

BID FORM (cont'd)

Price for hourly rates for miscellaneous work not quoted above:

DESCRIPTION	HOURLY RATE**
Project Manager/Supervisor	24
Painter	19
Helper	17
Other	17

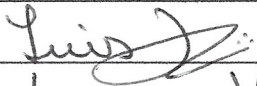
**Hourly Rate does include travel time to job site. The hourly rate quotes shall include full compensation for labor, equipment use, and any other cost to the bidder (excluding paint).

Acknowledge Receipt of Addendum(s) (if applicable circle):

#1 ☒ Yes No #2 Yes No #3 Yes No #4 Yes No

Bidder: Luis Villalba Company: Five12 Painting-Remodeling

Address: 1436 Kurume Ct. Orlando. Florida. 32818

Authorized Signature:  Title: Director

Clearly Print Name: Luis Villalba

Phone: 551-2219062 Fax: _____ Date: 08-15-2020

Email Address: info@five12painting.com

EXHIBIT A

BID FORM

BID NUMBER: 21-32 Rebid

BID OPENING DATE: 2:00 pm, Wednesday, August 19, 2020

TO: The County Commissioners, County of Alachua:

The undersigned, as Contractor, hereby declares that he has carefully read and examined the specifications and with full knowledge of all conditions, under which the equipment and services herein contemplated must be furnished, hereby proposes and agrees to furnish the equipment and services according to the requirements as set out in the specifications for said equipment and service:

ITEM	DESCRIPTION	UNITS	PRICE
A (5%)	CAULKING		
1	Under 1/8"	Per Linear Foot	0.95
2	Over 1/8"	Per Linear Foot	1.35
B (20%)	MARKUP		
1	Paint - Latex	Percentage	Ø
2	Paint - Epoxy	Percentage	Ø
3	Paint - Elastomeric	Percentage	Ø
4	Specialty Equipment Rental	Percentage	Ø
C (70%)	SUBSTRATE*		
1	Gypsum Board	Per Square Foot	0.48
2	Steel	Per Square Foot	0.48
3	Plaster	Per Square Foot	0.48
4	Metal	Per Square Foot	0.48
5	Galvanized Metal	Per Square Foot	0.52
6	Brick	Per Square Foot	0.48
7	Aluminum	Per Square Foot	0.48
8	Wood	Per Square Foot	0.48
9	Concrete	Per Square Foot	0.48
10	Fiberglass	Per Square Foot	0.52
11	EFIS	Per Square Foot	0.48
12	Cinderblock	Per Square Foot	0.48
D (5%)	FREQUENT ITEMS*		
1	Standard Metal Door & Frame	Per Door/Frame	65

*Square foot pricing for each substrate includes all surface preparation, equipment, labor, primer, materials (excluding paint) and supplies required to perform work.

EXHIBIT B

Five12 Painting-Remodeling LLC

(Insert Name of Corporation)

CORPORATE RESOLUTION

**GRANTING SIGNING AUTHORITY
AND AUTHORITY TO CONDUCT BUSINESS**

The Board of Directors ("Directors") of Five12 Painting-Remodeling, a
(insert name of company)

Florida

corporation (the "Corporation"), at a duly and properly

(insert state of incorporation)

held meeting on the 13 day of April, 2015, did hereby consent to, adopt,
ratify, confirm and approve the following recitals and resolutions:

WHEREAS, the Corporation is a duly formed, validly existing corporation in good standing under the laws of
the State of Florida and is authorized to do business in the State of Florida; and

WHEREAS, the Corporation desires to grant certain persons the authority to execute and enter into contracts and
conduct business on behalf of the Corporation.

NOW, THEREFORE, BE IT RESOLVED, that any of the following officers and employees of the Corporation
listed below are hereby authorized and empowered, acting along, to sign, execute and deliver any and all contracts
and documents on behalf of the Corporation, and to do and take such other actions, including but not limited to
the approval and execution of contracts, purchase orders, amendments, change orders, invoices, and applications
for payment, as in his or her judgment may be necessary, appropriate or desirable, in connection with or related
to any bids, proposals, or contracts to, for or with to Alachua County, a charter county and political subdivision
of the State of Florida:

NAME

TITLE

Luis Villalba

Director

Javier Villalba

Manager

NAME

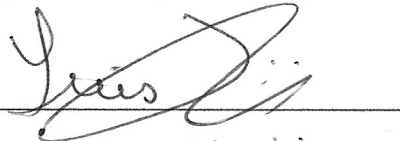
TITLE

BE IT RESOLVED THAT, these resolutions shall continue in full force and effect, and may be relied upon by Alachua County, until express written notice of their rescission or modification has been received by the Procurement Manager of Alachua County. Any revocation, modification or replacement of these resolutions must be accompanied by documentation satisfactory to the Procurement Manager of Alachua County, establishing the authority for the changes.

