" initiated due to:
  - (1) The failure of "your products" to accomplish their intended purpose, including any breach of warranty of fitness, whether written or implied. This exclusion does not apply if such failure has caused or is reasonably expected to cause "bodily injury" or physical damage to tangible property.
  - (2) Copyright, patent, trade secret or trademark infringements;
  - (3) Transformation of a chemical nature, deterioration or decomposition of "your product", except if it is caused by:
    - (a) An error in manufacturing, design, processing or transportation of "your product"; or
    - (b) "Product tampering".
  - (4) Expiration of the designated shelf life of "your product".
- b. A "product withdrawal", initiated because of a "defect" in "your product" known to exist by the Named Insured or the Named Insured's "executive officers", prior to the inception date of this Coverage Part or prior to the time "your product" leaves your control or possession.
- c. Recall of any specific products for which "bodily injury" or "property damage" is excluded under Coverage A - Bodily Injury And Property Damage Liability by endorsement.
- d. Recall of "your products" which have been banned from the market by an authorized government entity prior to the policy period.
- e. The defense of a claim or "suit" against you for "product withdrawal expenses".

3. For the purposes of the insurance afforded under COVERAGE F, the following is added to 2. Duties In The Event Of Occurrence, Offense, Claim Or Suit Condition under SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS:

e. Duties In The Event Of A "Defect" Or A "Product Withdrawal"

- (1) You must see to it that we are notified as soon as practicable of any actual, suspected or threatened "defect" in "your products", or any governmental investigation, that may result in a "product withdrawal". To the extent possible, notice should include:
  - (a) How, when and where the "defect" was discovered;
  - (b) The names and addresses of any injured persons and witnesses; and
  - (c) The nature, location and circumstances of any injury or damage arising out of use or consumption of "your product".
- (2) If a "product withdrawal" is initiated, you must:
  - (a) Immediately record the specifics of the "product withdrawal" and the date it was initiated;
  - (b) Send us written notice of the "product withdrawal" as soon as practicable; and
  - (c) Not release, consign, ship or distribute by any other method, any product, or like or similar products, with an actual, suspected or threatened defect.
- (3) You and any other involved insured must:
  - (a) Immediately send us copies of pertinent correspondence received in connection with the "product withdrawal";
  - (b) Authorize us to obtain records and other information; and
  - (c) Cooperate with us in our investigation of the "product withdrawal".

4. For the purposes of this Coverage F, the following definitions are added to the Definitions Section:

- a. "Defect" means a defect, deficiency or inadequacy that creates a dangerous condition.
- b. "Product tampering" is an act of intentional alteration of "your product" which may cause or has caused "bodily injury" or physical injury to tangible property.

When "product tampering" is known, suspected or threatened, a "product withdrawal" will not be limited to those batches of "your product" which are known or suspected to have been tampered with.
- c. "Product withdrawal" means the recall or withdrawal of "your products", or products which contain "your products", from the market or from use, by any other person or organization, because of a known or suspected "defect" in "your product", or a known or suspected "product tampering", which has caused or is reasonably expected to cause "bodily injury" or physical injury to tangible property.
- d. "Product withdrawal expenses" means those reasonable and necessary extra expenses, listed below paid and directly related to a "product withdrawal":
  - (1) Costs of notification;
  - (2) Costs of stationery, envelopes, production of announcements and postage or facsimiles;
  - (3) Costs of overtime paid to your regular non-salaried employees and costs incurred by your employees, including costs of transportation and accommodations;
  - (4) Costs of computer time;
  - (5) Costs of hiring independent contractors and other temporary employees;
  - (6) Costs of transportation, shipping or packaging;
  - (7) Costs of warehouse or storage space; or

- (8) Costs of proper disposal of "your products", or products that contain "your products", that cannot be reused, not exceeding your purchase price or your cost to produce the products; but "product withdrawal expenses" does not include costs of the replacement, repair or redesign of "your product", or the costs of regaining your market share, goodwill, revenue or profit.
- e. "Seller" means a person or organization that manufactures, sells or distributes goods or products. "Seller" does not include a "contractor" as defined elsewhere in this endorsement.

The insurance under COVERAGE F does not apply if a loss is paid under COVERAGE G.

## **COVERAGE G. CONTRACTORS ERRORS AND OMISSIONS**

### **1. Insuring Agreement**

If you are a "contractor", we will pay those sums that you become legally obligated to pay as damages because of "property damage" to "your product", "your work" or "impaired property", due to faulty workmanship, material or design, or products including consequential loss, to which this insurance applies. The damages must have resulted from your negligent act, error or omission while acting in your business capacity as a contractor or subcontractor or from a defect in material or a product sold or installed by you while acting in this capacity. The amount we will pay for damages is described in SECTION III LIMITS OF INSURANCE.

We have no duty to investigate or defend claims or "suits" covered by this Contractors Errors and Omissions coverage.

This coverage applies only if the "property damage" occurs in the "coverage territory" during the policy period.

This coverage does not apply to additional insureds, if any.

Supplementary Payments – Coverage A and B do not apply to Coverage G. Contractors Errors and Omissions.

### **2. Exclusions**

This insurance does not apply to:

- a. "Bodily injury" or "personal and advertising injury".
- b. Liability or penalties arising from a delay or failure to complete a contract or project, or to complete a contract or project on time.
- c. Liability because of an error or omission:
  - (1) In the preparation of estimates or job costs;
  - (2) Where cost estimates are exceeded;
  - (3) In the preparation of estimates of profit or return on capital;
  - (4) In advising or failure to advise on financing of the work or project; or
  - (5) In advising or failing to advise on any legal work, title checks, form of insurance or suretyship.
- d. Any liability which arises out of any actual or alleged infringement of copyright or trademark or trade dress or patent, unfair competition or piracy, or theft or wrongful taking of concepts or intellectual property.
- e. Any liability for damages:
  - (1) From the intentional dishonest, fraudulent, malicious or criminal acts of the Named Insured, or by any partner, member of a limited liability company, or executive officer, or at the direction of any of them; or
  - (2) Which is in fact expected or intended by the insured, even if the injury or damage is of a different degree or type than actually expected or intended.

- f. Any liability arising out of manufacturer's warranties or guarantees whether express or implied.
- g. Any liability arising from "property damage" to property owned by, rented or leased to the insured.
- h. Any liability incurred or "property damage" which occurs, in whole or in part, before you have completed "your work." "Your work" will be deemed completed at the earliest of the following times:
  - (1) When all of the work called for in your contract or work order has been completed;
  - (2) When all the work to be done at the job site has been completed if your contract calls for work at more than one job site; or
  - (3) When that part of the work done at a job site has been put to its intended use by any person or organization other than another contractor or subcontractor working on the same project.

Work that may need service or maintenance, correction, repair or replacement, but which is otherwise complete, will be treated as complete.

- i. Any liability arising from "property damage" to products that are still in your physical possession.
- j. Any liability arising out of the rendering of or failure to render any professional services by you or on your behalf, but only with respect to either or both of the following operations:
  - (1) Providing engineering, architectural or surveying services to others; and
  - (2) Providing or hiring independent professionals to provide engineering, architectural or surveying services in connection with construction work you perform.

Professional services include the preparing, approving or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders, or drawings and specifications. Professional services also include supervisory or inspection activities performed as part of any related architectural or engineering activities.

But, professional services do not include services within construction means, methods, techniques, sequences and procedures employed by you in connection with construction work you perform.

- k. Your loss of profit or expected profit and any liability arising therefrom.
- l. "Property damage" to property other than "your product," "your work" or "impaired property."
- m. Any liability arising from claims or "suits" where the right of action against the insured has been relinquished or waived.
- n. Any liability for "property damage" to "your work" if the damaged work or the work out of which the damage arises was performed on your behalf by a subcontractor.
- o. Any liability arising from the substitution of a material or product for one specified on blueprints, work orders, contracts or engineering specifications unless there has been written authorization, or unless the blueprints, work orders, contracts or engineering specifications were written by you, and you have authorized the changes.
- p. Liability of others assumed by the insured under any contract or agreement, whether oral or in writing. This exclusion does not apply to liability for damages that the insured would have in the absence of the contract or agreement.

**3. For the purposes of Coverage G, the following definition is added to the Definitions section:**

- a. "Contractor" means a person or organization engaged in activities of building, clearing, filling, excavating or improvement in the size, use or appearance of any structure or land. "Contractor" does not include a "seller" as defined elsewhere in this endorsement.

**4. Deductible**

We will not pay for loss in any one "occurrence" until the amount of loss exceeds \$250. The limits of insurance will not be reduced by the application of the deductible amount.

We may pay any part or all of the deductible amount to effect settlement of any claim or "suit", and upon notification of the action taken, you shall promptly reimburse us for such part of the deductible amount as has been paid by us.

**5. Cost Factor**

In the event of a covered loss, you shall, if requested by us, replace the damaged property or furnish the labor and materials necessary for repairs thereto at your actual cost, excluding profit or overhead charges.

The insurance under COVERAGE G does not apply if a loss is paid under COVERAGE F.

**COVERAGE H. LOST KEY COVERAGE**

**1. Insuring Agreement**

We will pay those sums, subject to the limits of liability described in SECTION III LIMITS OF INSURANCE in this endorsement and the deductible shown below, that you become legally obligated to pay as damages caused by an "occurrence" and due to the loss or mysterious disappearance of keys entrusted to or in the care, custody or control of you or your "employees" or anyone acting on your behalf. The damages covered by this endorsement are limited to the:

- a. Actual cost of the keys;
- b. Cost to adjust locks to accept new keys; or
- c. Cost of new locks, if required, including the cost of installation.

**2. Exclusions**

This insurance does not apply to:

- a. Keys owned by any insured, employees of any insured, or anyone acting on behalf of any insured;
- b. Any resulting loss of use; or
- c. Any of the following acts by any insured, employees of any insured, or anyone acting on behalf of any insured:
  - 1) Misappropriation;
  - 2) Concealment;
  - 3) Conversion;
  - 4) Fraud; or
  - 5) Dishonesty.

**3. Deductible**

We will not pay for loss in any one "occurrence" until the amount of loss exceeds \$1,000. The limits of insurance will not be reduced by the application of the deductible amount.

We may pay any part or all of the deductible amount to effect settlement of any claim or "suit" and, upon notification of the action taken, you shall promptly reimburse us for such part of the deductible amount as has been paid by us.

**EXPANDED COVERAGE FOR TENANT'S PROPERTY AND PREMISES RENTED TO YOU**

The first paragraph after subparagraph (6) in Exclusion j., Damage to Property is amended to read as follows:

Paragraphs (1), (3) and (4) of this exclusion do not apply to "property damage" (other than damage by fire) to premises, including the contents of such premises, rented to you. A separate limit of insurance applies to Damage To Premises Rented To You as described in Section III – Limits Of Insurance.

**SECTION I - COVERAGES, SUPPLEMENTARY PAYMENTS – COVERAGE A and B is amended as follows:**

All references to SUPPLEMENTARY PAYMENTS – COVERAGES A and B are amended to SUPPLEMENTARY PAYMENTS – COVERAGES A, B, D, E, G, and H.

**1. Cost of Bail Bonds**

Paragraph 1.b. is replaced with the following:

- b. Up to \$2,500 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

**2. Loss of Earnings**

Paragraph 1.d. is replaced with the following:

- d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or “suit”, including actual loss of earnings up to \$500 a day because of time off from work.

**SECTION II – WHO IS AN INSURED is amended as follows:**

**1. Incidental Malpractice**

Paragraph 2.a.(1)(d) is replaced with the following:

- (d) Arising out of his or her providing or failing to provide professional health care services. However, this exclusion does not apply to a nurse, emergency medical technician or paramedic employed by you to provide medical services, unless:
  - (i) You are engaged in the occupation or business of providing or offering medical, surgical, dental, x-ray or nursing services, treatment, advice or instruction; or
  - (ii) The “employee” has another insurance that would also cover claims arising under this provision, whether the other insurance is primary, excess, contingent or on any other basis.

**2. Broadened Who Is An Insured**

The following are added to Paragraph 2.:

**Subsidiaries**

e. Your subsidiaries if:

- (1) They are legally incorporated entities; and
- (2) You own more than 50% of the voting stock in such subsidiaries as of the effective date of this policy. If such subsidiaries are not shown in the Declarations, you must report them to us within 180 days of the inception of your original policy.

**Additional Insureds**

- f. Any person or organization described in paragraphs g. through k. below whom you are required to add as an additional insured on this policy under a written contract or agreement in effect during the term of this policy, provided the written contract or agreement was executed prior to the “bodily injury”, “property damage” or “personal and advertising injury” for which the additional insured seeks coverage.

However, the insurance afforded to such additional insured(s):

- (1) Only applies to the extent permitted by law;
- (2) Will not be broader than that which you are required by the contract or agreement to provide for such additional insured;
- (3) Will not be broader than that which is afforded to you under this policy;
- (4) Is subject to the conditions described in paragraphs g. through k. below; and
- (5) Nothing herein shall extend the term of this policy.

g. Owner, Lessor or Manager of Premises

If the additional insured is an owner, lessor or manager of premises, such person or organization shall be covered only with respect to liability arising out of the ownership, maintenance or use of that part of any premises leased to you and subject to the following additional exclusions:

- (1) Any "occurrence" that takes place after you cease to occupy those premises; or
- (2) Structural alterations, new construction or demolition operations performed by or on behalf of such person or organization.

h. State or Governmental Agency or Subdivision or Political Subdivision – Permits or Authorizations

If the additional insured is the state or any political subdivision, the state or political subdivision shall be covered only with respect to operations performed by you or on your behalf for which the state or political subdivision has issued a permit or authorization. This insurance does not apply to:

- (1) "Bodily injury", "property damage", or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- (2) "Bodily injury" or "property damage" included within the "products-completed operations hazard".

i. Lessor of Leased Equipment

If the additional insured is a lessor of leased equipment, such lessor shall be covered only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s). With respect to the insurance afforded to these additional insureds, this insurance does not apply to any "occurrence" which takes place after the equipment lease expires.

j. Mortgagee, Assignee, or Receiver

If the additional Insured is a mortgagee, assignee, or receiver of premises, such mortgagee, assignee or receiver of premises is an additional insured only with respect to their liability as mortgagee, assignee, or receiver and arising out of the ownership, maintenance, or use of the premises by you. This insurance does not apply to structural alterations, new construction and demolition operations performed by or for that person or organization.

k. Vendor

If the additional insured is a vendor, such vendor is an additional insured only with respect to "bodily injury" or "property damage" caused by "your products" which are distributed or sold in the regular course of the vendor's business, subject to the following additional exclusions:

- (1) The insurance afforded to the vendor does not apply to:
  - (a) "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in absence of the contract or agreement.
  - (b) Any express warranty unauthorized by you;
  - (c) Any physical or chemical change in "your product" made intentionally by the vendor;
  - (d) Repackaging, unless unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;
  - (e) Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products;
  - (f) Demonstration, installation, servicing or repair operations, except such operations performed at the vendor's premises in connection with the sale of the product;

- (g) Products which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for the vendor; or
- (h) "Bodily injury" or "property damage" arising out of the sole negligence of the vendor for its own acts or omissions or those of its own acts or omissions or those of its employees or anyone else acting on its behalf. However, this exclusion does not apply to:
  - i. The exceptions contained in Subparagraphs d. or f.; or
  - ii. Such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products.

(2) This insurance does not apply to any insured person or organization, from whom you have acquired such products, or any ingredient, part or container, entering into, accompanying or containing such products.

### **3. Newly Formed or Acquired Organizations**

Paragraph 3. is amended as follows:

- a. Coverage under this provision is afforded until the end of the policy period.
- d. Coverage A does not apply to product recall expense arising out of any withdrawal or recall that occurred before you acquired or formed the organization.

### **SECTION III – LIMITS OF INSURANCE is amended as follows:**

#### **1. Paragraph 2. is replaced with the following:**

- 2. The General Aggregate Limit is the most we will pay for the sum of:
  - a. Medical expenses under Coverage C;
  - b. Damages under Coverage A, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard";
  - c. Damages under Coverage B;
  - d. Voluntary "property damage" payments under Coverage D;
  - e. Care, Custody or Control damages under Coverage E.; and
  - f. Lost Key Coverage under Coverage H.

