

BID COVER PAGE



Procurement Division
200 E University Avenue, Rm 339
Gainesville, FL 32601

(352) 334-5021(main)

Issue Date: 9/3/21

INVITATION TO BID: #PWDA-220015-MS
SW 62nd Blvd Resurfacing

PRE-BID MEETING: Non-Mandatory Mandatory N/A Includes Site Visit

DATE: September 17, 2021 **TIME:** 10:00 am

LOCATION: Roberta Leslie Kline Conference Room 16, City Hall, 200 East University Avenue, Gainesville, FL 32601

QUESTION SUBMITTAL DUE DATE: September 27, 2021 at 3:00 pm

DUE DATE FOR UPLOADING BID RESPONSE: October 4, 2021 at 3:00PM

SUMMARY OF SCOPE OF WORK: Milling & resurfacing of roadway, construction of sidewalks, ADA ramps, bus stops, and mid-block crosswalks along SW 62nd Blvd between SW 20th Ave and Newberry Road.

For questions relating to this bid, contact: **Diane Holder or Melanie Sowers**
holderds@cityofgainesville.org, sowersma@cityofgainesville.org

Bidder is not in arrears to City upon any debt, fee, tax or contract: Bidder is NOT in arrears Bidder IS in arrears

Bidder is not a defaulter, as surety or otherwise, upon any obligation to City: Bidder is NOT in default Bidder IS in default

Bidders who receive this bid from sources other than City of Gainesville Procurement Division or DemandStar MUST contact the Procurement Division prior to the due date to ensure any addenda are received in order to submit a responsible and responsive offer. Uploading an incomplete document may deem the offer non-responsive, causing rejection.

ADDENDA ACKNOWLEDGMENT: Prior to submitting my offer, I have verified that all addenda issued to date are considered as part of my offer: Addenda received (list all) # 1&2

Legal Name of Bidder: Watson Construction Company, LLC DBA:

Authorized Representative Name/Title: Douglas Dabney-

Partner _____ E-mail Address:

doug@watsonconstruct.com FEIN: 80-0219140

Street Address: 940 NW 247th Drive Newberry, FL 32669

Mailing

By signing (if different) I acknowledge I have read and understand, and my business complies with all General Conditions and requirements set forth herein; and,

Telephone: (352) 472-9157 Fax: (352-472-2520)

Bid is in full compliance with the Specifications.

Bid is in full compliance with specifications except as specifically stated and attached hereto.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: 

SIGNER'S PRINTED NAME: Douglas Dabney

DATE: 10/4/2021

This page must be completed and uploaded to DemandStar.com with your Submittal.

PART 4 – BID FORM

Bid # PWDA-220015-MS SW 62nd Blvd Resurfacing

Date: 10/04/2021

The bidder hereby declares that he has examined the site of the work and informed himself fully in regard to all conditions pertaining to the place where the work is to be done, and that he has examined the plans, specifications, agreement and all documents related to the above referenced solicitation for the work and comments hereto attached. The Bidder further declares that the only persons, company or parties interested in this Bid or the Agreement to be entered into, as principals, are named herein; that this Bid is made without connection with any other person, company or parties making a Bid; and it is in all respects fair and in good faith and without collusion or fraud.

The Bidder proposes and agrees, if this Bid is accepted, to contract with City of Gainesville, Florida, through the City Commission, , in the form of Agreement specified, to furnish all necessary materials, equipment, machinery, tools, apparatus, means of transportation, labor and service necessary to complete the work covered by the Bid Solicitation for: <Insert Bid Number>SW 62nd Blvd Resurfacing to furnish the prescribed Performance and Payment Bond for not less than one hundred percent (100%) of the bid price; and to furnish the required evidence of the specified insurance.

The undersigned agrees to commence work as set forth in the Notice to Proceed and to reach substantial completion within 80 Working Days from the date on which work commences with final completion within 30 calendar days thereafter.. If the Contractor fails to complete the work within the specified time, the Contractor agrees to pay the City liquated damaged in the amounts specified in the Agreement.

Attached is a list of similar projects and a list of Subcontractors as covered in the Instructions to Bidders.

