ALUMINUM POP-RIVETS, FLEXSTAKE & SHURTITE BRAND DELINEATOR POSTS, GALVANIZED CHANNEL IRON POSTS, GALVANIZED SQUARE TUBING, GUARD RAIL REFLECTORS, PYRAMID CAPS, PANELS, BARRICADE SHEETING

REFLECTORS, PYRAMID CAPS, PANELS, BARRICADE SHEETING				
DESCRIPTION	SIZE FT X DIA	EST QTY	CODES	UNIT COST EACH
BLIND ALUMINUM POP RIVETS, 3/16" x 3/8" GRIP RANGE, #66, MALE SMALL HEAD	3/16 X 1/2 (Grip Range)	5000	N/A	NoBio
DELINEATOR POST, GROUND MOUNT, WHITE, FLEXSTAKE BRAND, HD, NO SUB	4 FT HIGH	25	N/A	12051
DELINEATOR POST, GROUND MOUNT, YELLOW, FLEXSTAKE BRAND, HD, NO SUB	4 FT HIGH	25	N/A	#5021
DELINEATOR POST, SURFACE MOUNT WITH BASE, WHITE, FLEXSTAKE BRAND, HD, NO SUB	4 FT HIGH	25	N/A	12431
DELINEATOR POST, SURFACE MOUNT WITH BASE, YELLOW, FLEXSTAKE BRAND, HD, NO SUB	4 FT HIGH	25	N/A	#2431
DELINEATOR POST, GROUND MOUNT, WHITE, SHUR- TITE SHUR-FLEX BRAND, HD, NO SUB	4 FT HIGH	25	N/A	\$4100
DELINEATOR POST, GROUND MOUNT, YELLOW, SHUR- TITE SHUR-FLEX BRAND, HD, NO SUB	, 4 FT HIGH	25	N/A	\$4100
DELINEATOR POST, SURFACE MOUNT WITH BASE, WHITE, SHUR-TITE SHUR-FLEX BRAND, HD, NO SUB	4 FT HIGH	25	N/A	\$4100
DELINEATOR POST, SURFACE MOUNT WITH BASE, YELLOW, SHUR-TITE SHUR-FLEX BRAND, HD, NO SUB	4 FT HIGH	25	N/A	\$4100
3" DIAMETER MOUNTED CRYSTAL GUARDRAIL REFLECTORS/WINGED-PLASTIC, CLEAR/WHITE		500	GR-1C	No BiD

Acknowledge Receipt of Addendum(s) (if applicable #1 Yes No #2 Yes No #3 Yes No #4 circle): Yes No

Bidder: FloRiDA PLANSCOR INC.	Compan y:
Address	
: 6683 Stuart AVE, JACKSONVIllE,	F1 32254
Authorized Signature:	Title: GOVERNMENT SHES & BIDS
Clearly Print	
Signature: ANThony KOBBINS	Title: JONERNMENT SHESE BIOS
PHONE: (904) 783-3302 FAX: (904) 783-02	DAT
Email Address: ANTHONY. ROBBINS CFITEANSCOR	com

BID FORM

BID NUMBER:

20-15 Annual Purchase of Sign Material

BID OPENING DATE:

2:00 pm, Wednesday, June 5, 2019

PLACE OF BID OPENING:

Alachua County Division of Purchasing, 3rd Floor

County Administration Building

12 SE 1st Street

Gainesville, Florida, 32601-6983

Vendor: Florida Thanscor Ix Location: Acksonville

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE REFLECTIVE (DG3) 4000 SERIES, PS, 'NO SUB'				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
ALL WAY	18X6	5	R1-3P	NO 300
ADVISORY SPEED PLATE (NO SPEED)	18 X 18	20	W13-1	しんその
ADVISORY SPEED PLATE 15 MPH	18 X 18	35	W13-1	70 B O
ADVISORY SPEED PLATE 20 MPH	18 X 18	15	W13-1	NG BÍO
ADVISORY SPEED PLATE 25 MPH	18 X 18	20	W13-1	NO BID
ADVISORY SPEED PLATE 30 MPH	18 X 18	20	W13-1	NO BID
ADVISORY SPEED PLATE 35 MPH	18 X 18	35	W13-1	NOBO
ADVISORY SPEED PLATE 40 MPH	18 X 18	20	W13-1	NO BID
ADVISORY SPEED PLATE 45 MPH	18 X 18	35	W13-1	NO BID
AIRPORT SYMBOL	24 X 24	5	I-5	NO B(0
ALACHUA COUNTY ROUTE MARKER	24	75	M1-6	NO BOD
ALACHUA COUNTY ROUTE MARKER	36	75	M1-6	NO BID

Vendor: Floring Transcor NC Location: Jacusonville

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE REFLECTIVE (DG3) 4000 SERIES, PS, 'NO SUB'				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
BEGIN RIGHT TURN LANE YIELD TO BIKES	36 X 30	5	R4-4	No Zio
BICYCLE LANE DESIGNATION	30 X 24	5	R3-17	NB BID
CATTLE CROSSING SYMBOL	30 X 30	5	W11-4	ND BID
CROSS ROAD SYMBOL	30 X 30	25	W2-1	ND 810
DEAD END	24 X 24	20	W14-1	NO BID
DEAD END	36 X 8	35	W14- 1AR	NO RID
DEAD END	36 X 8	35	W14- 1AL	120 B10
DIRECTION GUIDANCE MARKER, CHEVRON	18 X 24	50	W1-8	NO BID
DIVIDED HIGHWAY SYMBOL	24 X 18	10	R6-3	NOBO
DO NOT BLOCK INTERSECTION	24 X 30	5	R10-7	NA BID
DO NOT ENTER	30 X 30	15	R5-1	ND 310
DOWNWARD POINTING ARROW (AT CROSSING)	24 X 12	25	W16-7p	NO BID
DUCK CROSSING SYMBOL	30 X 30	5	W11-12	NO BID
END SCHOOL ZONE	24 X 30	20	S5-2	NO BID
EQUESTRIAN (SYMBOL)	30 X 30	10	W11-7	NO BID
FIRE STATION	30 X 30	20	W11-8	NO BID
FLORIDA ROUTE MARKER	24 X 24	20	FTP-28	NO BID
FLORIDA ROUTE MARKER	30 X 24	25	FTP-28	NO BID
FUTURE THRU STREET (black on white)	24 X 30	20	N/A	ND BOD
GOLF CART CROSSING (SYMBOL)	36 X 36	5	FTP-39	NC BID
INTERSTATE SHIELD 75	24	5	M1-1	NO BID
JCT	21 X 15	25	M2-1	NOBID
KEEP RIGHT SYMBOL	24 X 30	5	R4-7	NO BID

Vendor: Floreida TRANSCOR Ix Location: Jackson Ville

				
KEEP RIGHT, WITH NO ARROW	24 X 30	5	R4-7A	NO 310
LARGE ARROW	48 X 24	5	W1-6	NO BID
LARGE DOUBLE ARROW	48 X 24	10	W1-7	MO BO
LEFT CURVE	30 X 30	25	W1-2L	NO BID
LEFT LANE MUST TURN LEFT	30 X 30	5	R3-7L	NO 300
LEFT REVERSE CURVE	30 X 30	10	W1-4L	NO BO
LEFT REVERSE TURN	30 X 30	10	W1-3L	NO BO
LEFT SIDE BRIDGE END MARKER	12 X 36	35	OM-3L	NO BID
LEFT TURN	30 X 30	20	W1-1L	NO BID
LEFT WINDING ROAD	30 X 30	10	W1-5L	NO BIO
LENS, BLACK, WHITE, BLACK BORDER	30 X 30	20	R5-5B	NO Bip
LENS, BLACK, WHITE, BLACK BORDER X	24 X 30	25	R11-11	NO BO
LENS, BLUE / YELLOW	21 X 15	25	M6-1	70 B10
LENS, WHITE, BLACK BORDER	24 X 24	10	R5-5B	70 B10
LENS, YELLOW, BLACK BORDER	24 X 24	15	W41-1	10 R10
LENS, YELLOW, BLACK BORDER	30 X 30	50	W41-1	No Bip
LIMITED SIGHT DISTANCE	30 X 30	15	W14-4	No Bid
LOW VEHICLE MAY DRAG ON RR TRACKS (SYMBOL)	36 X 36	5	FTP-40	NO B10
NARROW BRIDGE SYMBOL	30 X 30	20	W5-2A	NUBED
NO "U" TURN SYMBOL	30 X 30	5	R3-4	NB BIA
NO DUMPING	18 X 24	20	R10-11	NO B10
NO LEFT TURN SYMBOL	24 X 24	5	R3-2	No BID
NO OUTLET	24 X 24	35	W14-2	No BID
NO OUTLET	36 X 8	35	W14- 2AR	NO BIO