#### **2. Paragraph 5. is replaced with the following:**

- 5. Subject to Paragraph 2. or 3. above, whichever applies, the Each Occurrence Limit is the most we will pay for the sum of:
  - a. Damages under Coverage A;
  - b. Medical expenses under Coverage C;
  - c. Voluntary "property damage" payments under Coverage D;
  - d. Care, Custody or Control damages under Coverage E;
  - e. Limited Product Withdrawal Expense under Coverage F;
  - f. Contractors Errors and Omissions under Coverage G.; and,
  - g. Lost Key Coverage under Coverage H.

because of all "bodily injury" and "property damage" arising out of any one "occurrence".

#### **3. Paragraph 6. is replaced with the following:**

- 6. Subject to Paragraph 5. above the Damage To Premises Rented To You Limit is the most we will pay under Coverage A for damages because of "property damage" to any one premises, while rented to you,

or in the case of damage by fire or explosion, while rented to you or temporarily occupied by you with permission of the owner.

The Damage to Premises Rented to You Limit is the higher of the Each Occurrence Limit shown in the Declarations or the amount shown in the Declarations as Damage To Premises Rented To You Limit.

**4. Paragraph 7. is replaced with the following:**

7. Subject to Paragraph 5. above, the higher of \$10,000 or the Medical Expense Limit shown in the Declarations is the most we will pay under Coverage C for all medical expenses because of "bodily injury" sustained by any one person.

**5. Paragraph 8. is added as follows:**

8. Subject to Paragraph 5. above, the most we will pay under Coverage D. Voluntary Property Damage for loss arising out of any one "occurrence" is \$1,500. The most we will pay in any one-policy period, regardless of the number of claims made or suits brought, is \$3,000.

**6. Paragraph 9. is added as follows:**

9. Subject to Paragraph 5. above, the most we will pay under Coverage E. Care, Custody or Control for "property damage" arising out of any one "occurrence" is \$1,000. The most we will pay in any one-policy period, regardless of the number of claims made or suits brought, is \$5,000.

**7. Paragraph 10. is added as follows:**

10. Subject to Paragraph 5. above, the most we will pay under Coverage F. Limited Product Withdrawal Expense for "product withdrawal expenses" in any one-policy period, regardless of the number of insureds, "product withdrawals" initiated or number of "your products" withdrawn is \$10,000.

**8. Paragraph 11. is added as follows:**

11. Subject to Paragraph 5. above, the most we will pay under Coverage G. Contractors Errors and Omissions for damage in any one-policy period, regardless of the number of insureds, claims or "suits" brought, or persons or organizations making claim or bringing "suits" is \$10,000.

For errors in contract or job specifications or in recommendations of products or materials to be used, this policy will not pay for additional costs of products and materials to be used that would not have been incurred had the correct recommendations or specifications been made.

**9. Paragraph 12. is added as follows:**

12. Subject to Paragraph 5. above, the most we will pay under Coverage H., Lost Key Coverage for damages arising out of any one occurrence is \$50,000.

**10. Paragraph 13. is added as follows:**

13. The General Aggregate Limit applies separately to:
  - a. Each of your projects away from premises owned by or rented to you; or
  - b. Each "location" owned by or rented to you.

"Location" as used in this paragraph means premises involving the same or connecting lots, or premises whose connection is interrupted only by a street, roadway, waterway or right-of-way of a railroad.

**11. Paragraph 14. is added as follows:**

14. With respect to the insurance afforded to any additional insured provided coverage under this endorsement:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- a. Required by the contract or agreement; or

- b. Available under the applicable Limits of Insurance shown in the Declarations;  
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

**SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS is amended as follows:**

**1. Subparagraph 2.a. of Duties In The Event Of Occurrence, Offense, Claim, or Suit is replaced with the following:**

- a. You must see to it that we are notified as soon as practicable of an “occurrence” or an offense which may result in a claim. This requirement applies only when the “occurrence” or offense is known to the following:

- (1) An individual who is the sole owner;
- (2) A partner, if you are a partnership or joint venture;
- (3) An “executive officer” or insurance manager, if you are a corporation;
- (4) A manager, if you are a limited liability company;
- (5) A person or organization having proper temporary custody of your property if you die;
- (6) The legal representative of you if you die; or
- (7) A person (other than an “employee”) or an organization while acting as your real estate manager.

To the extent possible, notice should include:

- (1) How, when and where the “occurrence” or offense took place;
- (2) The names and addresses of any injured persons and witnesses; and
- (3) The nature and location of any injury or damage arising out of the “occurrence” or offense.

**2. The following is added to Subparagraph 2.b. of Duties In The Event Of Occurrence, Offense, Claim, or Suit:**

The requirement in 2.b.applies only when the “occurrence” or offense is known to the following:

- (1) An individual who is the sole owner;
- (2) A partner or insurance manager, if you are a partnership or joint venture;
- (3) An “executive officer” or insurance manager, if you are a corporation;
- (4) A manager or insurance manager, if you are a limited liability company;
- (5) Your officials, trustees, board members or insurance manager, if you are a not-for-profit organization;
- (6) A person or organization having proper temporary custody of your property if you die;
- (7) The legal representative of you if you die; or
- (8) A person (other than an “employee”) or an organization while acting as your real estate manager.

**3. The following is added to paragraph 2. of Duties in the Event of Occurrence, Offense, Claim or Suit:**

- e. If you report an “occurrence” to your workers compensation carrier that develops into a liability claim for which coverage is provided by the Coverage Form, failure to report such an “occurrence” to us at the time of the “occurrence” shall not be deemed a violation of paragraphs a., b., and c. above. However, you shall give written notice of this “occurrence” to us as soon as you become aware that this “occurrence” may be a liability claim rather than a workers compensation claim.

**4. Paragraph 6. is replaced with the following:**

- 6. Representations

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- b. Those statements are based upon representations you made to us; and
- c. We have issued this policy in reliance upon your representations.

Any error or omission in the description of, or failure to completely describe or disclose any premises, operations or products intended to be covered by the Coverage Form will not invalidate or affect coverage for those premises, operations or products, provided such error or omission or failure to completely describe or disclose premises, operations or products was not intentional.

You must report such error or omission to us as soon as practicable after its discovery. However, this provision does not affect our right to collect additional premium charges or exercise our right of cancellation or nonrenewal.

**5. The following is added to paragraph 8. Transfer Of Rights Of Recovery Against Others To Us:**

However, we waive any right of recovery we may have because of payments we make for injury or damage arising out of your ongoing operations or "your work" included in the "products-completed operations hazard" under the following conditions:

- a) Only when you have agreed in writing to waive such rights of recovery in a contract or agreement;
- b) Only as to the person/entity as to whom you are required by the contract to waive rights of recovery; and
- c) Only if the contract or agreement is in effect during the term of this policy, and was executed by you prior to the loss.

**6. Paragraph 10. is added as follows:**

10. Liberalization

If we revise this Coverage Form to provide more coverage without additional premium charge, your policy will automatically provide the additional coverage as of the day the revision is effective in the applicable state(s).



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/14/2022

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 WorkComp Solutions, Inc. 5143 South Lakeland Drive, Suite 1 Lakeland, FL 33813  www.workcompsolutionsfl.com	CONTACT NAME:	Eglis Vinson	
	PHONE (A/C, No, Ext):	863-646-4642	FAX (A/C, No): 863-646-3521
	E-MAIL ADDRESS:	eglis@workcompsolutionsfl.com	
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Bridgefield Employers Insurance Company		10701
INSURED Caladesi Construction Co. 1390 Donegan Road Largo FL 33771	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

**COVERAGES**

CERTIFICATE NUMBER: 70229195

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
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	0830-31491	3/1/2022	3/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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)

30 day Notice of Cancellation Applies.

**CERTIFICATE HOLDER****CANCELLATION**

School Board of Pinellas County  
301 4th Street SW  
Largo FL 33770

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

Darrell J. Mills

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ACORD 25 (2016/03)

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Member of Great American Insurance Group

Managed by Summit, the people who know workers' comp®  
[www.summitholdings.com](http://www.summitholdings.com)

January 10, 2022

Donald Hinrichs, President  
Caladesi Construction Co.  
1390 Donegan Rd  
Largo, FL 33771-3007

RE: BEIC #830-31491

Dear Donald Hinrichs:

Thank you for choosing Bridgefield Employers Insurance Company as your workers' compensation insurance provider. Enclosed you will find your policy and account documents. Please review this information carefully, as some items may require action from you.

As managing general agent for Bridgefield Employers, Summit provides you with many benefits and services, including those listed below. For more information, visit our website at [www.summitholdings.com](http://www.summitholdings.com).

- **Back2work®**, Summit's return-to-work program, gives you the tools you need to help you get injured workers back on the job following work-related injuries. (On-site consultations from our Back2work advisors are available upon request.)
- **Access to medical provider network**, which consist of doctors, specialists and medical facilities and ancillary service providers that are focused on getting injured workers back on their feet—and back on the job.
- **Online Business Center**, where you can view policy details, check claims activity, print and download loss runs, make payments and more.
- **Online premium payment**, available on our Online Business Center via a secure Bank of America website.
- **Tailored loss-prevention services**, consisting of safety consultations, drug-free workplace and workplace safety program assistance, and in-person or online safety education and training materials.
- **Injury reporting**, available 24 hours a day, 7 days a week by calling 1-800-762-7811, faxing your report to 863-667-1871 or visiting our website. (Login required to report an injury.)
- **Specialized in-house claims services**, including on-site investigations, special reports and fraud investigation, all tailored to your needs.
- **Medical cost control**, including cost containment and case-management services.

Again, thank you for choosing Bridgefield Employers as your workers' compensation insurance provider. If you have questions about your policy or any of the services we provide, please contact your independent insurance agent or call our Customer Service department at 1-800-282-7648 or 863-665-6060.

Sincerely,

A handwritten signature in black ink that reads "Carol Sipe".

Carol Sipe, President & CEO  
Summit Consulting LLC  
Managing General Agent

**Please review the back page of this letter for notices specific to your policy.**

cc: WorkComp Solutions, Inc. - 6164

**Posting Notice** - A new label for your Florida "Workers' Comp Works For You" poster is enclosed. This label includes the effective and expiration dates for your renewal policy. Please adhere this new label over the old label in the bottom right hand corner of your poster at each of your business locations.

**Your Premium Payments** - Your policy is enrolled in our Controlled Audit Program (WebCAP). This means you are responsible for calculating your payments each month using our website, *summitholdings.com*. For more information about how to submit your monthly report and premium payment, please see the enclosed WebCAP flyer.

**Employer Information** - It's important that you report any changes to your employer information within 30 days of the change. These changes may include, but are not limited to, the name of the corporation, partnership, or sole proprietorship including the dba name; federal employer identification number (FEIN); addresses both mailing and physical; names and titles of corporate officers, partners and owners; ownership; and the addition or deletion of a location and/or entity.

**Quarterly Self-Audit** - In accordance with FLA. STAT. ANN. section 440.381(4), you must submit to us a completed quarterly self-audit report signed by an officer or principal of your business, along with a copy of your corresponding quarterly UCT-6. This documentation is due in our office 45 days after the end of each quarter. To assist you in this process, a copy of the quarterly self-audit form is available on Summit's website, *summitholdings.com*. Simply click on **Forms**, then **Underwriting Forms and Applications**. You'll find the form and it's instructions under the "Florida" heading. The filing of this report will not necessarily result in a revision of your monthly premium installments. If you feel a revision is in order, please attach a letter outlining the annual estimated payrolls by work code.

**Premium Credits** - A premium credit of 5% is available to employers with an approved\* drug-free workplace program, and a premium credit of 2% is available to employers with an approved workplace safety program. For more information on how to implement and receive approval for a drug-free workplace or workplace safety program, please call 1-800-282-7648 and ask for our Loss Prevention department (\*Drug-free workplace premium credit approval based on qualifications listed in Florida Statute 440.102; Workplace safety program credit approval based on qualifications listed in Florida Statute 440.1025). Workplace Safety and Drug-Free Workplace premium credit applications must be completed and filed annually with Bridgefield Employers to continue these credits.)

**CCPAP application** - The Contracting Classification Premium Adjustment Program provides a premium credit to qualifying policies with one or more contracting classifications. To find out if your business qualifies, complete the enclosed application and mail it to the National Council on Compensation Insurance at the address provided on the form.



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 A Stock Insurer • P.O. Box 988 • Lakeland, FL 33802-0988

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY INFORMATION PAGE**

NCCI Carrier Code Number 31267

Policy number 830-31491

**Item 1. Insured**

RISK I.D. 094676711

Name Caladesi Construction Co.  
 and  
 Mailing Address 1390 Donegan Rd  
Largo, FL 33771-3007

Individual  Corporation  
 Partnership  Subchapter "S"  
 Other

Other Workplaces not shown above:

FEIN 52-0667823

SEE EXTENSION OF INFORMATION PAGE ITEM 1

**Item 2. Policy Period**

The policy period is from 03/01/22 12:01 a.m. to 03/01/23 12:01 a.m. at the insured's mailing address.

**Item 3. Coverage**

- A. Workers Compensation Insurance; Part One of the policy applies to the Workers Compensation Law of the states listed here:  
Florida
- B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in item 3.A. The limits of our liability under Part Two are:
 

Bodily Injury by Accident	\$ 1,000,000	each accident
Bodily Injury by Disease	\$ 1,000,000	each employee
Bodily Injury by Disease	\$ 1,000,000	policy limit
- C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:  
Alabama Kentucky Georgia Mississippi North Carolina Texas Virginia Oklahoma Tennessee South Carolina Indiana Arkansas Louisiana
- D. This policy includes these endorsements and schedules:  
SEE EXTENSION OF INFORMATION PAGE ITEM 3.D

**Item 4. Premium**

The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.

Classifications	Code No.	Premium Basis: Total Estimated Annual Renumeration	Rate per \$100 of Renumeration	Estimated Annual Premium
SEE EXTENSION OF INFORMATION PAGE ITEM 4 - PREMIUM				

Total Estimated Annual Premium \$ 29,895.66

Expense Constant \$ 160.00

Minimum Premium \$ 1,200.00

Total Cost \$ 30,055.66

Countersigned by 

Date 01/06/22

6164 WorkComp Solutions, Inc.  
 cmb Date Prepared: 01/06/22

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY**  
**EXTENSION OF INFORMATION PAGE - ITEM 1 - SCHEDULE OF INSURED AND OTHER WORKPLACES**

**CARRIER:** Bridgefield Employers Insurance Company  
P.O. Box 988  
Lakeland, FL 33802-0988  
(863)665-6060

**AGENCY:** WorkComp Solutions, Inc. - 6164  
5143 S Lakeland Dr Ste 1  
Lakeland, FL 33813  
(863)646-4642

**INSURED:** Caladesi Construction Co.  
**DBA:**  
1390 Donegan Rd  
Largo, FL 33771-3007

**POLICY NUMBER:** 830 - 31491  
**POLICY PERIOD:** 03/01/22 - 03/01/23

Insured and Other Workplaces

---

Caladesi Construction Co.  
1390 Donegan Rd  
Largo, FL 33771-3007  
FEDERAL ID# 52-0667823  
CORPORATION

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY**  
**EXTENSION OF INFORMATION PAGE - ITEM 3.D - SCHEDULE OF FORMS AND ENDORSEMENTS**

**CARRIER:** Bridgefield Employers Insurance Company  
P.O. Box 988  
Lakeland, FL 33802-0988  
(863)665-6060

**AGENCY:** WorkComp Solutions, Inc. - 6164  
5143 S Lakeland Dr Ste 1  
Lakeland, FL 33813  
(863)646-4642

**INSURED:** Caladesi Construction Co.  
**DBA:**  
1390 Donegan Rd  
Largo, FL 33771-3007

**POLICY NUMBER:** 830 - 31491  
**POLICY PERIOD:** 03/01/22 - 03/01/23

Schedule of Endorsements

It is hereby understood and agreed that the following forms and endorsements are attached to and are a part of this policy.