The Bidder agrees to accept in full compensation for each item the prices named in the schedule incorporated herein and attached as "Bid Schedule". The Bidder understands that the quantities shown on the "Bid Schedule" are approximate only and subject to increase or decrease. Should they be increased or decreased, work will be performed at the unit price bid herein. Actual quantities will be determined upon completion of the work.

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4.1 BID FORM/PAY ITEM LIST

ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
1	MOBILIZATION	1	LS	353,670	353,670
2	MAINTENANCE OF TRAFFIC	1	LS	176,801	176,801
3	PREVENTION, CONTROL & ABATEMENT OF EROSION & WATER POLLUTION	1	LS	135,000	135,000
4	CLEARING & GRUBBING	1	LS	102,517	102,517
5	MOWING	50	AC	100.00	5,000
6	GRADING	1	LS	132,520	132,520
7	BORROW	500	CY	35.00	17,500
8	SUBSOIL EXCAVATION	100	CY	50.00	5,000
9	TYPE B STABILIZATION	6900	SY	12.00	82,800
10	4" LIMEROCK BASE, LBR 100	6300	SY	20.00	126,000
11	MILLING EXISTING ASPHALT PAVEMENT, 3" AVG DEPTH	31,000	SY	6.00	186,000
12	MILLING EXISTING ASPHALT PAVEMENT, 1 1/2" AVG DEPTH	2600	SY	12.00	31,200
13	SUPERPAVE ASPHALTIC CONC, TRAFFIC C, PG 76-22	3100	TN	135.00	418,500
14	ASPHALT CONCRETE FRICTION COURSE, TRAFFIC C, FC-12.5, PG 76-22	3300	TN	135.00	445,500

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
15	CONCRETE CLASS NS, GRAVITY WALL	13	CY	1500.00	19,500
16	INLETS, CLOSED FLUME	1	EA	5,000	5,000
17	MANHOLE, ADJUST, UTILITIES	5	EA	2,000.00	10,000
18	VALVE BOXES, ADJUST	1	EA	1,000	1,000
19	PEDESTRIAN/BICYCLE RAILING	35	LF	300.00	10,500
20	CONCRETE CURB & GUTTER, TYPE F	450	LF	75.50	33,975
21	CONCRETE CURB, TYPE D	100	LF	65.00	6,500
22	CONCRETE SIDEWALK AND DRIVEWAYS, 4" THICK	200	SY	110.00	22,000
23	CONCRETE SIDEWALK AND DRIVEWAYS, 6" THICK	375	SY	150.00	56,250
24	CONCRETE DITCH PAVEMENT, NON REINFORCED, 4"	4	SY	625.00	2,500
25	DETECTABLE WARNINGS (City Standard Brick)	600	SF	40.00	24,000
26	PERFORMANCE TURF, SOD	5425	SY	3.88	21,049
27	SIGNAL CABLE - NEW OR RECONSTRUCTED INTERSECTION, F&I	119	LF	10.00	1,190
28	SIGNAL CABLE, REMOVE - OUTSIDE OF INTERSECTION	119	LF	2.00	238
29	SINGLE POST SIGN, F&I GROUND MOUNT, UP TO 12 SF	3	AS	495.00	1,485
30	SIGN BEACON, F&I OVERHEAD MOUNT, ONE BEACON	2	AS	2,310.00	4,620