Vendor: Florida Transcor lak Location: Jacksonville

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE REFLECTIVE (DG3) 4000 SERIES, PS, 'NO SUB'				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
NO OUTLET	36 X 8	35	W14- 2AL	NO 810
NO PARKING ANYTIME	18 X 24	35	R7-1	N 30
NO PARKING HERE TO CORNER	18 X 24	25	R7-11	Nh BIO
NO RIGHT TURN SYMBOL	24 X 24	5	R3-16	Nh BUD
NO TRUCKS SYMBOL	24 X 24	10	R5-2	No Rio
ONE WAY LEFT	18 X 24	10	R6-2L	NO BID
ONE WAY LEFT	36 X 12	5	R6-1L	NO BID
ONE WAY RIGHT	36 X 12	5	R6-1R	NO 300
ONE WAY RIGHT	18 X 24	5	R6-1R	NO BID
PARKING BY DISABLED PERMIT ONLY	12 X 18	25	R7-8- FL	NOBID
PAVEMENT ENDS SYMBOL	30 X 30	5	W8-3A	No Bio
PLAYGROUND SYMBOL	36 X 36	5	W15-1	NO RID
PREFERENTIAL BIKE LANE (ENDS)	30 X 12	10	R3-17b	No Ba
RAILROAD ADVANCED WARNING	30	10	W10-1	No 30
RAILROAD ADVANCED WARNING (CROSSROAD)	30 X 30	10	W10-2	NO BID
RAILROAD ADVANCED WARNING (SIDEROAD)	30 X 30	10	W10-3	NO 8 00
SPEED REDUCTION AHEAD (NO NUMBERS IN TEXT)	36 X 36	50	W3-5	No Bio
RESERVED PARKING HANDICAP	12 X 18	25	R7-8- FL	HO RID
RIGHT CURVE	30 X 30	35	W1-2R	NO BID
RIGHT LANE MUST TURN RIGHT	. 30 X 30	5	R3-7R	N 210
RIGHT REVERSE CURVE	30 X 30	5	W1-4R	no Bo
RIGHT REVERSE TURN	30 X 30	5	W1-3R	Nh Bio
RIGHT SIDE BRIDGE END MARKER	12 X 36	50	OM-3R	NO BID