<u>Form Number:</u>	<u>Edition:</u>	<u>Description:</u>
WC 00 03 02	04-84	Designated Workplaces Exclusion Endt
WC 00 03 08	04-84	Partners, Officers and Others Exclusion Endt
WC 00 03 10	04-84	Sole Proprietors, Partners, Officers, Others Cover
WC 00 04 04	04-84	Pending Rate Change Endt
WC 00 04 06 A	08-95	Premium Discount Endt
WC 00 04 14 A	01-19	90-Day Notification of Change in Ownership Endt
WC 00 04 19	01-01	Premium Due Date Endt
WC 09 04 01	06-87	FL Contracting Classification Premium Adjustment E
WC 09 04 03 C	01-21	FL Terrorism Risk Ins. Program Reauthorization Act
WC 09 04 07	07-13	FL Non-Cooperation with Premium Audit Endt
WC 09 06 05	07-90	FL Benefits Deductible Endt
WC 09 06 06	10-98	FL Employment and Wage Information Release Endt
WC 99 03 03	11-11	Employers Liability Coverage Endt
WC 99 06 01	05-06	FL Legal Action/Collection Endt
WC 99 06 06	10-10	Florida Participating Endt

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY**

**EXTENSION OF INFORMATION PAGE - ITEM 4 PREMIUM**

**CARRIER:** Bridgefield Employers Insurance Company  
 P.O. Box 988  
 Lakeland, FL 33802-0988  
 (863)665-6060

**AGENCY:** WorkComp Solutions, Inc. - 6164  
 5143 S Lakeland Dr Ste 1  
 Lakeland, FL 33813  
 (863)646-4642

**INSURED:** Caladesi Construction Co.  
**DBA:**  
 1390 Donegan Rd  
 Largo, FL 33771

**POLICY NUMBER:** 830 - 31491 0000  
**POLICY PERIOD:** 03/01/22 - 03/01/23 12:01 AM

**ESTIMATED PREMIUM**

<b>CODE NO.</b>	<b>CLASSIFICATIONS</b>	<b>PREMIUM BASIS: Total Estimated Annual Remuneration</b>	<b>RATE PER \$100 OF REMUNERATION</b>	<b>ESTIMATED ANNUAL PREMIUM</b>
	FL-Florida			
0042	LANDSCAPE GARDENING & DRIVERS	12,000.00	6.69	802.80
5020	CEILING INSTALLATION SUSPENDED GRID TYPE	300.00	7.65	22.95
5022	MASONRY NOC	1,700.00	8.68	147.56
5059	IRON OR STEEL ERECT FRAME NOT OVR TWO STORY	2,000.00	18.29	365.80
5213	CONCRETE CONSTRUCTION NOC	100.00	8.20	8.20
5221	CONCRETE WORK, FLOOR-DRIVES-YARDS-SIDEWALK & D	41,000.00	5.54	2,271.40
5348	CERAMIC TILE, INDOOR STONE-MARBLE-MOSAIC WORK	600.00	3.89	23.34
5403	CARPENTRY NOC	252,000.00	6.17	15,548.40
5474	PAINTING OR PAPERHANGING NOC & SHOP OPS & D	16,500.00	7.14	1,178.10
5506	STREET OR ROAD CONSTR PAVING OR REPAVING & D	900.00	5.07	45.63
5535	SHEET METAL WORK - INSTALLATION & DRIVERS	25,000.00	7.62	1,905.00
5606	CONTRACTOR - CONST EXECUTIVE, SUPERINTENDENT	77,000.00	1.14	877.80
6217	EXCAVATION & DRIVERS	375,000.00	5.21	19,537.50
6306	SEWER CONSTRUCTION-ALL OPERATIONS & DRIVERS	100.00	5.54	5.54
8227	CONSTRUCTION OR ERECTION PERMANENT YARD	100.00	5.16	5.16
8742	SALESPERSONS OR COLLECTORS-OUTSIDE	559,000.00	.32	1,788.80
8810	CLERICAL OFFICE EMPLOYEES NOC	162,127.00	.16	259.40
	continued...			

**Minimum Premium:** \$1,200.00

**TOTAL COST IS SHOWN ON THE LAST  
PAGE OF THIS EXTENSION**

cmb

**Date Prepared:** 01/06/22  
 WC 99 00 04

**Time Prepared:** 02:32 PM

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY  
EXTENSION OF INFORMATION PAGE - ITEM 4 PREMIUM**

**CARRIER:** Bridgefield Employers Insurance Company  
P.O. Box 988  
Lakeland, FL 33802-0988  
(863)665-6060

**AGENCY:** WorkComp Solutions, Inc. - 6164  
5143 S Lakeland Dr Ste 1  
Lakeland, FL 33813  
(863)646-4642

**INSURED:** Caladesi Construction Co.  
**DBA:**  
1390 Donegan Rd  
Largo, FL 33771

**POLICY NUMBER:** 830 - 31491 0000  
**POLICY PERIOD:** 03/01/22 - 03/01/23 12:01 AM

**ESTIMATED PREMIUM**

CODE NO.	CLASSIFICATIONS FL-Florida	PREMIUM BASIS: Total Estimated Annual Remuneration	RATE PER \$100 OF REMUNERATION	ESTIMATED ANNUAL PREMIUM
8871	CLERICAL TELECOMMUTER EMPLOYEES	7,000.00	.08	5.60
	\$2500 deductible credit - No premium credit applies			.00
	Total Manual Premium			44,798.98
	Increased Employers Liability 1,000,000/1,000,000/1,000,000			627.19
				<u>45,426.17</u>
	Workplace Safety Credit-2%			-908.52
	Drug Free Workplace Credit-5%			-2,225.88
	Experience Mod			.75
	Standard Premium			31,718.83
	Discount			<u>-1,976.41</u>
				29,742.42
	Expense Constant			160.00
	Terrorism			153.24
	<b>Total Cost</b>			<b>30,055.66</b>

Minimum Premium: \$1,200.00

cmb

Date Prepared: 01/06/22  
WC 99 00 04

**TOTAL COST IS SHOWN ON THE LAST  
PAGE OF THIS EXTENSION**

Time Prepared: 02:32 PM

**WORKERS COMPENSATION  
AND EMPLOYERS LIABILITY  
INSURANCE POLICY**

PLEASE READ THE POLICY CAREFULLY



A Member of Great American Insurance Group

PO Box 988 • Lakeland, FL 33802-0988



## WORKERS COMPENSATION EXPERIENCE RATING

Risk Name: CALADESI CONSTRUCTION CO

Risk ID: 094676711

Rating Effective Date: 03/01/2022

Production Date: 11/15/2021

State: FLORIDA

State	Wt	Exp Excess Losses	Expected Losses	Exp Prim Losses	Act Exc Losses	Ballast	Act Inc Losses	Act Prim Losses
FL	.10	43,305	62,634	19,329	0	33,900	0	0
(A) Wt	(B)	(C) Exp Excess Losses (D - E)	(D) Expected Losses	(E) Exp Prim Losses	(F) Act Exc Losses (H - I)	(G) Ballast	(H) Act Inc Losses	(I) Act Prim Losses
.10		43,305	62,634	19,329	0	33,900	0	0

	Primary Losses	Stabilizing Value	Ratable Excess	Totals	
Actual	(I) 0	$C * (1 - A) + G$ 72,875	(A) * (F) 0	(J) 72,875	
Expected	(E) 19,329	$C * (1 - A) + G$ 72,875	(A) * (C) 4,331	(K) 96,535	
	ARAP	FLARAP	SARAP	MAARAP	Exp Mod
Factors		1.00			(J) / (K) .75

**REVISED RATING**

ONE OR MORE CLAIM AMOUNTS HAVE BEEN REDUCED DUE TO EMPLOYER REIMBURSEMENTS AS PART OF A NET DEDUCTIBLE PROGRAM.

RATING REVISED TO REFLECT APPROVED RATING VALUES

**Carrier:** 31267-000    **Policy:** 83031491

**Eff-Date:** 03-01-2021    **Exp-Date:** 03-01-2022

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## WORKERS COMPENSATION EXPERIENCE RATING

Risk Name: CALADESI CONSTRUCTION CO

Risk ID: 094676711

Rating Effective Date: 03/01/2022

Production Date: 11/15/2021

State: FLORIDA

09-FLORIDA

Firm ID:

Firm Name: CALADESI CONSTRUCTION CO

Carrier: 31267

Policy No. 83031491

Eff Date: 03/01/2018

Exp Date: 03/01/2019

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
0042	3.15	.38	8,004	252	96					
0930	WAIVER OF SUBROGAT			0	0					
5020	3.09	.32	808	25	8					
5022	3.32	.29	4,470	148	43					
5059	6.99	.29	18,274	1,277	370					
5221	2.24	.32	124,936	2,799	896					
5348	1.66	.35	1,400	23	8					
5403	2.49	.32	288,702	7,189	2,300					
5474	2.73	.29	14,920	407	118					
5506	2.05	.32	11,261	231	74					
5535	2.92	.29	12,539	366	106					
5606	.44	.29	263,836	1,161	337					
6217	1.99	.29	327,670	6,521	1,891					
8227	2.09	.32	113,943	2,381	762					
8742	.14	.35	547,442	766	268					
8810	.08	.40	249,302	199	80					
9765	WORKPLACE SAFETY (			-475	-147					
9807	EMPLOYERS LIABILITY			0	0					
9841	DRUG-FREE WORKPLAC			-1,163	-360					
<b>Policy Total:</b>				<b>1,987,507</b>	<b>Subject Premium:</b>			<b>101,455</b>	<b>Total Act Inc Losses:</b>	<b>0</b>

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\* Total by Policy Year of all cases \$2000 or less.

D Disease Loss

X Ex-Medical Coverage

U USL&HW

C Catastrophic Loss

E Employers Liability Loss

# Limited Loss



## WORKERS COMPENSATION EXPERIENCE RATING

Risk Name: CALADESI CONSTRUCTION CO

Risk ID: 094676711

Rating Effective Date: 03/01/2022

Production Date: 11/15/2021

State: FLORIDA

09-FLORIDA

Firm ID:

Firm Name: CALADESI CONSTRUCTION CO

Carrier: 31267

Policy No. 83031491

Eff Date: 03/01/2019

Exp Date: 03/01/2020

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
0042	3.15	.38	5,160	163	62					
0930	WAIVER OF SUBROGAT			0	0					
5020	3.09	.32	1,357	42	13					
5022	3.32	.29	4,852	161	47					
5059	6.99	.29	9,704	678	197					
5213	3.13	.29	128	4	1					
5221	2.24	.32	98,314	2,202	705					
5348	1.66	.35	1,373	23	8					
5403	2.49	.32	371,769	9,257	2,962					
5474	2.73	.29	29,102	794	230					
5506	2.05	.32	3,627	74	24					
5535	2.92	.29	55,015	1,606	466					
5606	.44	.29	232,453	1,023	297					
6217	1.99	.29	378,468	7,532	2,184					
8227	2.09	.32	64,424	1,346	431					
8742	.14	.35	602,780	844	295					
8810	.08	.40	158,637	127	51					
9765	WORKPLACE SAFETY (			-517	-159					
9807	EMPLOYERS LIABILITY			0	0					
9841	DRUG-FREE WORKPLAC			-1,268	-391					
<b>Policy Total:</b>				<b>2,017,163</b>	<b>Subject Premium:</b>					<b>90,911</b>
									<b>Total Act Inc Losses:</b>	<b>0</b>

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\* Total by Policy Year of all cases \$2000 or less.

D Disease Loss

X Ex-Medical Coverage

U USL&HW

C Catastrophic Loss

E Employers Liability Loss

# Limited Loss



# WORKERS COMPENSATION EXPERIENCE RATING

Risk Name: CALADESI CONSTRUCTION CO

Risk ID: 094676711

Rating Effective Date: 03/01/2022

Production Date: 11/15/2021

State: FLORIDA

09-FLORIDA

Firm ID:

Firm Name: CALADESI CONSTRUCTION CO

Carrier: 31267

Policy No. 83031491

Eff Date: 03/01/2020

Exp Date: 03/01/2021

Code	ELR	D-Ratio	Payroll	Expected Losses	Exp Prim Losses	Claim Data	IJ	OF	Act Inc Losses	Act Prim Losses
0042	3.15	.38	11,669	368	140					
0930	WAIVER OF SUBROGAT			0	0					
5020	3.09	.32	251	8	3					
5022	3.32	.29	1,710	57	17					
5059	6.99	.29	1,981	138	40					
5221	2.24	.32	41,046	919	294					
5348	1.66	.35	840	14	5					
5403	2.49	.32	251,698	6,267	2,005					
5474	2.73	.29	16,564	452	131					
5506	2.05	.32	896	18	6					
5535	2.92	.29	24,392	712	206					
5606	.44	.29	76,817	338	98					
6217	1.99	.29	374,771	7,458	2,163					
8742	.14	.35	551,458	772	270					
8810	.08	.40	162,127	130	52					
8871	.04	.40	7,089	3	1					
9765	WORKPLACE SAFETY (			-353	-109					
9812	EMPLOYERS LIABILITY			0	0					
9841	DRUG-FREE WORKPLAC			-865	-266					
<b>Policy Total:</b>			<b>1,523,309</b>	<b>Subject Premium:</b>	<b>55,216</b>	<b>Total Act Inc Losses:</b>		<b>0</b>		

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\* Total by Policy Year of all cases \$2000 or less.

D Disease Loss

X Ex-Medical Coverage

U USL&HW

C Catastrophic Loss

E Employers Liability Loss

# Limited Loss



**Workers' Compensation Detail Loss Run as of September 15, 2022**

Policy Year: 2021

**Policy Number:** 0830-31491  
**Insured:** Caladesi Construction Co.  
**Policy Period:** 03/01/2021-03/01/2022

**Carrier:** Bridgefield Employers Insurance Company  
**Deductible?** Yes

**Policy Summary Totals**

				Indemnity	Medical	Other	Total	
Open Claims:	1	<b>Deductible</b>		Paid This Month	\$ 0.00	\$ 4,889.13	\$ 0.00	\$ 4,889.13
Closed Claims:	2	Billed This Month	\$ 332.58	Paid to Date	\$ 14,611.46	\$ 14,390.65	\$ 6,390.25	\$ 35,392.36
Total Lost Time:	1	Billed to Date	\$ 4,927.67	Reserves	\$ 1,925.02	\$ 14,176.35	\$ 4,549.75	\$ 20,651.12
Total Medical Only:	2	Remaining	\$ 2,572.33	Total Incurred	\$ 16,536.48	\$ 28,567.00	\$ 10,940.00	\$ 56,043.48

**Claims For Policy: 0830-31491-0**

<b>Injured Worker: SAENZ, JAIME A</b>		Date of Injury: 11/01/2021	Adjustor: JACKIE HANNIGAN	Claim Status: Open
Claim Number: 258704	Hire Date: 08/17/2020	Reported to Carrier: 11/03/2021	Claim Type: TEMPORARY TOTAL	Closed Date: N/A
Job Title: Carpenter	Work Code: 5403	Returned to Work: 11/03/2021		
Work Location: 1390 Donegan Rd Largo, FL 33771		Cause of Injury: Lifting		
Description:		Body Part:		
IW was standing on a scaffold assisting holding a 4X12 ridge beam and preparing for it to be placed at the front of the house which caused a left shoulder strain.		Nature of Injury: Strain-Muscle Trauma		
			<b>Indemnity</b>	<b>Medical</b>
			<b>Other</b>	<b>Total</b>
Deductible	Comp/Medical	Paid This Month	\$ 0.00	\$ 4,889.13
Billed to Date	\$ 2,500.00	Paid to Date	\$ 14,611.46	\$ 11,962.98
Billed This Month	\$ 0.00	Reserves	\$ 1,925.02	\$ 14,176.35
Remaining	\$ 0.00	Total Incurred	\$ 16,536.48	\$ 26,139.33
			\$ 0.00	\$ 6,390.25
			\$ 20,651.12	\$ 32,964.69
			\$ 10,940.00	\$ 53,615.81