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
31	SINGLE POST SIGN, RELOCATE	7	AS	134.00	938
32	SINGLE POST SIGN, REMOVE	1	AS	55.00	55
33	SIGN PANEL, FURNISH & INSTALL OVERHEAD MOUNT, 12-20 SF	2	EA	748.00	1,496
34	SIGN PANEL, FURNISH & INSTALL OVERHEAD MOUNT, 31-50 SF	2	EA	1052.00	2,104
35	SIGN PANEL, REMOVE, 31-50 SF	2	EA	132.00	264
36	OBJECT MARKER, TYPE 2	2	EA	275.00	550
37	DELINEATOR, FLEX HIGH PERFORMANCE 48"	1	EA	198.00	198
38	THERMOPLASTIC, STANDARD, WHITE, SOLID, 12" FOR CROSSWALK AND ROUNDABOUT	1400	LF	5.50	7,700
39	THERMOPLASTIC, STANDARD, WHITE, SOLID, 18" FOR DIAGONALS AND CHEVRONS	130	LF	8.25	1072.50
40	THERMOPLASTIC, STANDARD, WHITE, SOLID, 24" FOR STOP LINE AND CROSSWALK	50	LF	11.00	550
41	THERMOPLASTIC, STANDARD, WHITE, 2-4 DOTTED GUIDELINE/6-10 GAP EXTENSION, 6"	0.1	GM	5800.00	580
42	THERMOPLASTIC, STANDARD, WHITE, MESSAGE OR SYMBOL	9	EA	715.00	6,435
43	THERMOPLASTIC, STANDARD, WHITE, ARROW	31	EA	127.00	3,937
44	THERMOPLASTIC, STANDARD, YELLOW,	1425	LF	8.25	11,756.25

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
	SOLID, 18" FOR DIAGONAL OR CHEVRON			see	previous
45	THERMOPLASTIC, PREFORMED, WHITE, SOLID, 24" FOR CROSSWALK	475	LF	22.00	10,450
46	THERMOPLASTIC, STANDARD-OTHER	3.0	GM	5808.00	17,424
47	THERMOPLASTIC, STANDARD-OTHER SURFACES, WHITE, SOLID, 8"	0.3	GM	6,680.00	2004
48	THERMOPLASTIC, STANDARD-OTHER SURFACES, WHITE, SKIP, 6", 10-30 SKIP OR 3-9 LANE DROP	0.5	GM	5808.00	2904
49	THERMOPLASTIC, STANDARD-OTHER SURFACES, WHITE, SKIP, 6", 10-30 SKIP OR 3-9 LANE DROP	0.1	GM	5808.00	580.80
50	THERMOPLASTIC, STANDARD-OTHER SURFACES, YELLOW, SOLID, 6"	3.5	GM	5808.00	20,328
51	THERMOPLASTIC, REMOVE EXISTING THERMOPLASTIC PAVEMENT MARKINGS, WATERBLAST ONLY	100	SF	110.00	11,000
TOTAL BID AMOUNT (BASE BID)					2,540,141.55

ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
52	MOBILIZATION	1	LS	10,592	10,592
53	MAINTENANCE OF TRAFFIC	1	LS	11,296	11,296

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
54	PREVENTION, CONTROL & ABATEMENT OF EROSION & WATER POLLUTION	1	LS	6500	6500
55	CLEARING & GRUBBING	1	LS	8500	8500
56	GRADING	1	LS	12,500	12,500
57	CONCRETE CLASS NS, GRAVITY WALL	7.0	CY	1,500.00	10,500
58	PEDESTRIAN/BICYCLE RAILING	59	LF	300.00	17,700
59	CONCRETE CURB & GUTTER, TYPE F	98	LF	75.50	7,399
60	CONCRETE SIDEWALK AND DRIVEWAYS, 4" THICK	5	SY	110.00	550
61	CONCRETE SIDEWALK AND DRIVEWAYS, 6" THICK	95	SY	150.00	14,250
62	DETECTABLE WARNINGS	107	SF	40.00	4,280
63	PERFORMANCE TURF, SOD	120	SY	4.00	480
64	SINGLE POST SIGN, RELOCATE	4	AS	132.00	528
TOTAL BID AMOUNT (ALTERNATE 1)					105,075.00

ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
65	MOBILIZATION	1	LS	10,375	10,375
66	MAINTENANCE OF TRAFFIC	1	LS	22,060	22,060
67	EROSION CONTROL	1	LS	5,000	5,000