IN WITNESS WHEREOF, I have executed my name as Secretary and have hereunto affixed the corporate seal of the above-named Corporation this 15 day of August, 2020, and do hereby certify that the foregoing is a true record of a resolution duly adopted at a meeting of the Board of Directors of the Corporation and that said meeting was held in accordance with state law and the Bylaws of the Corporation, and that the resolution is now in full force and effect without modification or rescission.

(Corporate Seal) Secretary of the Corporation

By: _____



Luis Villalba

(Print Secretary's Name)

Five12
Painting & Remodeling

EXHIBIT C

PUBLIC RECORD DECLARATION OR CLAIM OF EXEMPTION

As a bidder or proposer, any document you submit to Alachua County may be a public record and be open for personal inspection or copying by any person. In Florida 'public records' are defined as all documents, papers, letters, maps, books, tapes, photographs, films, sound recordings, data processing software, or other material, regardless of the physical form, characteristics, or means of transmission, made or received pursuant to law or ordinance or in connection with the transaction of official business by any agency. Section 119.011, F.S. A document is subject to personal inspection and copying unless it falls under one of the public records exemptions created under Florida law. Please designate what portion of your bid or proposal, if any, qualifies to be exempt from inspection and copying:

(Execute either section I. or II, but not both; bidder may not modify language)

I. NO EXEMPTION FROM PUBLIC RECORDS LAW

No part of the bid or proposal submitted is exempt from disclosure under the Florida public records law, Ch. 119, F.S.

Bidder's Signature: _____



Date: _____

08-15-2020

--- OR ---

II. EXEMPTION FROM PUBLIC RECORDS LAW AND AGREEMENT TO INDEMNIFY AND DEFEND ALACHUA COUNTY

The following parts of the bid or proposal submitted are exempt from disclosure under the Florida public records law because: (list exempt parts and legal justification. i.e. trade secret):

By claiming that all or part of the bid or proposal is exempt from the public records law, the undersigned bidder or proposer agrees to protect, defend, indemnify and hold the County, its officers, employees and agents free and harmless from and against any and all claims arising out of a request to inspect or copy the bid or proposal. The undersigned bidder or proposer agrees to investigate, handle, respond to, provide defense (including payment of attorney fees, court costs, and expert witness fees and expenses up to and including any appeal) for and defend any such claim at its sole cost and expense through counsel chosen by the County and agrees to bear all other costs and expenses related thereto, even if they (claims, etc.) are groundless, false, or fraudulent.

Bidder's Signature: _____

Date: _____

EXHIBIT D

Small Business Enterprise (SBE) Program Participation Form

BID NUMBER: 21-32 Rebid Annual Painting Services

OPTION 1

I certify that our Company is an Alachua County Certified Small Business Enterprise (SBE) registered prior to the Bid opening.

Circle One:

Yes (If yes, complete and sign the last page of this Exhibit)

☒ No (If No, proceed to Option 2).

OPTION 2

I certify that our Company will perform ALL work and that no subcontractors will be utilized for this bid.

Circle One:

☒ Yes (If yes, complete and sign the last page of this Exhibit)

No (If No, proceed to Option 3.)

EXHIBIT D

BID NUMBER: «21-32 Rebid Annual Painting Services

OPTION 3

SBE Participation. I certify that our Company has contacted the Alachua County's Certified SBEs listed below. I state that the following information regarding SBE Subcontractors is true and correct to the best of my knowledge and belief.

Alachua County has adopted a 15% SBE participation goal and policies which encourage participation of Small Business Enterprises (SBE) in the provision of labor, time, supplies, services or construction items of any kind materials.

SBEs are located in the Alachua County Small Business Enterprise Directory.

Subcontractor (any business entity holding a subcontract with the prime vendor) services are defined as, "a contract with another business entity that obtains labor, time, supplies, services or construction items of any kind."

Vendors submitting bids under this solicitation are to identify the intended SBE subcontractors. These SBEs have agreed to perform the work for the total dollar value and percentage of the bid set forth below.