<b>Injured Worker: BAXCAJAY, PABLO J</b>		Date of Injury: 10/28/2021	Adjustor: CARMEN SERRANO	Claim Status: Closed
Claim Number: 258701	Hire Date: 04/06/2021	Reported to Carrier: 11/03/2021	Claim Type: MEDICAL ONLY	Closed Date: 08/23/2022
Job Title: Site Laborer	Work Code: 5022	Returned to Work: 11/18/2021		
Work Location: 1390 Donegan Rd Largo, FL 33771		Cause of Injury: Twisting		
Description:		Body Part: Ankle-Tarsals		
IW was crawling through a window, IW went to step down onto the ground and stepped on a brick which caused the IW to roll the ankle.		Nature of Injury: Sprain-Joint Trauma/Injured Ligaments		
			<b>Indemnity</b>	<b>Medical</b>
			<b>Other</b>	<b>Total</b>
Deductible	Comp/Medical	Paid This Month	\$ 0.00	\$ 0.00
Billed to Date	\$ 2,041.45	Paid to Date	\$ 0.00	\$ 2,041.45
Billed This Month	\$ 332.58	Reserves	\$ 0.00	\$ 0.00
Remaining	\$ 458.55	Total Incurred	\$ 0.00	\$ 2,041.45
			\$ 0.00	\$ 0.00
			\$ 0.00	\$ 0.00
			\$ 0.00	\$ 0.00

<b>Injured Worker: SAENZ, JAIME A</b>		Date of Injury: 08/09/2021	Adjustor: CARMEN SERRANO	Claim Status: Closed
Claim Number: 252455	Hire Date: 08/17/2020	Reported to Carrier: 08/16/2021	Claim Type: MEDICAL ONLY	Closed Date: 09/29/2021
Job Title: Carpenter	Work Code: 5403	Returned to Work: 08/16/2021		
Work Location: 1390 Donegan Rd Largo, FL 33771		Cause of Injury: From Ladder or Scaffolding		
Description:		Body Part: Shoulder(s)-Armpit, Rotator Cuff		
While climbing down ladder, IW slipped on adhesive, causing the IW to injury left shoulder and right foot.		Nature of Injury: Strain-Muscle Trauma		
			<b>Indemnity</b>	<b>Medical</b>
			<b>Other</b>	<b>Total</b>
Deductible	Comp/Medical	Paid This Month	\$ 0.00	\$ 0.00
Billed to Date	\$ 386.22	Paid to Date	\$ 0.00	\$ 386.22
Billed This Month	\$ 0.00	Reserves	\$ 0.00	\$ 0.00
Remaining	\$ 2,113.78	Total Incurred	\$ 0.00	\$ 386.22
			\$ 0.00	\$ 0.00
			\$ 0.00	\$ 0.00
			\$ 0.00	\$ 0.00



**Workers' Compensation Detail Loss Run as of September 15, 2022**

Policy Year: 2020

**Policy Number:** 0830-31491  
**Insured:** Caladesi Construction Co.  
**Policy Period:** 03/01/2020-03/01/2021

**Carrier:** Bridgefield Employers Insurance Company  
**Deductible?** Yes

**Policy Summary Totals**

Policy Summary Totals				Indemnity	Medical	Other	Total	
Open Claims:	0	Deductible		Paid This Month	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Closed Claims:	1	Billed This Month	\$ 0.00	Paid to Date	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Total Lost Time:	0	Billed to Date	\$ 0.00	Reserves	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Total Medical Only:	1	Remaining	\$ 2,500.00	Total Incurred	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

**Claims For Policy: 0830-31491-0**

<b>Injured Worker: RODRIGUEZ, JOSE</b>	Date of Injury: 05/29/2020	Adjustor: MALISSA DOBSON	Claim Status: Closed
Claim Number: 218359	Reported to Carrier: 06/08/2020	Claim Type: MEDICAL ONLY	Closed Date: 07/22/2020
Job Title: Driver/Mechanic	Hire Date: 04/01/2014	Returned to Work: 05/30/2020	
Work Location: 1390 Donegan Rd	Work Code: 6217	Cause of Injury: Other-Miscellaneous, NOC	
Largo, FL 33771		Body Part: Body System and Multiple Body Systems	
		Nature of Injury: All Other Specific Injuries, NOC	

**Description:**

While the IW was dropping off paperwork in the office. He was asked how he was feeling and his temperature taken and it was high. IW was diagnosed with heat stroke.

			Indemnity	Medical	Other	Total
Deductible	Comp/Medical	Paid This Month	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Billed to Date	\$ 0.00	Paid to Date	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Billed This Month	\$ 0.00	Reserves	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Remaining	\$ 2,500.00	Total Incurred	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC - A

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	.	3	4	5	0
---	---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	3	1	1	5	0
---	---	---	---	---	---	---

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC-A

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.325</u>
Line 2.	Multiply Line 1 by .50	<u>.6625</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.345</u>
Line 4.	Multiply Line 3 by .20	<u>.269</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.325</u>
Line 6.	Multiply Line 5 by .10	<u>.1325</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.345</u>
Line 8.	Multiply Line 7 by .10	<u>.1345</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.3115</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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### BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC - B

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

- 1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

- 2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

(Specify to four decimal places)

- 3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

- 4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. **Non-Pre-Priced Adjustment Factor:** To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	3	1	1	5	0
---	---	---	---	---	---	---

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - B

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.325</u>
Line 2.	Multiply Line 1 by .50	<u>.6625</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.345</u>
Line 4.	Multiply Line 3 by .20	<u>.269</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.325</u>
Line 6.	Multiply Line 5 by .10	<u>.1325</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.345</u>
Line 8.	Multiply Line 7 by .10	<u>.1345</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.3115</u>

**(Bid Form 2 Continued on The Next Page)**

### Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

**(The rest of this page is intentionally left blank)**

### BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC -C

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1.	.	3	4	5	0
----	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. **Non-Pre-Priced Adjustment Factor:** To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	3	1	1	5	0
---	---	---	---	---	---	---

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - C

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.325</u>
Line 2.	Multiply Line 1 by .50	<u>.6625</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.345</u>
Line 4.	Multiply Line 3 by .20	<u>.269</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.325</u>
Line 6.	Multiply Line 5 by .10	<u>.1325</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.345</u>
Line 8.	Multiply Line 7 by .10	<u>.1345</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.3115</u>

**(Bid Form 2 Continued on The Next Page)**

### Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC - D

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	3	2	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	3	4	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	3	1	1	5	0
---	---	---	---	---	---	---

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - 0

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.325</u>
Line 2.	Multiply Line 1 by .50	<u>.6625</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.345</u>
Line 4.	Multiply Line 3 by .20	<u>.269</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.325</u>
Line 6.	Multiply Line 5 by .10	<u>.1325</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.345</u>
Line 8.	Multiply Line 7 by .10	<u>.1345</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.3115</u>

**(Bid Form 2 Continued on The Next Page)**

### Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC-E

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	2	6	8	5	
---	---	---	---	---	---	--

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC-E

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNGCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.275</u>
Line 2.	Multiply Line 1 by .50	<u>.6375</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.295</u>
Line 4.	Multiply Line 3 by .20	<u>.259</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.275</u>
Line 6.	Multiply Line 5 by .10	<u>.1275</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.295</u>
Line 8.	Multiply Line 7 by .10	<u>.1295</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.2685</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC-F

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	2	6	8	5	
---	---	---	---	---	---	--

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - F

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNGCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.275</u>
Line 2.	Multiply Line 1 by .50	<u>.6375</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.295</u>
Line 4.	Multiply Line 3 by .20	<u>.259</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.275</u>
Line 6.	Multiply Line 5 by .10	<u>.1275</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.295</u>
Line 8.	Multiply Line 7 by .10	<u>.1295</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.2685</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC-6

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	2	6	8	5	
---	---	---	---	---	---	--

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - G

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNGCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.275</u>
Line 2.	Multiply Line 1 by .50	<u>.6375</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.295</u>
Line 4.	Multiply Line 3 by .20	<u>.259</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.275</u>
Line 6.	Multiply Line 5 by .10	<u>.1275</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.295</u>
Line 8.	Multiply Line 7 by .10	<u>.1295</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.2685</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

**(The rest of this page is intentionally left blank)**

## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC-H

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	2	6	8	5	
---	---	---	---	---	---	--

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC -H

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNGCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.275</u>
Line 2.	Multiply Line 1 by .50	<u>.6375</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.295</u>
Line 4.	Multiply Line 3 by .20	<u>.259</u>
Line 5.	Adjustment Factor for Normal Working Hours for Federally Funded Projects Line (3.A)	<u>1.275</u>
Line 6.	Multiply Line 5 by .10	<u>.1275</u>
Line 7.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects Line (4.A)	<u>1.295</u>
Line 8.	Multiply Line 7 by .10	<u>.1295</u>
Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.2685</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

*Note To Bidder: The weights in lines 2, 4, 6, 8 and 10 above are for the purpose of calculating a Combined Adjustment Factor only. No assurances are made by Pinellas County Schools that Work will be ordered under the Agreement in a distribution consistent with the weighted percentages above. The Combined Adjustment Factor is only used for the purpose of determining the lowest Bidder.*

*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC - T

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

The Contractor shall perform the Tasks and pay all Administrative Fees required by each individual Purchase Order issued pursuant to this using the following Adjustment Factors:

1. Normal Working Hours for Owner Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

4. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
Administrative Fees:

1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

1	.	2	6	8	5	
---	---	---	---	---	---	--

(See Bid Form 2 for calculation procedure)

NOTICE - The attention of Bidders is particularly called to the fact that, unless the Bid is made in strict conformity with the directions given, it may be considered non-responsive and may be rejected. The Bidder must fill in all boxes and blanks.

Before submitting this Bid, the Bidder is directed to the Construction Task Catalog to review the explanation of the costs included in the Unit Prices and in the Adjustment Factors. Except for a Non Pre-priced Task, the only compensation to be paid to a Contractor will be the total of the Unit Prices multiplied by the quantities multiplied by the Adjustment Factor. No additional payments of any kind whatsoever will be made. All costs not included in the Unit Prices must be part of the Adjustment Factors.

**The Other Than Normal Working Hours Adjustment Factors must be equal to or higher than the Normal Working Hours Adjustment Factors.**

PINELLAS COUNTY SCHOOLS RESERVES THE RIGHT TO REVISE ALL ARITHMETIC ERRORS IN CALCULATIONS FOR CORRECTNESS.

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## BID FORM 2: CALCULATION OF THE COMBINED ADJUSTMENT FACTOR

CONTRACT #/TRADE: 23-909-027-08-GC - I

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHICAL REGION: #8, NORTH SUNGCOAST FLORIDA

The following formula has been developed for the sole purpose of evaluating Bids and awarding.

Each Bidder must complete the following calculation.

Line 1.	Adjustment Factor for Normal Working Hours for Owner Funded Projects: Line (1.A)	<u>1.275</u>
Line 2.	Multiply Line 1 by .50	<u>.6375</u>
Line 3.	Adjustment Factor for Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: Line (2.A)	<u>1.295</u>
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Line 9.	Adjustment Factor for Non-Pre-Priced Line (5.A)	<u>1.15</u>
Line 10.	Multiply Line 9 by .10	<u>.115</u>
Line 11.	Summation of lines 2, 4, 6, 8 and 10 (Combined Adjustment Factor)	<u>1.2685</u>

**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

Transfer the number on line 11 to the space provided for the Combined Adjustment Factor on Bid Form 1.

*Instructions To Bidder: Specify lines 1 through 11 to four (4) decimal places. Use conventional rounding methodology (i.e., if the number in the 5<sup>th</sup> decimal place is 0-4, the number in the 4<sup>th</sup> decimal remains unchanged; if the number in the 5<sup>th</sup> decimal place is 5-9, the number in the 4<sup>th</sup> decimal is rounded upward).*

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*When submitting Price Proposals related to specific Purchase Orders, the Proposer shall utilize one or more of the Adjustment Factors applicable to the Work being performed provided in lines 1, 3, 5, 7 and 9 as applicable, on the Bid Form 2 above.*

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## BID FORM 1: THE ADJUSTMENT FACTORS

CONTRACT #/TRADE: 23-909-027-08-GC-J

CONTRACTOR NAME: CALADESI CONSTRUCTION CO.

GEOGRAPHIC REGION: #8, NORTH SUNCOAST FLORIDA

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1.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

2. Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects: 4:00pm to 7:00am Monday to Friday, and any time Saturday, Sunday and Holidays. Contractor shall perform Tasks during Other Than Normal Working Hours or All Working Hours at Secured Locations for Owner Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

2.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

(Specify to four decimal places)

3. Normal Working Hours for Federally Funded Projects: 7:00am to 4:00pm Monday to Friday, except holidays. Contractor shall perform Tasks during Normal Working Hours for Federally Funded Projects for the Unit Price set forth in the CTC multiplied by the Adjustment Factor of:

3.A Adjustment Factor With  
Administrative Fees:

1	.	2	7	5	0
---	---	---	---	---	---

(Specify to four decimal places)

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4.A Adjustment Factor With  
Administrative Fees:

1	.	2	9	5	0
---	---	---	---	---	---

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

(Specify to four decimal places)

5. Non-Pre-Priced Adjustment Factor: To be applied to work deemed not to be included in the CTC but within the general scope of the work.

5.A Adjustment Factor With  
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1	.	1	5	0	0
---	---	---	---	---	---

(Specify to four decimal places)

6. Combined Adjustment Factor: (From Line 11 on bid Form 2)

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

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**(Bid Form 2 Continued on The Next Page)**

Section Three: Bid Submission and Required Forms | Bid Pricing Forms

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**(The rest of this page is intentionally left blank)**

## ***SanDisk SecureAccess™ v3.01 for Mac users***

Mac users will need to download and install the SanDisk SecureAccess™ software for their SanDisk® USB flash drives. An Internet connection is required.

### **Steps:**

1. After reading the following steps, click on the 'Ready to Download' button below.
2. Follow the on-screen instructions, download and save the compressed file onto your computer.
3. Before installing the SanDisk SecureAccess software, connect your SanDisk USB flash drive to the computer.
4. Extract the SanDisk SecureAccess file for Mac directly onto your connected SanDisk USB flash drive.
5. Click on the SanDisk SecureAccess icon on your computer screen to begin.

### **Minimum System Requirements:**

- Mac OS® X v10.6+

[\*Ready to Download\*](#)

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**Western Digital Technologies, Inc. is the seller of record and licensee in the Americas of SanDisk® products.**



**SanDisk SecureAccess™**

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# **QUICK START GUIDE**

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## Introduction

Welcome to SanDisk SecureAccess™!

SanDisk SecureAccess™ is a fast, simple way to store and protect critical and sensitive files on any SanDisk® USB flash drive. Create a private vault and simply drag-and-drop your valuable files inside. Access to your vault is protected by a personal password, and your files are automatically encrypted – so even if you share your SanDisk USB flash drive or it becomes lost or stolen, access to your files are safe.

When it comes to protecting your private files, you can trust SanDisk®!

### Supported Operating Systems:

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### Required Hardware:

- Available USB port
- SanDisk USB flash drive

## Getting Started

After connecting your SanDisk USB flash drive to a computer, double-click the SanDiskSecureAccessV3\_win.exe (executable) file to run the SanDisk SecureAccess software (Fig. 1). (Some computers may require you to open the computer directory to locate connected drive.)

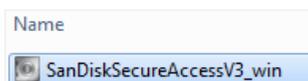


Fig. 1

## Set-up

Setting-up your private vault is simple!

1. Enter a personal password for your private vault. Password must be at least 6 characters and contain numeric and alphabet characters. Enter a hint to help you remember your password (Fig. 2).