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
68	CLEARING & GRUBBING	1	LS	7,000	7,000
69	GRADING	1	LS	10,500	10,500
70	CONCRETE CLASS NS, GRAVITY WALL	65	CY	1,500.00	97,500
71	INLETS, CLOSED FLUME	2	EA	5,000.00	10,000
72	PIPE CULVERT, OPTIONAL MATERIAL, ROUND, 15" SD	17	LF	125.00	2,125
73	MITERED END SECTION, OPTIONAL ROUND, 15" SD	1	EA	1,500	1,500
74	PEDESTRIAN/BICYCLE RAILING	329	LF	300.00	98,700
75	CONCRETE CURB & GUTTER, TYPE F	15	LF	75.50	1,132.50
76	CONCRETE SIDEWALK AND DRIVEWAYS, 4" THICK	197	SY	110.00	21,670
77	CONCRETE SIDEWALK AND DRIVEWAYS, 6" THICK	113	SY	150.00	16,950
78	DETECTABLE WARNINGS	123	SF	40.00	4,920
79	PERFORMANCE TURF, SOD	153	SY	4.00	612
80	RECTANGULAR RAPID FLASHING BEACON, F & IL - SOLAR POWERED, COMPLETE SIGN ASSEMBLY	6	AS	12,215	73,290
81	SINGLE POST SIGN, F&I GROUND MOUNT, UP TO 12 SF	6	AS	374.00	2,244
82	SINGLE POST SIGN, RELOCATE	1	AS	132.00	132
83	THERMOPLASTIC, STANDARD, WHITE, SOLID, 12" FOR CROSSWALK	270	LF	5.50	1,485

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
84	THERMOPLASTIC, PREFORMED, WHITE, SOLID, 24" FOR CROSSWALK	210	LF	22.00	4,620
85	THERMOPLASTIC, STANDARD-OTHER SURFACES, YELLOW, SOLID, 6"	40	LF	1.10	44
TOTAL BID AMOUNT (ALTERNATE 2)					391,859.50
TOTAL BID AMOUNT (BASE BID + ALTERNATE 1 + ALTERNATE 2)					3,037,076.05

List of Unit Abbreviations:

SY Square Yards	GL Gallons	SD Side Drain
LS Lump Sum	MG Thousand Gallons	ED Each Day
CY Cubic Yards	GM Gross Miles	CD Cross Drain
EA Each	LF Linear Feet	AC Acre
TN Tons	NM Net Miles	RCP Reinforced Concrete Pipe
HR Hour	AS Assembly	PI Per Intersection

Note: THE CITY RESERVES THE RIGHT TO ADD OR DELETE LOCATIONS, SERVICES, ITEMS, OR MATERIALS FROM THIS CONTRACT SHOULD IT BE IN THE BEST INTEREST OF THE CITY. THE CONTRACT PRICE MAY BE ADJUSTED UPON AGREEMENT OF THE CONTRACTOR AND THE CITY'S REPRESENTATIVE AND BASED UPON BID PRICES.

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This page must be completed and uploaded with your Submittal.

DRUG-FREE WORKPLACE FORM

The undersigned bidder in accordance with Florida Statute 287.087 hereby certifies that

Watson Construction Company,LLC

(Name of Bidder)

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 the 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 bidder complies fully with the above requirements.


Bidder's Signature

10/04/2021

Date

In the event of a tie bid, bidders with a Drug Free Workplace Program will be given preference. To be considered for the preference, this document must be completed and uploaded to DemandStar.com with your Submittal.

BIDDER VERIFICATION FORM

LOCAL PREFERENCE (Check one)

Local Preference requested: YES NO

A copy of the following documents must be included in your submission if you are requesting Local Preference:

- Business Tax Receipt
- Zoning Compliance Permit

QUALIFIED SMALL BUSINESS AND/OR SERVICE DISABLED VETERAN BUSINESS STATUS (Check one)

Is your business qualified, in accordance with the City of Gainesville's Small Business Procurement Program, as a local Small Business? YES NO

Is your business qualified, in accordance with the City of Gainesville's Small Business Procurement Program, as a local Service-Disabled Veteran Business? YES NO

REGISTERED TO DO BUSINESS IN THE STATE OF FLORIDA

Is Bidder registered with Florida Department of State's, Division of Corporations, to do business in the State of Florida? YES NO (refer to Part 1, 1.5, last paragraph)

If the answer is "YES", provide a copy of SunBiz registration or SunBiz Document Number (# L08000014232)
If the answer is "NO", please state reason why: _____

DIVERSITY AND INCLUSION (Applies to solicitations above \$50,000)

Does your company have a policy on diversity and inclusion? YES NO

If yes, please attach a copy of the policy to your submittal.