Vendor: Floripa legiscol INC Location: Jacksonville

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE REFLECTIVE (DG3) 4000 SERIES, PS, 'NO SUB'				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
RIGHT TURN	30 X 30	10	W1-1R	No BID
RIGHT WINDING ROAD	30 X 30	10	W1-5R	No 1310
ROAD CLOSED	48 X 30	10	R11-2	NO BO
ROAD NARROWS	30 X 30	10	W5-1	~ RO
SCHOOL SPEED LIMIT (NO NUMBERS IN TEXT WHEN FLASHING)	24 X 48	5	S5-1	NO BID
SIDE ROAD SYMBOL	30 X 30	50	W2-2	NO BID
SIGNAL AHEAD SYMBOL	30 X 30	15	W3-3	No BID
SLIPPERY WHEN WET	30 X 30	10	W8-5	Na BID
SPEED LIMIT 20 MPH	24 X 30	10	R2-1	No 300
SPEED LIMIT 25 MPH	24 X 30	35	R2-1	No BID
SPEED LIMIT 30 MPH	24 X 30	75	R2-1	No Bio
SPEED LIMIT 35 MPH	24 X 30	25	R2-1	NO BID
SPEED LIMIT 40 MPH	24 X 30	35	R2-1	NO BID
SPEED LIMIT 45 MPH	24 X 30	35	R2-1	No BID
SPEED LIMIT 50 MPH	24 X 30	5	R2-1	No Bus
SPEED LIMIT 55 MPH	24 X 30	50	R2-1	10 B0
SPEED LIMIT BLANK (NO SPEED)	24 X 30	25	R2-1	No Bo
STOP	18 X 18	10	R1-1	No Bio
STOP	24 X 24	75	R1-1	No Bu
STOP	30 X 30	100	R1-1	No BiD

Vendor: FLORIDA [RANSCOR WC Location: Jacksonville

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE REFLECTIVE (DG3) 4000 SERIES, PS, 'NO SUB'				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
STOP	36 X 36	20	R1-1	No BID
STOP AHEAD SYMBOL	30 X 30	50	W3-1A	No Bio
STOP HERE ON RED	24 X 36	5	R10-6	No Bio
US ROUTE MARKER (NO NUMBERS)	24 X 24	10	M1-4	Na BiD
WEIGHT LIMIT (NO NUMBERS IN TEXT) TONS PER AXLE, TONS GROSS	36 X 24	5	R12-4	No Bip
WEIGHT LIMIT TON	24 X 30	10	R12-1	No BiD
YIELD	36 X 36 X 36	35	R1-2	No BiD

TRAFFIC SIGN FACES: 3M BRAND, DIAMOND GRADE FLUORESCENT (DG3) YELLOW-GREEN, 4083, PS				
DESCRIPTION	SIZE INCHES	EST QTY	CODES	UNIT COST EACH
BICYCLE SYMBOL	30 X 30	10	W11-1	No Bio
BUS STOP SYMBOL VIP	36 X 36	10	S3-1	No Bio
DOWNWARD POINTING ARROW	24 X 12	10	W16-7P	No Bio
IN STREET PEDESTRIAN CROSSING (YIELD) / STOP	12 X 36	10	R1—6/a	NoBio
LENS WITH BLACK BORDER	30 X 30	25	W41-1	No Rip
PEDESTRIAN SYMBOL	30 X 30	10	W11-2	No BiD
SCHOOL (AHEAD)	24 X 12	20	W16-9p	No Bio
SCHOOL ADVANCED	30 X 30	15	S1-1	No Bio
SCHOOL ADVANCED	36 X 36	10	S1-1	No Bio

Vendor: Florion TRANSCOR INC Location: JACUS ON VILLE

ELECTRO FILM (EC FILM): 3M BRAND, TRANSPARENT, ACRYLIC, PS, NO PUNCHINGS				
DESCRIPTION	SIZE IN X YDS	EST QTY	CODES	UNIT COST EACH
BLUE	36 X 50	2	1175	NoBio
BLUE	48 X 50	1	1175	Na Bio
BROWN	36 X 50	2	1179	No Bio
BROWN	48 X 50	1	1179	No Bio
GREEN	36 X 50	10	1177	No BiD
GREEN	48 X 50	2	1177	No 80
RED	36 X 50	2	1172	No Bio
RED	48 X 50	2	1172	No bio