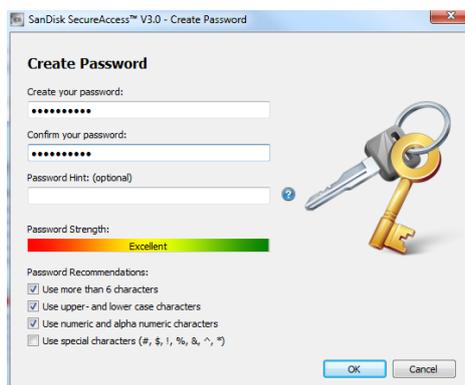


Fig. 2

2. Click 'OK'

You are now ready to keep your valuable and sensitive files in your new private vault, and protect access to them! (Fig. 3)

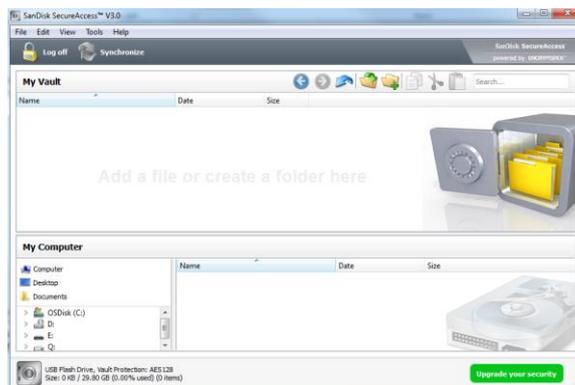


Fig. 3

### Adding files or folders into your private vault

1. Select the files you want to add, and drag-and-drop them right into the main screen (Fig. 4).

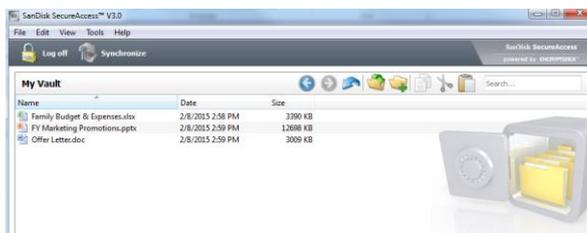


Fig. 4

2. Add files manually by clicking on the 'Add File' icon from the My Vault menu bar, and select the files you want to add (Fig. 5a and 5b).

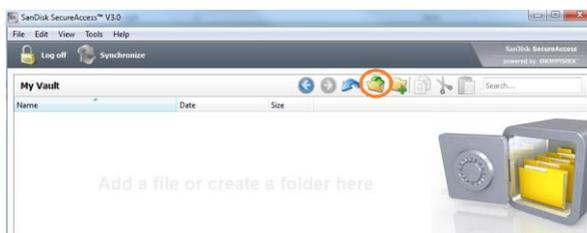


Fig. 5a

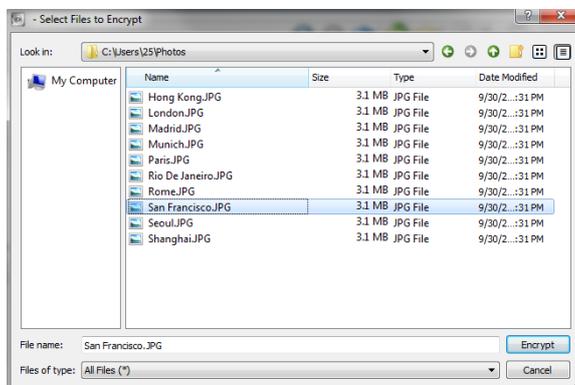


Fig. 5b

### Introduction

Bienvenue à SanDisk SecureAccess™ !

SanDisk SecureAccess est une façon rapide et simple de stocker et de protéger vos fichiers importants et confidentiels sur une clé USB de SanDisk®. Il suffit de créer un coffre-fort privé et d'y déposer vos précieux fichiers. L'accès au coffre est protégé par un mot de passe personnel et vos fichiers sont automatiquement cryptés. Par conséquent, même si vous prêtez votre clé USB Sandisk, que vous la perdez ou qu'on vous la vole, vos fichiers sont à l'abri.

Pour ce qui est de la protection de vos fichiers privés, vous pouvez faire confiance à SanDisk® !

#### Systemes d'exploitation pris en charge :

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

#### Matériel :

- Port USB disponible
- Clé USB SanDisk

### Mise en route

Après avoir connecté votre clé USB SanDisk® à l'ordinateur, cliquez deux fois sur le fichier SanDiskSecureAccessV3\_win.exe (exécutable) pour exécuter le logiciel SanDisk SecureAccess™ (Fig. 1). (Sur certains ordinateurs, vous aurez peut-être à ouvrir le répertoire pour localiser le lecteur connecté.)

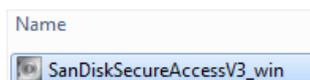


Fig. 1

### Configuration

La configuration d'un coffre-fort est simple !

1. Saisissez un mot de passe personnel pour accéder au coffre. Le mot de passe doit disposer d'au moins 6 caractères, ces derniers devant être alphabétiques et numériques. Entrez un indice pour vous en souvenir facilement (Fig. 2).

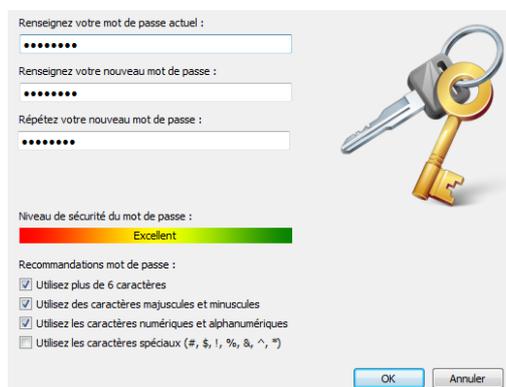
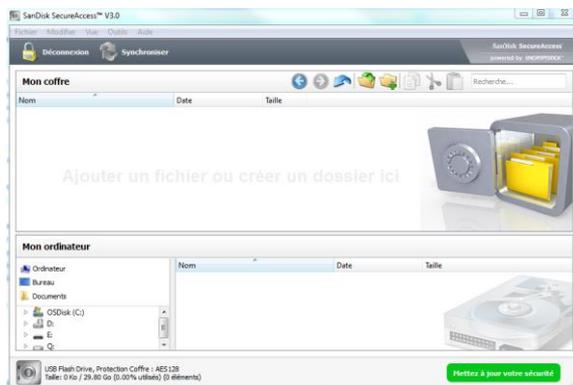


Fig. 2

2. Cliquez sur `OK.

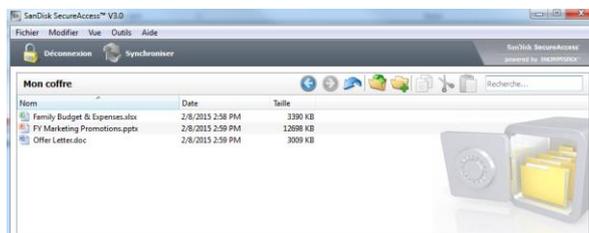
Vous êtes maintenant prêt à protéger vos fichiers importants et confidentiels dans votre nouveau coffre-fort et à en défendre l'accès ! (Fig. 3)



**Fig. 3**

## Ajout de fichiers ou de dossier dans le coffre-fort privé

1. Sélectionnez les fichiers à ajouter et faites-les glisser dans l'affichage principal (Fig. 4).

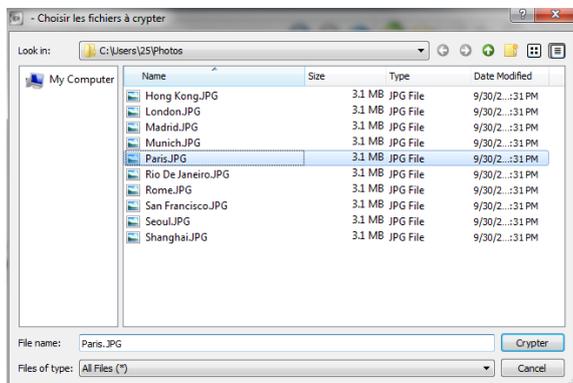


**Fig. 4**

2. Ajoutez des fichiers manuellement en cliquant sur la touche Ajout de fichiers située en haut à droite de la page principale, puis sélectionnez les fichiers que vous souhaitez ajouter (Fig. 5a et 5b).



**Fig. 5a**



**Fig. 5b**

## Einleitung

Willkommen bei SanDisk SecureAccess™!

SanDisk SecureAccess ist eine schnelle, einfache Methode, wichtige, sensible Dateien auf einem SanDisk® USB-Flash-Laufwerk zu speichern und zu schützen. Sie erstellen einen privaten Tresor und legen Ihre wertvollen Dateien per Drag&Drop einfach dort ab. Der Zugriff auf Ihren Tresor erfolgt über ein von Ihnen eingerichtetes Kennwort, und Ihre Dateien werden automatisch verschlüsselt. Das heißt, selbst wenn Sie Ihr SanDisk USB-Laufwerk mit anderen gemeinsam benutzen oder es verloren geht oder gestohlen wird, sind Ihre Dateien sicher aufgehoben.

Wenn es um den Schutz Ihrer privaten Dateien geht, können Sie sich auf SanDisk® verlassen!

### Unterstützte Betriebssysteme

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### Erforderliche Hardware:

- USB-Port
- SanDisk USB-Flash-Laufwerk

## Erste Schritte

Schließen Sie Ihr SanDisk® USB-Flash-Laufwerk an einen Computer an. Doppelklicken Sie anschließend auf die ausführbare Datei SanDiskSecureAccessV3\_win.exe, um die Software SanDisk SecureAccess™ auszuführen (Abb. 1). (Bei einigen Computern müssen Sie möglicherweise das Verzeichnis „Computer“ öffnen, um das angeschlossene Laufwerk zu sehen.)



Abb. 1

## Setup

Ihr Tresor lässt sich kinderleicht einrichten!

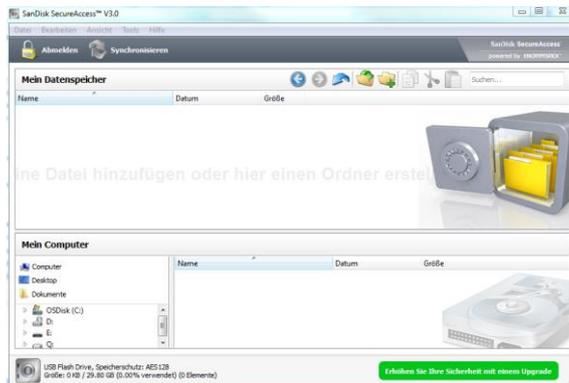
1. Geben Sie ein Kennwort für Ihren Tresor ein. Das Kennwort muss aus mindestens 6 numerischen und alphabetischen Zeichen bestehen. Geben Sie einen Hinweis ein, der Ihnen dabei hilft, sich an Ihr Kennwort zu erinnern (Abb. 2).



Abb. 2

2. Klicken Sie auf "OK".

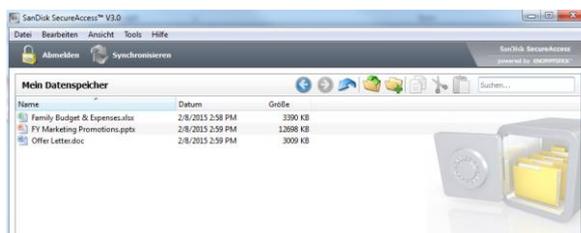
Jetzt können Sie Ihre wertvollen und sensiblen Dateien in Ihrem neuen Tresor aufbewahren und sie vor unbefugtem Zugriff schützen! (Abb. 3)



**Abb. 3**

## Speichern von Dateien und Ordnern in Ihrem Tresor

1. Wählen Sie die gewünschten Dateien und ziehen Sie sie einfach auf das Hauptfenster (Abb. 4).

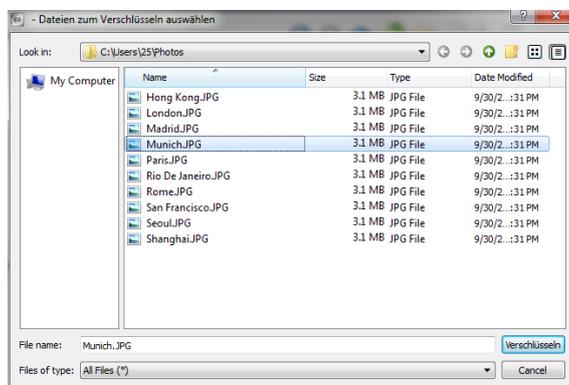


**Abb. 4**

2. Wenn Sie auf das grüne Zeichen im Tresor-Fenster klicken, können Sie die gewünschten Dateien manuell auswählen (Abb. 5a und 5b).



**Abb. 5**



**Abb. 5**

## Introducción

Bienvenido a SanDisk SecureAccess™.

SanDisk SecureAccess es un medio rápido y sencillo para almacenar y proteger archivos críticos y sensibles en cualquier unidad flash USB SanDisk®. Cree una caja fuerte personal y simplemente arrastre y suelte sus archivos valiosos dentro de ella. El acceso a la caja fuerte se protege mediante una contraseña personal y los archivos se cifran automáticamente; así que incluso si comparte la unidad flash USB SanDisk o si ésta se pierde o se la roban, el acceso a sus archivos está protegido.

Cuando se trata de proteger sus archivos personales, puede confiar en SanDisk®.

### **Sistemas operativos admitidos:**

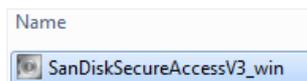
- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X versión 10.6+

### **Hardware requerido:**

- Puerto USB disponible
- Unidad flash USB SanDisk

## Pasos iniciales

Después de conectar la unidad flash USB SanDisk® a una computadora, haga doble clic en el archivo SanDiskSecureAccessV3\_win.exe (ejecutable) para ejecutar el software SanDisk SecureAccess™ (Fig. 1). (Es posible que algunas computadoras requieran que abra el directorio de la computadora para localizar la unidad conectada).

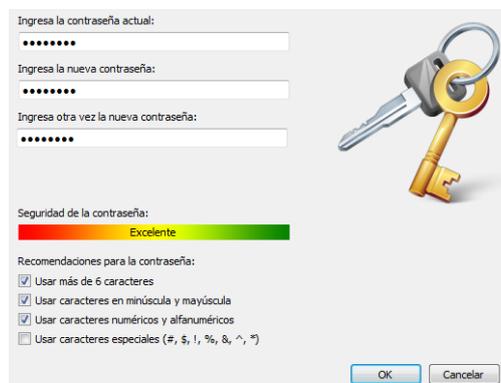


**Fig. 1**

## Configuración

La configuración de la caja fuerte personal es sencilla.

1. Escriba una contraseña personal para la caja fuerte personal. La contraseña debe tener al menos 6 caracteres y contener caracteres numéricos y alfabéticos. Escriba un indicio para que le ayude a recordar su contraseña (Fig. 2).



**Fig. 2**

2. Haga clic en "Aceptar".

Ahora está listo para guardar sus archivos valiosos y sensibles en la nueva caja fuerte personal y para proteger el acceso a estos (Fig. 3).

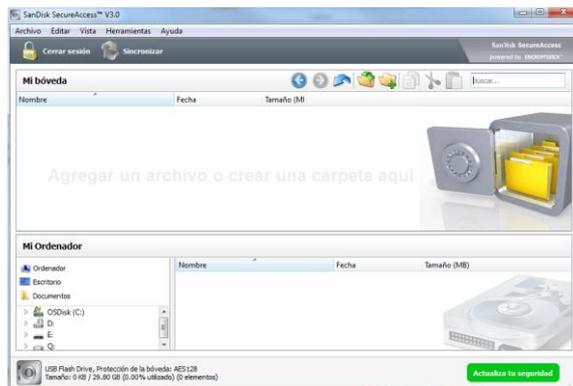


Fig. 3

### Adición de archivos o carpetas a la caja fuerte personal

1. Seleccione los archivos que desea agregar y arrástrelos y suéltelos directamente en la pantalla principal (Fig. 4).

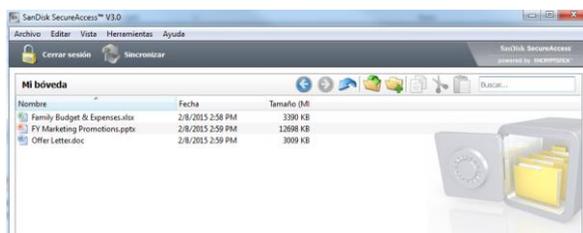


Fig. 4

2. Agregue archivos manualmente haciendo clic en el símbolo verde encuentra en derecha de la interfaz de la caja fuerte y seleccione los archivos que desea agregar (Fig. 5a y 5b).