Note: Possessing a diversity and inclusion policy will have no effect on the City's consideration of your submittal, but is simply being requested for information gathering purposes.

Watson Construction Company, LLC

Bidder's Name

Douglas Dabney Partner

Printed Name/Title of Authorized Representative

 Signature of Authorized Representative

10/04/2021

Date

This page must be completed and uploaded to DemandStar.com with your Submittal.

CUSTOMER HISTORY

Name of Bidder: Watson Construction Company,LLC

Provide a list of prior customers **for similar services** that your bidder has provided within the last **five (5) years**. Copy form as necessary.

Customer Name: CC Oakmont LLC	
Address: 2379 Beville Road	
City, State, Zip: Daytona Beach,FL 32119	
Point of Contact: Steve Bovid	Phone Number: 352-213-9422
E-mail:	

Customer Name: Celebration Pointe Holdings,LLC	
Address: 2579 SW 87th Drive	
City, State, Zip: Gainesville, FL 32608	
Point of Contact: Svein Dyrkolboth	Phone Number: 352-258-1572
E-mail:	

Customer Name: FDOT	
Address: 605 Suwannee Street	
City, State, Zip: Tallahassee, FL 32399	
Point of Contact: Kevin Wagoner	Phone Number: 352-281-6857
E-mail:	

Customer Name: Alachua County Public Works	
Address: 5620 NW 120th Lane	
City, State, Zip: Gainesville,FL 32653	
Point of Contact: Tim McKenzie	Phone Number: 352-231-4959
E-mail:	

Customer Name:	
Address:	
City, State, Zip:	
Point of Contact:	Phone Number:
E-mail:	

This page must be completed and uploaded to DemandStar.com with your Submittal.



CITY OF NEWBERRY

25440 W Newberry Rd, Newberry, FL 32669-0369

LOCAL BUSINESS TAX

Issued: October 01, 2021

License # 0250.1

Expires: September 30, 2022

Fee Paid: \$162.00

Business Name/Address

Local Business Tax Issued To:

WATSON CONSTRUCTION COMPANY
OFFICE
940 NW 247TH DR
NEWBERRY FL 32669-2545

WATSON CONSTRUCTION COMPANY
940 NW 247TH DR
NEWBERRY FL 32669-2545

Business Type:
CONTRACTORS


CITY CLERK

NOTE: This Local Business Tax is not transferable, POST IN A CONSPICUOUS PLACE.
This Local Business Tax becomes a receipt only when properly dated and signed.



CITY OF NEWBERRY

25440 W Newberry Rd, Newberry, FL 32669-0369

LOCAL BUSINESS TAX

Issued: October 01, 2021

License # 0250.1

Expires: September 30, 2022

Fee Paid: \$162.00

Business Name/Address

Local Business Tax Issued To:

WATSON CONSTRUCTION COMPANY
OFFICE
940 NW 247TH DR
NEWBERRY FL 32669-2545

WATSON CONSTRUCTION COMPANY
940 NW 247TH DR
NEWBERRY FL 32669-2545

Business Type:
CONTRACTORS


CITY CLERK

NOTE: This Local Business Tax is not transferable, POST IN A CONSPICUOUS PLACE.
This Local Business Tax becomes a receipt only when properly dated and signed.