EPOXY RESIN, PAINT SUPPLIES, PAINT, FLUORESCENT TRAFFIC CONES WITH REFLECTIVE 4"/6" COLLARS				
DESCRIPTION	SIZE	EST QTY	CODES	UNIT COST EACH
EPOXY RESIN ADHESIVE, PARTS A & B (SETS)	1 GAL CAN	10	N/A	#7600 1-GALPARTA 1-GALPARTS PER UNIT
DROP ON TYPE, SPHERICAL REFLECTIVE, GLASS BEADS	50 LB BAGS	25	N/A	\$23°°
PAINT, TRAFFIC ACRYLIC WATER BASE, FAST DRY, WHITE, FL DOT APPROVED. NO LEAD 12470-4	5 GAL	20	N/A	\$7188
PAINT, TRAFFIC ACRYLIC WATER BASE, FAST DRY, YELLOW, FL DOT APPROVED. NO LEAD 13109-2	5 GAL	5	N/A	\$13°°
TRAFFIC CONES, 100 % (PVC) ORANGE FLUORESCENT, FDOT, WIDE BASE, , , 12 LBS. WITH A 4 INCH AND A 6 INCH DIAMOND GRADE REFLECTIVE COLLARS (AFFIXED)	36 IN HEIGHT	200	N/A	\$1950

Vendor: Florida PRANSCOR NC Location: JACKSON VILLE

3M BRAND PRESPACING TRANSFER TAPE: SCPS-2, 'NO SUB'				
DESCRIPTION	SIZE IN X YDS	EST QTY	CODES	UNIT COST EACH
PRESPACING TRANSFER TAPE	4 X 100	20	SCPS-2	Si Si Ch
PRESPACING TRANSFER TAPE	6 X 100	25	SCPS-2	No Zia
PRESPACING TRANSFER TAPE	8 X 100	30	SCPS-2	No BiB
PRESPACING TRANSFER TAPE	12 X 100	10	SCPS-2	Nb Bip
PRESPACING TRANSFER TAPE	18 X 100	5	SCPS-2	No BiD

ROLL GOODS SHEETING: 3M BRAND, 'NO SUB', ELECTROCUT FILM 7725-12, PS, NO HOLE PUNCHINGS					
DESCRIPTION	SIZE IN X YDS	EST QTY	CODES	UNIT COST EACH	
BLACK	36 X 50	6	7725-12	No Bip	
BLACK	48 X 50	3	7725-12	No Rip	

ROLL GOODS: 3M BRAND, "NO SUB", CONSPICUITY TAPE, DIAMOND GRADE, REFLECTIVE, PS						
DESCRIPTION SIZE ST CODES COST Y CODES EACH						
RED / WHITE	2 W X 150	5	32ES	No Bio		

Vendor: Floreida Transcor INC. Location: Jacksonville

ROLL GOODS: 3M BRAND, DIAMOND GRADE (DG3) REFLECTIVE, 'NO SUB', PS					
DESCRIPTION	SIZE IN X YDS	EST QTY	CODES	UNIT COST EACH	
WHITE	8 X 50	10	4090	NO BID	
WHITE	24 X 50	5	4090	NO B(D	
WHITE	30 X 50	8	4090	No 3.10	
WHITE	36 X 50	3	4090	No Bio	
YELLOW	18 X 50	1	4092	No BiD	
YELLOW	24 X 50	3	4092	No Bia	
YELLOW	30 X 50	3	4092	No Rip	
YELLOW	36 X 50	2	4092	No BIP	
RED	18 X 50	2	4092	No Bip	

ROLL GOODS: 3M BRAND, DIAMOND GRADE (DG3) FLUORESCENT, 'NO SUB', PS					
DESCRIPTION	SIZE IN X YDS	EST QTY	CODES	UNIT COST EACH	
FLUORESCENT ORANGE	48 X 50	1	4084	J. B.O	
FLUORESCENT YELLOW-GREEN	24 X 50	1	4083	Ja Ria	
FLUORESCENT YELLOW-GREEN	30 X 50	1	4083	No Bio	
FLUORESCENT YELLOW-GREEN	36 X 50	1	4083	No Bib	

ATTENTION:

VENDOR
SHOULD
COMPLETE AND
SIGN EXHIBIT B
TO BE CONSIDERED
RESPONSIVE

Small Business Enterprise (SBE) Program Participation Form

BID NUMBER: 20-15 Annual Purchase of Sign Material

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.)