If SBE subcontractors are not utilized and listed below or if option 1 or 2 was not chosen, you must proceed to Option 4 and document your Good Faith Effort.

SBE Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

SBE Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

SBE Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

EXHIBIT D

BID NUMBER: 21-32 Rebid Annual Painting Services

OPTION 4

SBE Good Faith Effort. To be considered responsive all Vendors should have SBE Participation or demonstrate a good faith effort to utilize SBE subcontractors. If option 1, 2 or 3 was not chosen the Vendor should complete the section below substantiating compliance with good faith effort requirements.

In accordance with Section 22.11-207, of the Alachua County Procurement Code, I have solicited and received responses from the following Alachua County certified SBE companies. (The SBE vendor's response should be recorded in the section below.)

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

Must be completed by. SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

Must be completed by. SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

Must be completed by. SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

Must be completed by. SBE Response when contacted: _____

Name of SBE Company: _____

Date SBE Contacted: _____

SBE Contact Name and Phone #: _____

Must be completed by. SBE Response when contacted: _____

EXHIBIT D

BID NUMBER: 21-32 Rebid Annual Painting Services

I as the undersigned Vendor certify that I have completed one of the option(s) below (Circle One):

OPTION 1

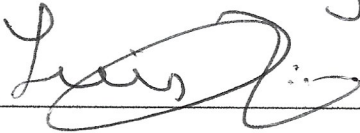
OPTION 2

OPTION 3

OPTION 4

If you are unable to certify that, you have completed to the best of your knowledge and belief OPTION 1, OPTION 2, OPTION 3 or OPTION 4, CALL (48 hours prior to bid opening) Procurement at 352.374.5202, for direction.

Vendor Name: Five12 Painting-Remodeling Date: 08-15-2020

Signature:  Title: Director

Printed Name: Luis Villalba

EXHIBIT E

ALACHUA COUNTY GOVERNMENT MINIMUM WAGE (GMW) FORM

Bid 21-32 Rebid Annual Painting Services


The undersigned certifies that all employees, contracted and subcontracted, completing services as part of this Bid/RFP are paid, and will continue to be paid, in accordance with Chapter 22, Article 12 of the Alachua County Code.

Please mark the appropriate box below that applies to how you pay your employees:

- ☒ Employees involved with Alachua County projects are paid a minimum of \$14.50 hourly or the current prevailing wage and are provided health benefits?
- ☐ Employees involved with Alachua County projects are paid a minimum of \$16.50 hourly or the current prevailing wage but are not provided health benefits?

Bidder: Luis Villalba Company: Five12 Painting-Remodeling

Address: 1436 Kurume Ct. Orlando. FL 32818

Authorized Signature:  Title: Director

Clearly Print Name: Luis Villalba

Phone: 551-2219062 Fax: Date: 08-15-2020

Email Address: info@five12painting.com

EXHIBIT F

DRUG FREE WORKPLACE

Florida Statute , Section 287.087 states that whenever two or more bids, proposals, or replies that are equal with respect to price, quality, and service are received by the state or by any political subdivision for the procurement of commodities or contractual services, a bid proposal, or reply received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process

The undersigned vendor in accordance with §287.087, Florida Statute hereby certifies that


Five12 Painting-Remodeling LLC

Name of Business

Does:

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

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



Bidder's Signature

08-15-2020

EXHIBIT G

Proposed Subcontractors (Non-Small Business Enterprise) Form

BID NUMBER: 21-32 Rebid Annual Painting Services

This form is for all Non-Small Business Enterprise subcontractors being utilized on this project that are not included on Exhibit B.

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

Name of Contractor: _____

Address: _____

Scope of Work to be Performed: _____

Total \$ Value: \$ _____ % of Total BID/RFP: _____ %

If additional space is required for your subcontractor listing, make copies of this **Exhibit G** and submit with you bid package.

EXHIBIT H

BIDDER'S QUESTIONNAIRE

Bidder's Name: Five12 Painting - Remodeling LLC

Bidder's Address: 1436 Kurume Ct. Orlando, FL Phone: 551-2219062

Number of years in this type of service? 10 Number of years licensed in Alachua County: 0

Number of employees "ON THE JOB" each week: 10 Number of employees "ON CALL" each week: 10

Will you subcontract any part of this work: Yes ☐ No ☒

If so, give details:

List all major equipment which will be available upon commencement of the agreement to perform the required service: (4) Titan Sprayers 440, (2) Graco Sprayer 5900, (3) Pressure Washer 4000 PSI
(2) Cargo VAN, (2) works Trucks.