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Watson Construction Company, LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
940 NW 247th Drive

6 City, state, and ZIP code
Newberry, FL 32669

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number

			-			-			
--	--	--	---	--	--	---	--	--	--

or

Employer identification number

8	0	-	0	2	1	9	1	4	0
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Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Signature of U.S. person ▶ **Joni Walsh Durden** Digitally signed by Joni Walsh Durden Date: 2021.08.18 10:53:41 -04'00'

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE UNDERGROUND UTILITY & EXCAVATION CO HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

DABNEY, DOUGLAS HALE

WATSON CONSTRUCTION COMPANY, LLC
940 NW 247TH DRIVE
NEWBERRY FL 32669

LICENSE NUMBER: CUC1225043

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

DABNEY, DOUGLAS HALE

WATSON CONSTRUCTION COMPANY, LLC
940 NW 247TH DRIVE
NEWBERRY FL 32669

LICENSE NUMBER: CGC1510498

EXPIRATION DATE: AUGUST 31, 2022

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WATSCON-01

SEGVSSHLTS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/22/2021

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
AssuredPartners, Gainesville
4880 Newberry Road, Suite 180
Gainesville, FL 32607

CONTACT NAME: Shirley Hill Shilts

PHONE (A/C, No, Ext): (352) 378-2511

FAX (A/C, No): (352) 378-9801

E-MAIL ADDRESS: Shirley.Shilts@assuredpartners.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Cincinnati Insurance Company

10677

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED

Watson Construction Company LLC
940 NW 247 Drive
Newberry, FL 32669

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
		INSD	WVD						
A	<input checked="checked" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>	EPP0605779	2/20/2021	2/20/2022	EACH OCCURRENCE	\$ 1,000,000	
		<input type="checkbox"/>	<input checked="checked" type="checkbox"/> CLAIMS-MADE				<input checked="checked" type="checkbox"/> OCCUR	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	MED EXP (Any one person)	\$ 10,000
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	PERSONAL & ADV INJURY	\$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000	
POLICY <input checked="checked" type="checkbox"/> PROJECT <input checked="checked" type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
OTHER:							EMPLOYEE BENEFIT	\$ 3,000,000	
A	<input checked="checked" type="checkbox"/> AUTOMOBILE LIABILITY	<input type="checkbox"/>	<input type="checkbox"/>	EPP0605779	2/20/2021	2/20/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
		<input checked="checked" type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/> SCHEDULED AUTOS	BODILY INJURY (Per person)	\$
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/> NON-OWNED AUTOS ONLY	BODILY INJURY (Per accident)	\$
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		\$
A	<input checked="checked" type="checkbox"/> UMBRELLA LIAB	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	EPP0605779	2/20/2021	2/20/2022	EACH OCCURRENCE	\$ 5,000,000	
		<input type="checkbox"/>	<input type="checkbox"/>				AGGREGATE	\$ 5,000,000	
EXCESS LIAB CLAIMS-MADE									
DED <input checked="checked" type="checkbox"/> RETENTION \$ 0									
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N (Mandatory in NH)							PER STATUTE	OTH-ER	
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. EACH ACCIDENT	\$	
							E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	

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

CERTIFICATE HOLDER

City of Gainesville
P O Box 490
MS 58
Gainesville, FL 32617-0490

CANCELLATION

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

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/4/2021

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 Arthur J. Gallagher Risk Management Services, Inc. 4350 W Cypress St Suite 300 Tampa FL 33607		CONTACT NAME: PHONE (A/C, No, Ext): 727-797-4190 FAX (A/C, No): 727-791-1613 E-MAIL ADDRESS: certrequests@ajg.com	
INSURED Watson Construction Company, LLC 940 NW 247th Drive Newberry, FL 32669		WATSCON-01	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Travelers Property Casualty Co of America	NAIC # 25674
		INSURER B: Zenith Insurance Company	13269
		INSURER C: Travelers Indemnity Co of America	25666
		INSURER D: The Travelers Indemnity Company of CT	25682
		INSURER E: Charter Oak Fire Insurance Company	25615
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 1276907953

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CO1J13035920	2/20/2020	2/20/2021	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
							\$
D	<input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY		8103L54373020	2/20/2020	2/20/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		CUP1J15015020	2/20/2020	2/20/2021	EACH OCCURRENCE	\$ 5,000,000
						AGGREGATE	\$ 5,000,000
							\$
B	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 checked="" type="checkbox"/> Y N/A	Z133881305	1/1/2021	1/1/2022	<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
E	Property/Inland Marine		6303N522749	2/20/2020	2/20/2021	Leased Equipment	\$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 City of Gainesville is shown as an additional insured solely with respect to general liability coverage as evidenced herein as required by written contract per Form #CG D6 04 08/13