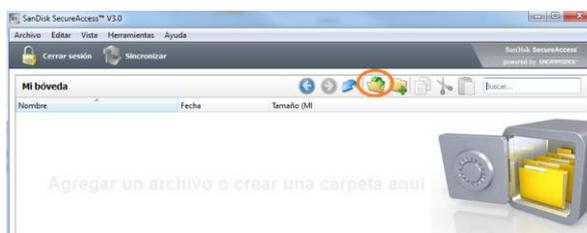


Fig. 5a

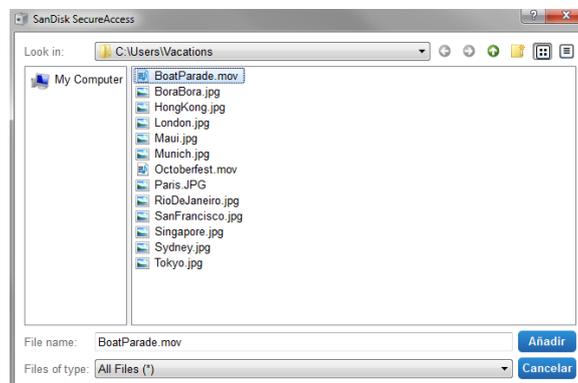


Fig. 5b

## Introduzione

Programma SanDisk SecureAccess™!

SanDisk SecureAccess è un modo semplice e veloce di conservare e proteggere file riservati ed importanti su qualsiasi unità flash USB SanDisk®. Crea una cassaforte privata e trascina semplicemente i tuoi preziosi file al suo interno. L'accesso alla cassaforte è protetto da una password personale e i file vengono automaticamente crittografati - in modo che in caso di condivisione, smarrimento o furto dell'unità flash USB SanDisk l'accesso ai tuoi file rimarrà protetto.

Quando si parla di protezione dei file, puoi fidarti di SanDisk®!

### Sistemi operativi supportati:

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### Hardware necessario:

- Porta USB disponibile
- Unità flash USB SanDisk

## Operazioni preliminari

Una volta collegata la propria unità flash USB SanDisk® al pc, fare doppio clic sul file SanDiskSecureAccessV3\_win.exe (eseguibile) per lanciare il software SanDisk SecureAccess™. (Alcuni computer potrebbero richiedere l'apertura della directory Computer per individuare l'unità connessa)

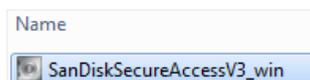


Fig. 1

## Configurazione

La configurazione della propria cassaforte è semplice!

1. Inserire una password personale per la propria cassaforte. La password deve avere almeno 6 caratteri e contenere caratteri alfa-numeric. Inserire un suggerimento che aiuti l'utente a ricordarsi della password (Fig 2).

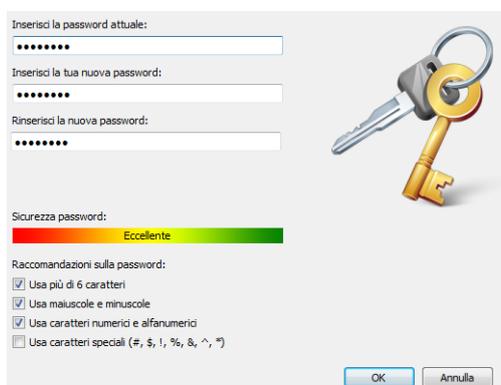


Fig. 2

2. Cliccare su 'OK'

Ora si è pronti a mettere i propri file riservati ed importanti nella nuova cassaforte e proteggerne l'accesso! (Fig. 3)

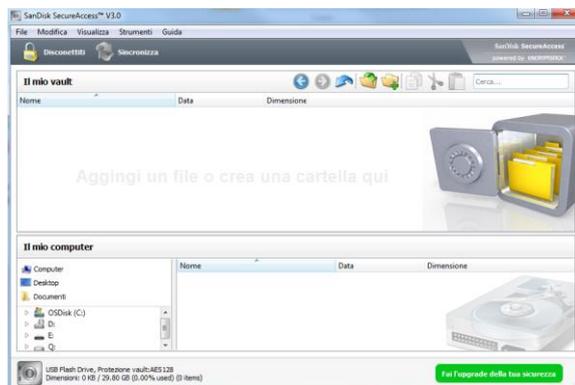


Fig. 3

### Aggiungere file o cartelle nella cassaforte

1. Selezionare i file che si desidera aggiungere e trascinarli direttamente nella schermata principale (Fig. 4).

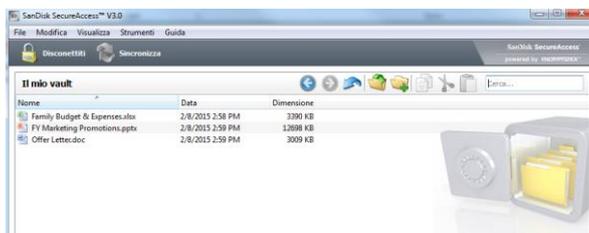


Fig. 4

2. Aggiungere i file manualmente cliccando sul simbolo verde in dell'interfaccia della cassaforte e selezionare i file che si desidera aggiungere (Fig. 5a e 5b).



Fig. 5a

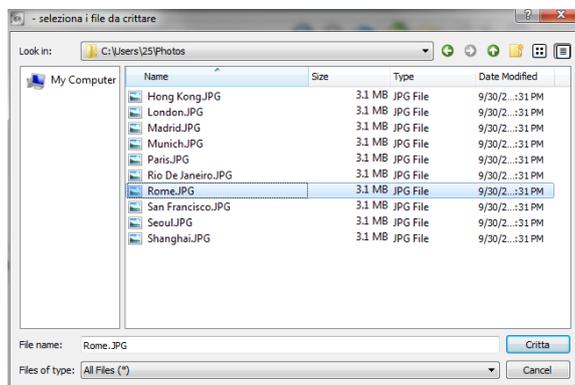


Fig. 5b

## Introdução

Bem-vindo ao SecureAccess™ SanDisk!

O SanDisk SecureAccess é um meio rápido e simples de guardar e proteger ficheiros importantes e confidenciais em qualquer unidade de memória flash USB SanDisk®. Coloque os seus ficheiros de valor, arrastando-os e largando-os para um espaço de armazenamento de segurança privado criado por si. Aceda ao seu espaço de armazenamento de segurança protegido por uma palavra-passe pessoal e os seus ficheiros são encriptados automaticamente, mesmo que partilhe a sua unidade de memória flash USB SanDisk ou que a perca ou seja roubada, o acesso aos seus ficheiros é seguro.

Quando se trata de proteger os seus ficheiros privados, pode confiar no SanDisk®!

### **Sistemas operativos suportados:**

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### **Hardware necessário:**

- Porta USB disponível
- Unidade de memória flash USB SanDisk

## Iniciar

Depois de ligar a sua unidade de memória flash USB SanDisk® a um computador, clique duas vezes no ficheiro SanDiskSecureAccess.exe (executável) para executar o software SecureAccess™ SanDisk (Fig. 1). (Alguns computadores podem pedir-lhe para abrir a directoria do computador a fim de localizar a unidade que está ligada.)

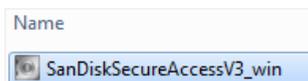


Fig. 1

## Configuração

É simples definir o seu espaço de armazenamento de segurança privado!

1. Introduza uma palavra-passe pessoal para o seu espaço de armazenamento de segurança privado. A palavra-passe deve conter, pelo menos, 6 caracteres, com caracteres numéricos ou alfabéticos. Introduza uma pista para o ajudar a lembrar-se da sua palavra-passe (Fig. 2).

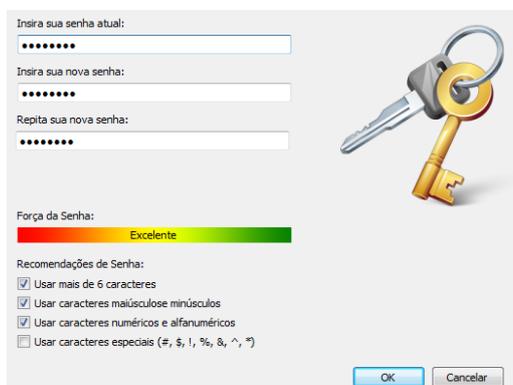


Fig. 2

2. Clique em "OK".

Agora está pronto a guardar os seus ficheiros importantes e confidenciais no seu novo espaço de armazenamento de segurança privado e a proteger o acesso aos mesmos! (Fig. 3)

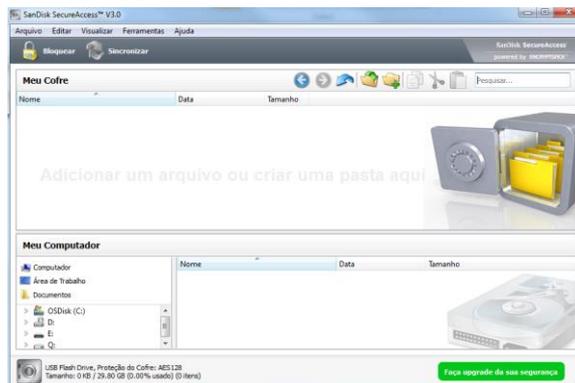


Fig. 3

## Adicionar ficheiros ou arquivos ao seu espaço de armazenamento de segurança privado

1. Selecciona os ficheiros que pretende adicionar e arraste-os e largue-os para o ecrã principal (Fig. 4).

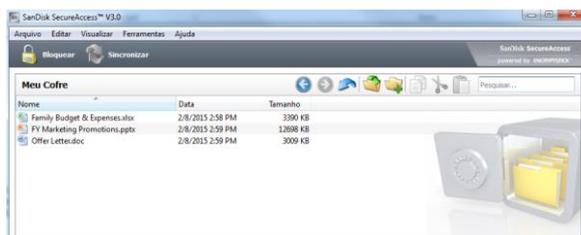


Fig. 4

2. Adicione ficheiros manualmente clicando no sinal verde no direito da interface do espaço de armazenamento de segurança e seleccione os ficheiros que pretende adicionar (Fig. 5a e 5b).

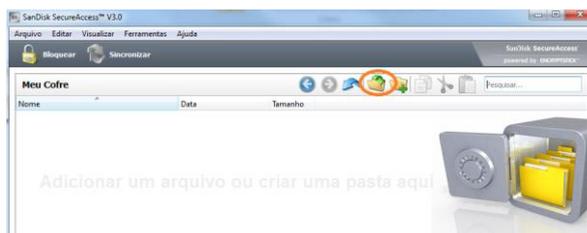


Fig. 5a

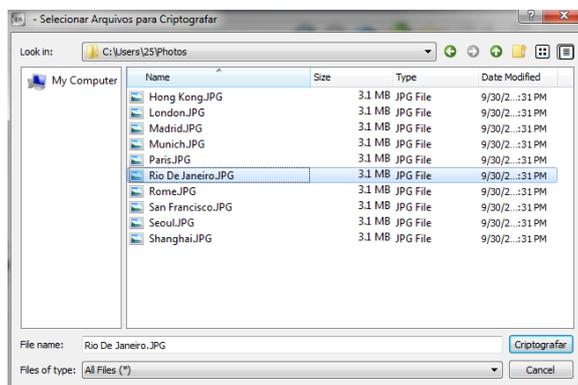


Fig. 5b

## 简介

欢迎使用 SanDisk SecureAccess™ !

SanDisk SecureAccess 是一种在任何 SanDisk® USB

闪存驱动器上存储和保护重要和敏感文件的快速而简单的方式。创建一个私人存储库，并且只需将您的重要文件拖放到内部。您的存储库受到密码保护，并且您的文件也自动加密 - 所以即使您共享 SanDisk USB 闪存驱动器或该闪存驱动器丢失或被盗，您的文件也是安全的。

当需要保护私人文件时，SanDisk® 值得您信赖！

### 所支持的操作系统：

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### 硬件要求：

- 有 USB 接口
- SanDisk USB 闪存驱动器

## 入门指南

将您的 SanDisk® USB 闪存驱动器连接至电脑后，双击 SanDiskSecureAccessV3\_win.exe（可执行）文件以运行 SanDisk SecureAccess™ 软件（图 1）。（有的电脑可能会要求您打开电脑目录，查找已连接的驱动器的位置。）



图 1

## 安装

设置您的私人存储库非常简单！

1. 为您的私人存储库设置密码。密码必须至少为 6 个字符，并且包含数字和字母。输入提示以帮助您记住密码（图 2）。

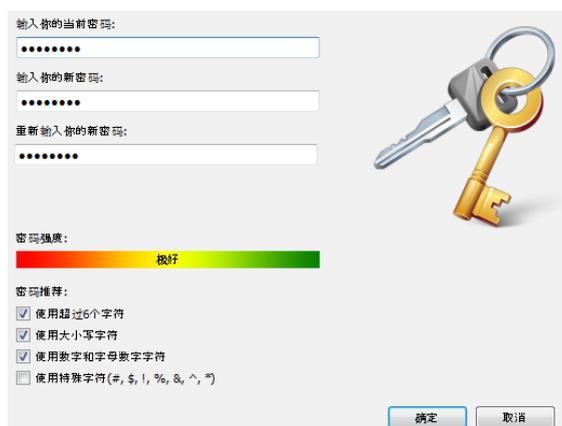


图 2

2. 单击“确定”

现在您可以准备将重要文件和敏感文件放入您的新私人存储库中，并保护这些文件！（图 3）



图 3

### 将文件或文件夹添加到您的私人存储库中

1. 选择您要添加的文件，将它们拖放到主屏幕中（图 4）。

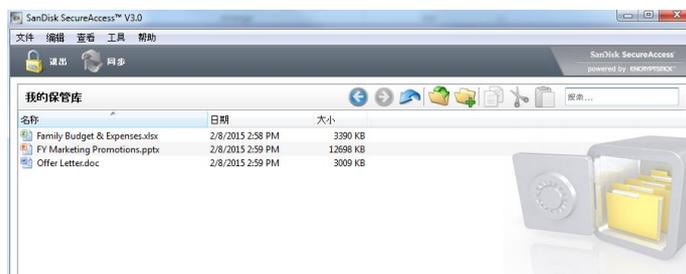


图 4

2. 通过单击存储库界面右上角的绿色符号，并选择您想要添加的文件进行手动添加文件（图 5a 和 5b）。



图 5a

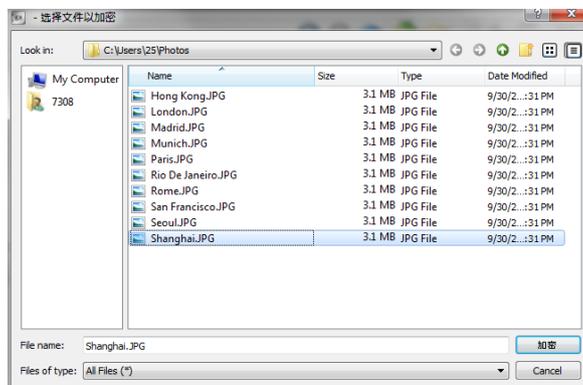


图 5b

## 簡介

歡迎使用 SanDisk SecureAccess™ !