Do you currently hold any municipality contracts: ☒ Yes ☐ No

If so, please indicate below:

Polk County, Florida - Annual Industrial Painting Services
No. 20-798

List three references of firms receiving similar service to that requested in this bid (comparable facility size):

- 1) Firm: Brevard County Facilities Phone: 321-6332050
Contact Person: Haymond, Doug
- 2) Firm: Pasco County Phone: 727-8478194 ext 8425
Contact Person: Stephanie Nunn
- 3) Firm: Marion County Board of County Commissioners Phone: 352-6718444
Contact Person: Gabrielle Bell

Are your employees screened by: (indicate below)

- 1) Polygraph
- ☒ 2) General Interview
- ☒ 3) Background Investigation
- 4) Police Record Check
- 5) Additional

Have any leases, contracts or agreements for services held by your firm ever been canceled or terminated before the end of the term by either party: Yes ☐ No ☒. If the answer is yes, state the location and circumstances on an "attachment" to this questionnaire.

What constitutes your normal business days and working hours: (8) Hrs

Describe below, your firm's operational plan for providing the services under this agreement:

- Schedule of work, execution, Delivery Job
- All the requirements of the Alachua County.

The undersigned swears to the truth and accuracy of all statements and answers contained herein:

Date: 08-15-2020

DATE: 08-15-2020 AUTHORIZED SIGNATURE: _____

A handwritten signature in black ink, appearing to be "Luis", written over a horizontal line.

Five12
Painting & Remodeling

RESPONSIBLE AGENT FORM

RESPONSIBLE AGENT: Lois Villalba

ADDRESS: 1436 Kurome Ct. Orlando. FL. 32818

PHONE NO.: 407-881 9899

FAX NO.: _____

EMAIL ADDRESS: Five12painting@gmail.com

ALTERNATE RESPONSIBLE AGENT: Armando Brocho

ADDRESS: 911 Middlebrook Ave. Orlando FL 32817

PHONE NO.: 551-2219062

FAX NO.: _____

EMAIL ADDRESS: info@five12painting.com

SIGNED: Justin DATE: 08-15-2020



Alachua County Budget and Fiscal Services Procurement

Larry M. Sapp, CPPB
Procurement Manager

Darryl R. Kight, CPPB
Procurement Supervisor

July 30, 2020

RE: Addendum #1
Bid 21-32 Rebid Annual Painting Services

Dear Sir/Madam:

Please be aware of the following clarifications regarding the above referenced Bid:

QUESTIONS & ANSWERS

Q #1: Can you provide me with the Award Document information for FR 19-32 Annual Painting Services?

A #1: See attached FR 19-32 Annual Painting Services

Q #2: Could you provide me with the bid info of the awardees?

A #2: See attached submittals

Q #3: Can I also get the bid please?

A #3: See attached BID 19-32 Annual Painting Services

NOTE: You should acknowledge receipt of this addendum on your Bid Form.

End of Addendum # 1

Sincerely,

Markisha Boykin

Markisha Boykin
Procurement Agent

MB/bf





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/15/2020

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 CCMSI c/o CLEAR SPRING PROPERTY & CASUALTY COMPANY 2 East Main Street Ste 208 Danville, IL 61832	CONTACT NAME: Brooke Kuemmerle PHONE (A/C, No, Ext): (800)-252-5059 1174 FAX (A/C, No): E-MAIL ADDRESS: bkuemmerle@ccmsi.com																					
INSURED OCMI III, INC. DBA PEOPAYGO LCF FIVE12 PAINTING & REMODELING LLC 1436 Kurume Court Orlando, FL 32818	<table border="1"><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>CLEAR SPRING PROPERTY & CASUALTY COMPANY</td><td>15563</td></tr><tr><td>INSURER B:</td><td></td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	CLEAR SPRING PROPERTY & CASUALTY COMPANY	15563	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																				
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INSURER B:																						
INSURER C:																						
INSURER D:																						
INSURER E:																						
INSURER F:																						

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <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 \$ \$
	AUTOMOBILE LIABILITY <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) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	X	WCSBK3300010002	2/21/2020	1/1/2021 X 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)