CERTIFICATE HOLDER**CANCELLATION**

City of Gainesville
 P O Box 490
 MS 58
 Gainesville FL 32627-0490
 USA

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

Matt Doyle

RESPONSIBLE AGENT FORM

RESPONSIBLE AGENT: Douglas Dabney
ADDRESS: 940 NW 247th Drive Newberry, FL 32669
PHONE NO.: 352-472-9157
FAX NO.: 352-472-2520
EMAIL ADDRESS: doug@watsonconstruct.com

ALTERNATE RESPONSIBLE AGENT: Joni Walsh Durden
ADDRESS: 940 NW 247th Drive Newberry, FL 32669
PHONE NO.: 352-437-2224
FAX NO.: 35-472-2520
EMAIL ADDRESS: jwalsh@watsonconstruct.com

This page must be completed and uploaded to DemandStar.com with your Submittal, if the Living Wage Ordinance applies to bidder.

PROJECT MANAGER AND SUPERINTENDENT OR OWNER'S EXPERIENCE

<u>NAME AND TITLE</u>	<u>ROLE IN THIS PROJECT</u>	<u>YEARS EXPERIENCE</u>	
		TOTAL	WITH THIS FIRM
Douglas Dabney-Owner/Partner	Proj.MGR& Super	24	24
<u>RELEVANT PROJECTS</u>			
1. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
FDOT T2768 Gainesville, FL			2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input checked="" type="checkbox"/> Check if project completed with current firm	
Paving SR26 & SW 34th St- Project Manager and Superintendent			
2. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
Project 918-7905-SR26 @ Gainesville, FL NW 122nd St			2020
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input checked="" type="checkbox"/> Check if project completed with current firm	
To furnish all labor, materials, equipment and apparatus for the construction of Project No. 918-7905, NW 122nd Street and State Road 26 Intersection Modifications Project MGR			
3. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
Project# 918-7901 NW 32nd Ave -Resurfacing Newberry,FL			2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input checked="" type="checkbox"/> Check if project completed with current firm	
Resurfaced 2 miles for Alachua County-Project Manager			
4. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
Celebration Pointe - Gainesville FL			On going
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input checked="" type="checkbox"/> Check if project completed with current firm	
Earthwork and site construction with paving of 300 plus acres-Project Manager			
5. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input type="checkbox"/> Check if project completed with current firm	
6. <u>PROJECT TITLE AND LOCATION</u> (city and state)			<u>YEAR COMPLETED</u>
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE		<input type="checkbox"/> Check if project completed with current firm	

This page must be completed and uploaded to DemandStar.com with your Submittal

PROPOSED SUBCONTRACTORS FORM

Name of Bidder: Watson Construction Company,LLC

This form is for all Subcontractors being utilized on this project.

Name of Contractor: Crown Construction
Address: 11316 NW 120th Terrace Alachua,FL 32618
Scope of Work to be Performed: Concrete Ditch paving and Concrete Drive
Total \$ Value: \$ 126,101 % of Total BID/RFP: 5 %

Name of Contractor: Scherer Quality Farms Inc
Address: 17791 SE 80th St. Morriston, FL 32668
Scope of Work to be Performed: Sod
Total \$ Value: \$ 11,282 % of Total BID/RFP: .4 %

Name of Contractor: SNG Pavement Marking Inc
Address: 1104 NW 50th Ave STE A Gainesville,FL 32609
Scope of Work to be Performed: Pavement Markings
Total \$ Value: \$ 181,725.10 % of Total BID/RFP: 6 %

Name of Contractor: Cal-Tech Testing
Inc
Address: SW 62nd Blvd.
Gainesville,Fl
Scope of Work to be Performed: Testing
Total \$ Value: \$ 47,863.00 % of Total BID/RFP: 2 %

Name of Contractor: Chris Torrence Electric & Utility Inc
Address: PO Box 325 Newberry, FL 32669
Scope of Work to be Performed: Electrical
Total \$ Value: \$ 158,922 % of Total BID/RFP: 6 %

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