SanDisk SecureAccess 是一種在任何 SanDisk® USB 快閃碟上儲存和保護重要與敏感檔案的快速簡單方式。建立一個私人保存庫，並且只需將您的重要檔案拖放到內部。您的保存庫受到密碼保護，並且您的檔案也自動加密 - 所以即使您共用 SanDisk USB 快閃碟或該快閃碟遺失或被竊，您的檔案也是安全無虞。

當需要保護私人檔案時，SanDisk® 值得您信賴！

### 所支援的作業系統：

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### 硬體要求：

- 有 USB 介面
- SanDisk USB 快閃碟

## 入門指南

將您的 SanDisk® USB 快閃碟連接至電腦後，按兩下 SanDiskSecureAccessV3\_win.exe（執行檔）檔案以執行 SanDisk SecureAccess™ 軟體（圖 1）。（有的電腦可能會要求您打開電腦目錄，尋找已連接的快閃碟位置。）



圖 1

## 安裝

設定您的私人保存庫非常簡單！

1. 為您的私人保存庫輸入密碼。密碼必須至少為 6 個字元，並且包含數字和字母。輸入提示以幫助您記住密碼（圖 2）。

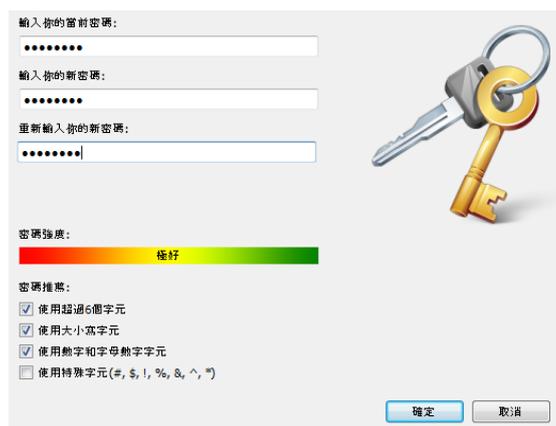


圖 2

2. 按一下「確定」

現在您可以準備將重要檔案和敏感檔案放入您的新私人保存庫中，並保護這些檔案！（圖 3）

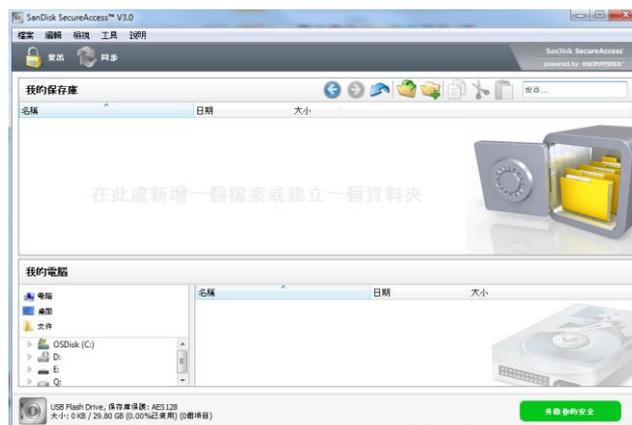


圖 3

### 將檔案或資料夾加入您的私人保存庫中

1. 選擇您要加入的檔案，將它們拖放到主畫面中（圖 4）。

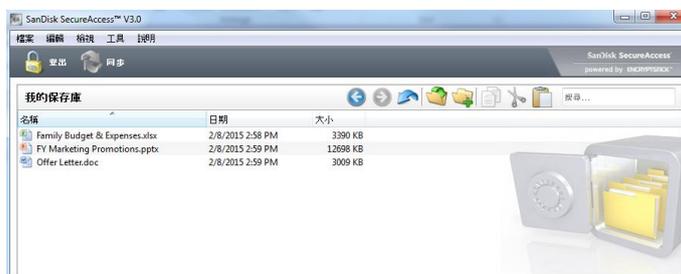


圖 4

2. 按一下保存庫介面右上角的綠色符號，並選擇您要加入的檔案進行手動加入檔案（圖 5a 和 5b）。



圖 5a

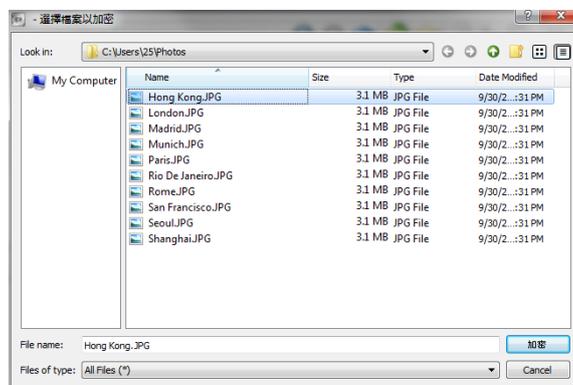


圖 5b

## 소개

SanDisk SecureAccess™를 사용해 주셔서 감사합니다.

SanDisk SecureAccess는 중요하고 민감한 파일을 SanDisk® USB 플래시 드라이브에 저장하고 보호할 수 있는 빠르고 안전한 방법입니다. 개인 금고를 만들고 귀중한 파일을 그 안에 끌어다 놓을 수 있습니다. 개인 금고에 대한 액세스는 개인 암호로 보호되며 파일이 자동으로 암호화됩니다. 따라서 SanDisk USB 플래시 드라이브를 공유하거나 분실 또는 도난을 당했더라도 안전합니다.

개인 파일의 보호에 대해서는 SanDisk®를 믿을 수 있습니다.

### 지원되는 운영 체제:

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### 필수 하드웨어:

- USB 포트 지원
- SanDisk USB 플래시 드라이브

## 시작하기

SanDisk® USB 플래시 드라이브를 컴퓨터에 연결한 후 SanDiskSecureAccessV3\_win.exe(실행) 파일을 두 번 클릭해서 SanDisk SecureAccess™ 소프트웨어를 실행합니다(그림 1). (일부 컴퓨터의 경우에는 컴퓨터 디렉토리를 열고 연결된 드라이브를 찾아야 할 수도 있습니다.)

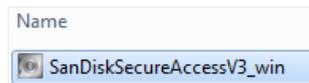


그림 1

## 설치

개인 금고를 설치하는 방법은 간단합니다.

1. 개인 금고에 대한 개인 암호를 입력합니다. 암호는 최소한 6자 이상이어야 하고 알파벳과 숫자가 들어가야 합니다. 암호를 기억하는 데 도움이 되도록 힌트를 입력합니다(그림 2).

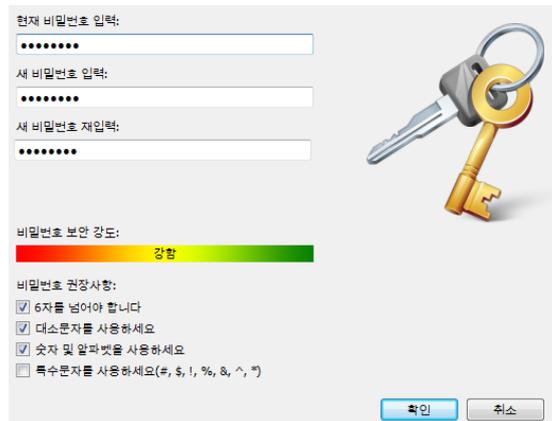


그림 2

2. `OK(확인)'를 클릭합니다.

이제 귀중하고 민감한 파일을 새로 만든 개인 금고에 보관하고 그 파일에 대한 액세스를 보호할 준비가 되었습니다. (그림 3)



그림 3

### 파일 또는 폴더를 개인 폴더에 추가

1. 추가할 파일을 선택한 후 기본 화면으로 끌어다 놓습니다(그림 4).

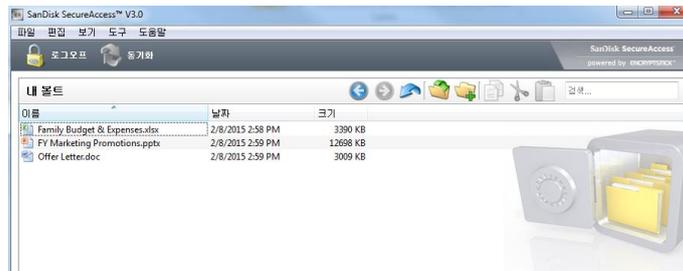


그림 4

2. 금고 인터페이스의 오른쪽 위에 있는 녹색 기호를 클릭해 수동으로 파일을 추가하고 추가할 파일을 선택합니다(그림 5a 과 5b).



그림 5a

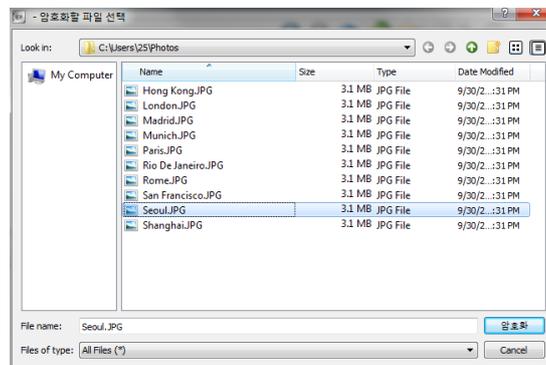


그림 5b

## はじめに

SanDisk SecureAccess™ へようこそ！

SanDisk SecureAccess™ は、機密性の高い重要なファイルを SanDisk® USB フラッシュメモリに保存して保護するシンプルで手早い方法です。プライベートポータルを作成し、重要なファイルをドラッグしてポータル内にドロップするだけです。ポータルへのアクセスは個人的なパスワードで保護され、ファイルは自動的に暗号化されます。このため、SanDisk USB フラッシュメモリを共有したり、それが紛失や盗難にあっても、ファイルにアクセスされることはありません。

プライベートなファイルの保護なら SanDisk® におまかせください！

### 対応オペレーティングシステム：

- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### 必要なハードウェア：

- 可用 USB ポート
- SanDisk USB フラッシュメモリ

## はじめに

SanDisk® USB フラッシュメモリをコンピューターに接続した後、「SanDiskSecureAccessV3\_win.exe」（実行可能）ファイルをダブルクリックして SanDisk SecureAccessソフトウェアを実行します（図 1）。（コンピュータによっては、ディレクトリを開いて接続したドライブを参照する必要があります。）

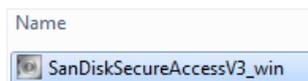


図 1

## 設定

プライベート ポータルの設定は簡単です！

3. プライベートポータルのパスワードを入力します。パスワードは6字以上で、数字とアルファベットを含んでいなくてはなりません。パスワードを覚えられるようにヒントを入力します（図2）。



図 2

4. 「OK」 をクリックします。

機密性の高い重要なファイルを新しいプライベート  
ボールドに保存する準備が整いました。アクセスしてファイルを保護しましょう！（図 3）

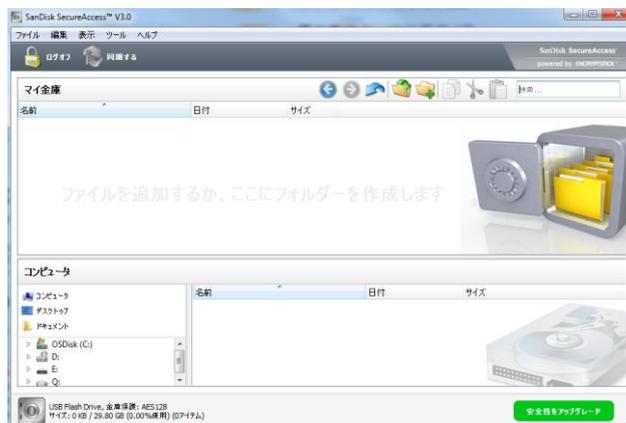


図 3

### ファイルまたはフォルダをプライベート ボールドに追加

- 追加したいファイルを選択してドラッグし、メイン スクリーンに直接ドロップします（図 4）。

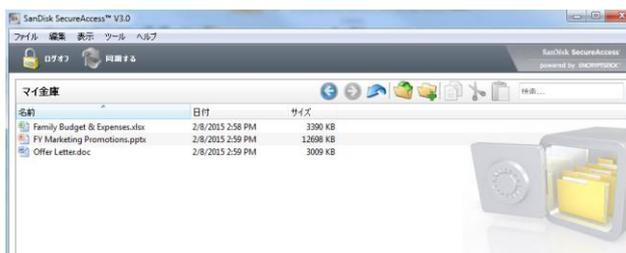


図 4

- マイ ボールド メニューバーからファイルの追加アイコンを  
クリックして、ファイルを手動で追加し、追加したいファイルを選択します（図5a および 図5b）。



図 5a

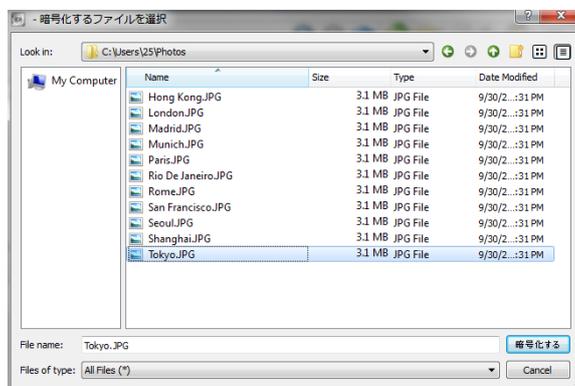


図 5b

### مقدمة

مرحبًا بك في SanDisk SecureAccess™!

يتمثل SanDisk SecureAccess™ في وسيلة سهلة وسريعة لتخزين وحماية الملفات الهامة والحساسة الخاصة بك على أي محرك أقراص USB محمول من SanDisk®. قم بإنشاء مخزن خاص وقم فقط بسحب وإسقاط الملفات القيمة الخاصة بك بداخله. تتم حماية الوصول إلى المخزن الخاص بك بكلمة مرور شخصية ويتم تشفير الملفات الخاصة بك تلقائيًا - حتى إذا قمت بمشاركة محرك أقراص USB المحمول من SanDisk الخاص بك أو إذا تعرض للسرقة أو الضياع أو السرقة فستكون الملفات الخاصة بك آمنة.

عندما يتعلق الأمر بحماية الملفات الخاصة لديك، يمكنك الثقة في SanDisk®!

### أنظمة التشغيل المدعومة:

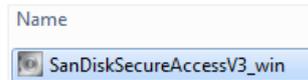
- Windows Vista®
- Windows® 7
- Windows 8
- Windows 10
- Mac OS® X v10.6+

### الأجهزة المطلوبة:

- منفذ USB متاح
- محرك أقراص USB محمول من SanDisk

### بدء العمل

بعد توصيل محرك USB المحمول من SanDisk الخاص بك بجهاز كمبيوتر قم بالنقر نقرًا مزدوجًا فوق الملف SanDiskSecureAccessV3\_win.exe (قابل للتنفيذ) لتشغيل البرنامج SanDiskSecureAccess (الشكل 1). (قد تحتاج بعض أجهزة الكمبيوتر إلى قيامك بفتح دليل الكمبيوتر لتحديد موقع محرك الأقراص المتصل).



الشكل 1

### الإعداد

إعداد المخزن الخاص بك عملية بسيطة!

5. قم بإدخال كلمة مرور شخصية للمخزن الخاص لديك. يجب أن تتكون كلمة المرور من 6 أحرف على الأقل وأن تشمل على أحرف رقمية وأبجدية. قم بإدخال تلميح لمساعدتك على تذكر كلمة المرور الخاصة بك (الشكل 2).

إدخال كلمة المرور الحالية:  
.....

إدخال كلمة المرور الجديدة:  
.....

إعادة إدخال كلمة المرور الجديدة:  
.....