20-32 Annual Painting Services

CERTIFICATE HOLDER**CANCELLATION**Alachua County Board of County Commissioners
Facilities Management
12 SE 1ST Street, Gainesville, FL 32601

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

Brooke Kuemmerle

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/15/2020

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 RCL Insurance Services Corp dba Univista Insurance 9251 W. Flagler Street #B102 Miami FL 33172		CONTACT NAME: Yadira Carrazco PHONE (A/C, No, Ext): (305) 507-2188 FAX (A/C, No): (305) 229-0500 E-MAIL ADDRESS: rhorta@univistainsurance.com	
INSURED FIVE12 PAINTING & REMODELING LLC 1436 Kurume Ct ORLANDO FL 32818		INSURER(S) AFFORDING COVERAGE INSURER A: NAUTILUS INSURANCE C/MACNEILL GROUP INSURER B: NAUTILUS INSURANCE C/MACNEILL GROUP INSURER C: INSURER D: INSURER E: INSURER F:	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y		APP17317114	05/28/2020	05/28/2021	EACH OCCURRENCE \$ \$1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ \$100,000						
	MED EXP (Any one person) \$ \$5,000						
	PERSONAL & ADV INJURY \$ \$1,000,000						
							GENERAL AGGREGATE \$ \$2,000,000
							PRODUCTS - COMP/OP AGG \$ \$2,000,000
							\$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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	Y		UAC006511246	06/05/2020	06/05/2021	COMBINED SINGLE LIMIT (Ea accident) \$ \$1,000,000
	BODILY INJURY (Per person) \$						
	BODILY INJURY (Per accident) \$						
	PROPERTY DAMAGE (Per accident) \$						
							\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$	Y		AFL25870207	05/28/2020	05/28/2021	EACH OCCURRENCE \$ \$2,000,000
	AGGREGATE \$ \$2,000,000						
	\$						
	\$						
							PER STATUTE OTH-ER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

20-32 Annual Painting Services

CERTIFICATE HOLDER**CANCELLATION**

Alachua County Board of County Commissioners
Facilities Management
12 SE 1ST Street, Gainesville, FL 32601

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
YADIRA CARRAZCO

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FIVE12 PAINTING & REMODELING, LLC

Has Been Certified As A
MINORITY BUSINESS ENTERPRISE

Approved Lines Of Business:

**INDUSTRIAL, COMMERCIAL,
RESIDENTIAL, EXTERIOR AND
INTERIOR PAINTING SERVICES**

This certificate is valid:

June 2020 through June 2021

Sheena Ferguson

Sheena Ferguson, Manager
June 21, 2020

Orange County Business Development Division
P.O. Box 1393
Orlando, Florida 32802-1393
407-836-7345





Certificate of Achievement

The NACE International Institute Recognizes

Luis David Villalba

As a Certified

NACE Coating Inspector Level 1



Expires

June 24, 2023

Cert No.82874


Executive Director
NACE International Institute

BID SUBMITTAL LABEL

Company Name: Five12 Painting & Remodeling LLC
Business Address: 1436 Kurume Ct
City/State/Zip: Orlando ,Florida, 32818

Five12
Painting & Remodeling

☐ Check Here If Submitting a "No Bid"
(No Bid Form Enclosed)

HAND DELIVER OR MAIL TO

21-32 Rebid Annual Painting Services

**Alachua County Division of
County Administration
Building 12 SE 1st Street
Gainesville, Florida,
32601-6983**

Quote Number: 21-32

Due Date: 08/19/2020

PART D – BIDDERS CHECK LIST

Bidders may use the boxes to the left to check off items when completed.

The checklist is intended as a reminder for certain important items and is not necessarily a complete list of what must be included in your BID submission.

- ☒ Bid Form (Remember to fill this form out completely) THIS FORM MUST BE SIGNED.
- ☒ Acknowledge all Addendum(s) issued with this solicitation. A place to check off acknowledgement is on the bid form.
- ☒ Fill out all of the exhibits as required, especially Exhibit D, Small Business Enterprise (SBE) Program Participation Form and Exhibit E Alachua County Government Minimum Wage (GMW) Form.
- ☒ Include any insurance requirements.
- ☒ ~~N/A~~ Include any bonds that may be applicable.
- ☒ Remember to post your Bid on DemandStar prior to the submittal deadline.

If you have questions concerning these items or other, sections of the bid solicitation please contact Procurement for clarification prior to submitting your bid.