BID NUMBER: 20-15 Annual Purchase of Sign Material *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, available at: http://smallbusdir.alachuacounty.us/.

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.

Opnon 4 and document your Good Faith Effort.						
SBE Name of Contractor	SBE Name of Contractor					
Address	Address					
Scope of Work to be Performed \$(Est \$ Value)	Scope of Work to be Performed \$(Est \$ Value)					
SBE Name of Contractor Address	SBE Name of Contractor Address					
Scope of Work to be Performed \$(Est \$ Value)	Scope of Work to be Performed \$					
SBE Name of Contractor Address	SBE Name of Contractor Address					
Scope of Work to be Performed \$(Est \$ Value)	Scope of Work to be Performed \$(Est \$ Value) (Est % of Total Bid)					



BID NUMBER: 20-15 Annual Purchase of Sign Material *OPTION 4*

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

In accordance with Section 22.36, of the Alachua County Purchasing Code, I have solicited and received responses from the following Alachua County certified SBE companies. (The SBE vendor's response MUST be recorded in the section below.)

1	Name of SBE Company:		Date SBE	Contacted
SE	BE Contact Name:	Phone:	/	/
M	ust be completed by. SBE Response when contacted:		,	
2	Name of SBE Company:	\	Date SBE	Contacted
<u> </u>	BE Contact Name:	Phone:	/	/
M	ust be completed by. SBE Response when contacted:			
3	Name of SBE Company:		Date SBE	Contacted
SE	BE Contact Name:	Phone:	1	/
M	ust be completed by. SBE Response when contacted:			
4	Name of SBE Company:		Date SBE	Contacted
	BE Contact Name:	Phone:	/	/
	ust be completed by. SBE Response when contacted:		·	
5	Name of SBE Company:		Date SBE	Contacted
	BE Contact Name:	Phone:	/	/
M	ust be completed by. SBE Response when contacted:			
6	Name of SBE Company:		Date SBE Co	ntacted
SI	BE Contact Name:	Phone:	1	/
M	ust be completed by. SBE Response when contacted:			
7	Name of SBE Company:		Date SBE Co	ntacted
L	BE Contact Name:	Phone:	/	/
M	ust be completed by. SBE Response when contacted:			

OPTION 4

BID NUMBER: 20-15 Annual Purchase of Sign Material

OPTION 1

at 552.574.5202, for direction.	
Vendor Name: Florida PANSCOR NC.	Date 06/03/19
Signature And Di	Title GUERNMENT SALES & BIDS
Printed Name: Anthony Robbins	Title Government Soles & BIRS

OPTION 3

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

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) the Division of Purchasing

OPTION 2

DRUG FREE WORKPLACE

Section 22.09 Competitive Sealed Bidding of the Alachua County Purchasing Code states that in the evaluation of bids, all factors in the bidding process being equal, both as to dollar amount and ability to perform, priority will be given, first, to those vendors certifying a drug-free workplace, secondly, to certified Small Business Enterprise (SBE) bidders.

The undersigned vendor in accordance with §287.087, Florida Statute and Section 22.09 of the Alachua County Purchasing Code hereby certifies that

Floreina Pauscon Luc.
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 1893 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

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 pa 119, I	art of the bid or proposal submitted is exempt from disclosure under the Florida public records law, Ch. F.S. Date Date
	OR
II.	EXEMPTION FROM PUBLIC RECORDS LAW AND AGREEMENT TO INDEMNIFY AND DEFEND ALACHUA COUNTY
	following parts of the bid or proposal submitted are exempt from disclosure under the Florida public ds law because: (list exempt parts and legal justification. i.e. trade secret):
or pro and h The u paym and d	aiming that all or part of the bid or proposal is exempt from the public records law, the undersigned bidder oposer agrees to protect, defend, indemnify and hold the County, its officers, employees and agents free armless from and against any and all claims arising out of a request to inspector copy the bid or proposal. Indersigned bidder or proposer agrees to investigate, handle, respond to, provide defense (including ent of attorney fees, court costs, and expert witness fees and expenses up to and including any appeal) for efend any such claim at its sole cost and expense through counsel chosen by the County and agrees to bear her costs and expenses related thereto, even if they (claims, etc.) are groundless, false, or fraudulent.