قوة كلمة المرور:  
ممتاز

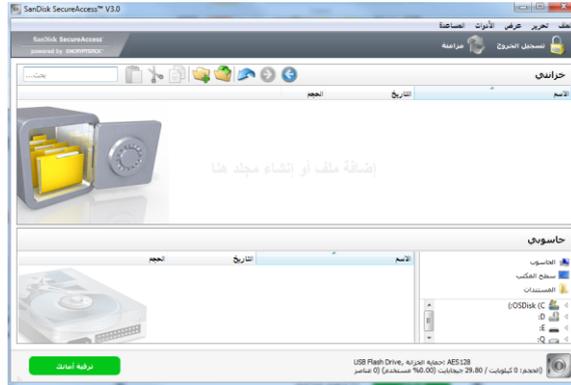
توصيات كلمة المرور:  
 استخدم أكثر من 6 رموز  
 استخدم أحرفًا كبيرة وصغيرة  
 استخدم أرقامًا وحروفًا أبجدية  
 استخدم الرموز الخاصة (\*, ^, &, %, !, \$, #)

إلغاء موافق

الشكل 2

6. انقر فوق 'OK' (موافق)

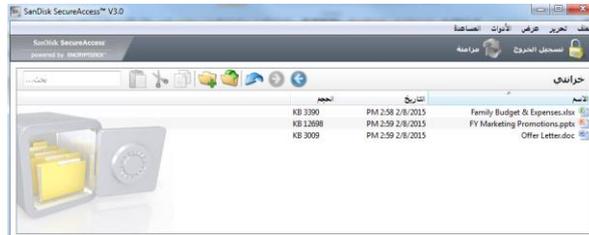
أنت مستعد الآن للحفاظ على الملفات القيمة والحساسية الخاصة بك في المخزن الخاص الجديد لديك ومنع الوصول إليها! (الشكل 3)



الشكل 3

### إضافة ملفات أو مجلدات إلى المخزن الخاص بك

5. قم بتحديد الملفات التي ترغب في إضافتها ثم سحبها وإسقاطها مباشرة في الشاشة الرئيسية (الشكل 4).

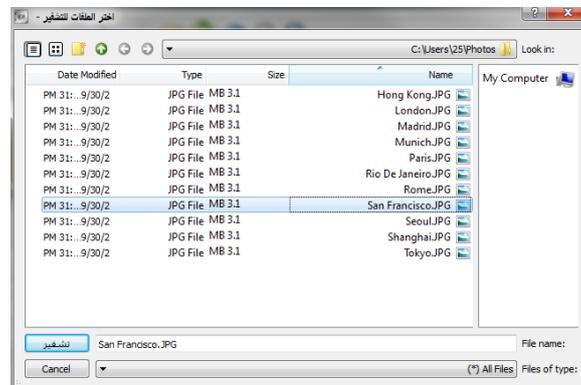


الشكل 4

6. قم بإضافة الملفات يدويًا من خلال النقر فوق الرمز 'Add File' (إضافة ملف) من شريط قوائم My Vault (المخزن الخاص بي) وحدد الملفات التي ترغب في إضافتها (الشكل 5أ و 5ب).



الشكل 5أ



الشكل 5ب



## **SanDisk SecureAccess™**

[www.sandisk.com/secureaccess](http://www.sandisk.com/secureaccess)

**URL:** [www.sandisk.com](http://www.sandisk.com)

**Support:** [www.sandisk.com/support](http://www.sandisk.com/support)

SanDisk  
951 SanDisk Drive  
Milpitas, CA 95035 USA

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Western Digital Technologies, Inc. is the seller of record and licensee in the Americas of SanDisk® products.

80-36-03745b\_ML

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

**Letter of Intent**

Failure to complete this statement may be grounds for rejection of Bid.

Name of Prime Bidder's firm: Caladesi Construction Company  
Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: Airus Inc. DBA Air One of Pinellas  
Address: 5475 Williams Rd.  
City: Tampa  
Telephone: 727-536-0771 FAX \_\_\_\_\_ E-mail AIRONETAMPA@YAHOO.COM

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Asian

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: HVAC

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By: Print Name: IL YON YO Date: 7/28/2022  
[Signature] President  
(Signature) (Title) (Name of M/WBE Firm)

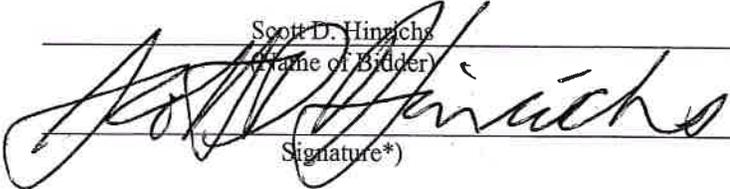
If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE  
ASSURANCE AND PARTICIPATION**

**EACH CONTRACT THE OWNER EXECUTES WITH THE CONTRACTOR (AND EACH SUBCONTRACTOR THE CONTRACTOR EXECUTES WITH A SUBCONTRACTOR) MUST INCLUDE THE FOLLOWING CLAUSE:**

Contractor's W/MBE Assurance: The Contractor or Subcontractor will not discriminate on the basis of race, color, national origin, or sex in the performance of this Contract. Failure by the Contractor to carry out these requirements is a material breach of this Contract, which may result in the termination of this Contract or such other remedy as the recipient deems appropriate.

The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hingrichs  
(Name of Bidder)  
  
(Signature\*)  
Title: Corp. Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

**Letter of Intent**

Failure to complete this statement may be grounds for rejection of Bid.

Name of Prime Bidder's firm: Caladesi Construction Company  
Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: Best Made Enterprises, Inc.  
Address: 4133 Causeway Blvd  
City: Tampa, FL 33619  
Telephone: 813-248-5266 FAX 813-248-1299 E-mail Info@BestMadeFence.Com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Hispanic

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Fencing, Gates, Railing, Stairs, Access Control Systems

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Corp Sec. Caladesi Construction Company  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

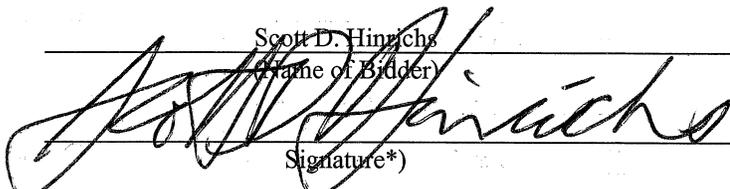
By: Print Name: Karen D. Flores Date: 07/27/2022  
Karen D. Flores Secretary/Treasurer Best Made Enterprises, Inc.  
(Signature) (Title) (Name of M/WBE Firm)

**If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.**

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
(Name of Bidder)  
  
(Signature\*)  
Title: Corp.Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

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AND PARTICIPATION**

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Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: Elite Roofing Services, Inc.  
Address: PO Box 89848  
City: Tampa, FL 33689  
Telephone: 813-630-0800 FAX \_\_\_\_\_ E-mail camille@eliteroofingservices.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Female

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Roofing/Sheetmetal, coating, gutters, downspouts

Amount of Subcontract: Pending on job

Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature) Corp Sec. Caladesi Construction Company  
(Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar value as stated above.

By: Print Name: Camille Austin Date: 7/26/2022  
(Signature) President Elite Roofing Services, Inc.  
(Title) (Name of M/WBE Firm)

**If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.**

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

\_\_\_\_\_  
Scott D. Hinrichs

(Name of Bidder)

By: \_\_\_\_\_

Signature\*)

Title: \_\_\_\_\_

Corp.Sec.

Date: \_\_\_\_\_

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

**Letter of Intent**

Failure to complete this statement may be grounds for rejection of Bid.

Name of Prime Bidder's firm: Caladesi Construction Company  
Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: CIC Painting Contractors, Inc.  
Address: 8372 Standish Bend Drive  
City: Tampa, FL 33615  
Telephone: 813-886-7100 FAX 813-886-7102 E-mail carlos@ccpainting.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Hispanic

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: painting - water proofing

Amount of Subcontract: Pending on job

Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Corp Sec. Caladesi Construction Company  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By: Print Name: Carlos Cubas Date: 7-26-22  
[Signature] President  
(Signature) (Title) (Name of M/WBE Firm)

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**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

**Letter of Intent**

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Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: JVA Plumbing, Inc  
Address: PO BOX 320582  
City: Tampa, FL 33679  
Telephone: 813-8415874 FAX \_\_\_\_\_ E-mail jannet.varon@jvaconstruction.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Women, Hispanic

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Plumbing work

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Scott D. Hinrichs Date: 7-27-2022  
[Signature] Corp Sec. Caladesi Construction Company  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

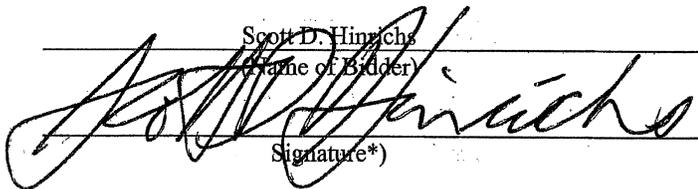
By: Jannet Varon Date: 07-28-22  
[Signature] President JVA PLUMBING, INC  
(Signature) (Title) (Name of M/WBE Firm)

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
Name of Bidder  
  
Signature\*)  
Title: Corp. Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
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Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: Elite Roofing Services, Inc.  
Address: PO Box 89848  
City: Tampa, FL 33689  
Telephone: 813-630-0800 FAX \_\_\_\_\_ E-mail camille@eliteroofingservices.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Female

Check the appropriate box if the W/MBE is a material supplier:

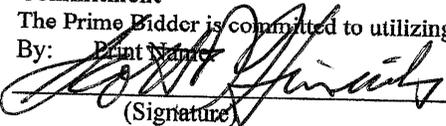
- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Roofing/Sheetmetal, coating, gutters, downspouts

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

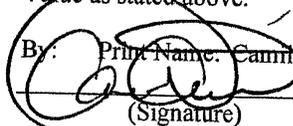
**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By:  Date: \_\_\_\_\_  
(Signature) Corp Sec. Caladesi Construction Company  
(Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar value as stated above.

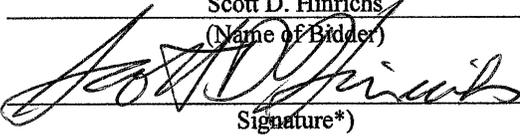
By:  Date: 7/26/2022  
(Signature) Print Name: Camille Austin President Elite Roofing Services, Inc.  
(Title) (Name of M/WBE Firm)

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By: Scott D. Hinrichs  
(Name of Bidder)  
  
(Signature\*)  
Title: Corp. Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

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City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

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Address: 8372 Stanchard Bend drive  
City: Tampa, FL 33615  
Telephone: 813-886-7100 FAX 813-886-7102 E-mail carlos@ccpainting.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Hispanic

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: painting - water proofing

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Shinrichs Date: \_\_\_\_\_  
(Signature) Corp Sec. Caladesi Construction Company  
(Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By: Carlos Cubas Date: 7-26-22  
(Signature) President (Title) (Name of M/WBE Firm)

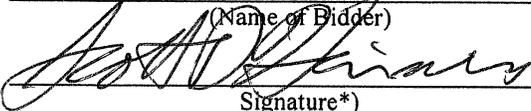
If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE  
ASSURANCE AND PARTICIPATION**

**EACH CONTRACT THE OWNER EXECUTES WITH THE CONTRACTOR (AND EACH SUBCONTRACTOR THE CONTRACTOR EXECUTES WITH A SUBCONTRACTOR) MUST INCLUDE THE FOLLOWING CLAUSE:**

Contractor's W/MBE Assurance: The Contractor or Subcontractor will not discriminate on the basis of race, color, national origin, or sex in the performance of this Contract. Failure by the Contractor to carry out these requirements is a material breach of this Contract, which may result in the termination of this Contract or such other remedy as the recipient deems appropriate.

The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
(Name of Bidder)  
  
Signature\*)  
Title: Corp. Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
AND PARTICIPATION**

**Letter of Intent**

Failure to complete this statement may be grounds for rejection of Bid.

Name of Prime Bidder's firm: Caladesi Construction Company  
Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: P3 Solutions LLC  
Address: 5425 West Crenshaw Street  
City: Tampa, FL 33634  
Telephone: (813) 736-2888 FAX (813) 736-2999 E-mail LPasetti@P3.Solutions

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) MBE Hispanic Owned Entity

Check the appropriate box if the W/MBE is a material supplier:

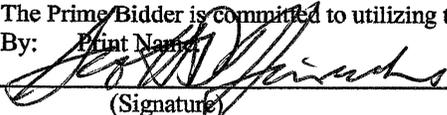
- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Electrical Contracting Services, Material and Equipment supplier of Energy Efficient Equipment (lighting, HVAC, solar, water), and design and implementation services Energy Management and Conservation programs

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

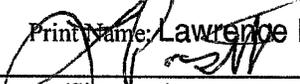
**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By:  Corp Sec. Date:                       
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By:  Date: 26 July 2022  
(Signature) (Title) COO P3 Solutions LLC  
(Name of M/WBE Firm)

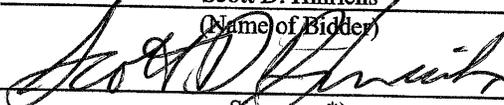
**If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.**

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE  
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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
(Name of Bidder)  
  
(Signature\*)  
Title: Corp. Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
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Address: 1390 Donegan Road  
City: Largo, Florida 33771  
Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

Percentage of Contract Amount performed by Prime Bidder 12% %

Name of W/MBE firm: McLain Plumbing & Mechanical  
Address: 2403 E. 4<sup>th</sup> Ave.  
City: Tampa  
Telephone: 813-876-9046 FAX \_\_\_\_\_ E-mail krista@mclainplumbingtampa.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Female

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

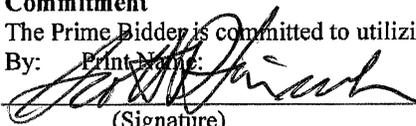
Description of work to be performed by W/MBE firm: Plumbing

Amount of Subcontract: Pending on job

Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

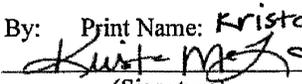
**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By:  Date: \_\_\_\_\_  
(Signature) Corp Sec. Caladesi Construction Company  
(Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

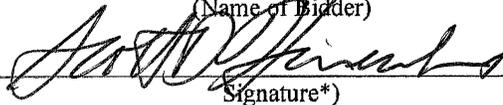
By: Print Name: Krista McLain Date: 7/27/22  
 President McLain Plumbing & Mechanical  
(Signature) (Title) (Name of M/WBE Firm)

If the Prime Bidder does not receive award of the prime Contract, any and all representations in this Letter of Intent and Affirmation will be null and void.

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
(Name of Bidder)  
  
Signature\*)  
Title: Corp.Sec.  
Date: 7-27-2022

\*Must be same signature on Bid Form

**WOMAN AND MINORITY OWNED BUSINESS ENTERPRISE ASSURANCE  
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Telephone: (727) 585-9945 FAX (727) 585-6881 E-mail shinrichs@caladesi.biz

Prime Bidder's Contract Amount \$ 2.5 million

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Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) MBE Hispanic Owned Entity

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Electrical Contracting Services

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

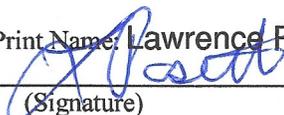
**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By: Print Name: Lawrence Pasetti Date: 26 July 2022  
 COO P3 Solutions LLC  
(Signature) (Title) (Name of M/WBE Firm)

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

By: Scott D. Hinrichs  
(Name of Bidder)

By: \_\_\_\_\_  
Signature\*)

Title: \_\_\_\_\_  
Corp.Sec.

Date: \_\_\_\_\_

\*Must be same signature on Bid Form

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Telephone: 813-876-9046 FAX \_\_\_\_\_ E-mail krista@mclainplumbingtampa.com

Identity of W/MBE (e.g. Hispanic, American Indian, Black, Female, etc.) Female

Check the appropriate box if the W/MBE is a material supplier:

- Materials and supplies obtained from W/MBE manufacturer (county as 100% toward expectancy)

Description of work to be performed by W/MBE firm: Plumbing

Amount of Subcontract: Pending on job  
Subcontract Percent of Prime Bidder's Contract Amount Pending on job %

**Commitment**

The Prime Bidder is committed to utilizing the above-named W/MBE firm for the work described above.

By: Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_  
(Signature) (Title) (Name of Prime Bidder Firm)

**Affirmation**

The above-named W/MBE firm affirms that it will perform the portion of the Contract for the estimated dollar Value as stated above.

By: Print Name: Krista McLain Date: 7/27/22  
Krista McLain President McLain Plumbing & Mechanical  
(Signature) (Title) (Name of M/WBE Firm)

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The work "Contractor" as used in this Assurance will mean the same as "Bidder".

\_\_\_\_\_  
Scott D. Hinrichs  
(Name of Bidder)

By: \_\_\_\_\_  
Signature\*)

Title: \_\_\_\_\_  
Corp.Sec.

Date: \_\_\_\_\_

\*Must be same signature on Bid Form