TYPE "E" INSURANCE REQUIREMENTS "Vendors"

Vendors shall procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with products and materials supplied to the County.

I. COMMERCIAL GENERAL LIABILITY.

Coverage must be afforded under a per occurrence form policy for limits not less than \$1,000,000 General Aggregate, \$1,000,000 Products / Completed Operations Aggregate, \$1,000,000 Personal and Advertising Injury Liability, \$1,000,000 each Occurrence, \$50,000 Fire Damage Liability and \$5,000 Medical Expense.

II. AUTOMOBILE LIABILITY. (When Vendor Delivers to County Premises)

Coverage must be afforded including coverage for all Owned vehicles, Hired and Non-Owned vehicles for Bodily Injury and Property Damage of not less than \$1,000,000 Combined Single Limit each accident.

III. WORKERS COMPENSATION AND EMPLOYER'S LIABILITY. (While Vendor's Employee(s) are on County Premises)

- A Coverage to apply for all employees at STATUTORY Limits in compliance with applicable state and federal laws; if any operations are to be undertaken on or about navigable waters, coverage must be included for the USA Longshoremen & Harbor Workers Act.
- B Employer's Liability limits for not less than \$100,000 each accident; \$500,000 disease policy limit and \$100,000 disease each employee must be included.

IV. OTHER INSURANCE PROVISIONS.

The policies are to contain, or be endorsed to contain, the following provisions:

- A Commercial General Liability and Automobile Liability Coverages
 - The Alachua County Board of County Commissioners, its officials, employees and volunteers are to be covered as an Additional Insured as respects: Liability arising out of activities performed by or on behalf of the Vendor; products and completed operations of the Vendor; or automobiles owned, leased, hired or borrowed by the Vendor.
 - The Vendor's insurance coverage shall be considered primary insurance as respects the County, its officials, employees and volunteers. Any insurance or self-insurance maintained by the County, its officials, employees or volunteers shall be excess of the Vendor's insurance and shall be non-contributory.
- B Workers' Compensation and Employers' Liability Coverages
 - The insurer shall agree to waive all rights of subrogation against the County, its officials, employees and volunteers for losses arising from work performed by the Vendor for the County.
- C All Coverages
 - The Vendor shall provide a Certificate of Insurance to the County with a notice of cancellation. The certificate shall indicate if cover is provided under a "claims made" or "per occurrence" form. If any cover is provided under a claims made from the certificate will show a retroactive date, which should be the same date of the contract or purchase order (original if contact is renewed) or prior.

V. <u>SUBCONTRACTORS</u>

Vendors shall include all subcontractors as insured under its policies. All coverages for subcontractors shall be subject to all of the requirements stated herein.

CERTIFICATE HOLDER:

Alachua County Board of County Commissioners

The Certificate of Insurance must contain the following:

Department Contact: Brian Singleton

Department:

Public Works

Phone:

352.374.5245

Email:

bsingleton@alachuacounty.us

Bid:

20-15 Annual Purchase of Sign Material



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/4/2019

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(les) 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				CONTACT Connor Riley					
Arthur J. Gallagher Risk Management Services, Inc.			PHONE (A/C, No, Ext): 713-935-8809 (A/C, No):						
1900 West Loop South, Suite 1600 Houston TX 77027			E-MAIL ADDRESS: CONNOr_r						
11000011 17(71027							NAIC#		
			INSURER A: Traveler				25666		
INSURED CENTSUP-02				INSURER B : Charter	-			25615	
Transline Industries, Inc.				INSURER C: Phoenix Insurance Company				25623	
) Jesse Street and Prairie, TX 75051				INSURER D: Travelers Casualty Insurance Co of America				19046
•.•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				INSURER E :				
					INSURER F:				
CO	VERAGES CER	TIFIC	ATE	NUMBER: 1360455160			REVISION NUMBER:		
IN EX	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY REERTIFICATE MAY BE ISSUED OR MAY INCLUSIONS AND CONDITIONS OF SUCH	QUIR PERT. POLIC	EMEN AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF ANY CONTRACT ED BY THE POLICIE BEEN REDUCED BY	OR OTHER DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESPEC	OT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	8	
С	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			6305H152581PHX18	9/8/2018	9/8/2019	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000 \$ 100,0	····
							MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$ 1,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000	
	POLICY PRO- X LOC						PRODUCTS - COMP/OP AGG	\$ 2,000	
	OTHER:							\$	
В	AUTOMOBILE LIABILITY			BA5H15258118	9/8/2018	9/8/2019	COMBINED SINGLE LIMIT (Ea accident)	\$1,000	,000
	X ANY AUTO						BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$	
	AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
	ASTOS SALL						(i di dobidon)	\$	
D	X UMBRELLA LIAB X OCCUR			ZUP41M6462A18NF	9/8/2018	9/8/2019	EACH OCCURRENCE	\$ 10,00	0,000
	EXCESS LIAB CLAIMS-MADE			·			AGGREGATE	\$ 10,00	0,000
	DED X RETENTION \$ 10,000			1				\$	
Α	WORKERS COMPENSATION			UB5J16227A	9/8/2018	9/8/2019	X PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		1			E.L. EACH ACCIDENT	\$1,000	,000
	(Mandatory in NH)	N/A		· {			E.L. DISEASE - EA EMPLOYEE	\$1,000	,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000	,000
Add	RIPTION OF OPERATIONS / LOCATIONS / VEHICL litional Named Insured Schedule: Transl ; Trantex Transportation Products Of Te	line Îr	ndusti	ries, Inc.; Transline Payroll	le, may be attached if mor , Inc.; Jesse St. Hold	re space is require dings, LP; Jes	ed) se St. Management, LLC;	Florida	Transcor,
General Liability has Blanket Additional Insured as required per written contract : CG D037 04 05 and Blanket Waiver of Subrogation as required per written									
	tract:CG D4 58 07 13								
Auto Policy has Blanket Additional Insured and Blanket Waiver of Subrogation, Form #CA T3 53 02 15 Comprehensive Deductible \$1,000 Collision Deductible \$1,000 See Attached									
	RTIFICATE HOLDER				CANCELLATION				
	Alachua County Board of C	Coun	ty Co	ommissioners	SHOULD ANY OF	N DATE THE	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL E Y PROVISIONS.		

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Attn: Brian Singleton

12 SE 1st St Gainesville GL 32601 AUTHORIZED REPRESENTATIVE

AGENCY CUSTOMER ID:	CENTSUP-02
1.00 #	

ACORD

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Arthur J. Gallagher Risk Management Services, Inc.		NAMED INSURED Transline Industries, Inc. 530 Jesse Street Grand Prairie, TX 75051				
POLICY NUMBER	Grand Prairie, TX 75051					
CARRIER NAIC CODE		EFFECTIVE DATE:				
ADDITIONAL REMARKS	I					
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM	AND THE RESIDENCE OF THE PARTY				
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF	ELIABILITY IN	SURANCE				
Workers Compensation policy has Blanket Waiver of Subrogation a						
	•					



Traffic Safety Supplies & Signs

6683 Stuart Ave. Jacksonville FL. 32254

Alachua County Division of Purchasing, 3rd Floor
County Administration Building
12 SE 1st Street, Gainesville Florida 32601-6983

20-15 Annual Purchase of Sign Material Bid Opening: 2:00 pm, Wednesday, June 5, 2019