

# BID COVER



Procurement Division

(352) 334-5021(main)

Issue Date: April 7, 2021

## INVITATION TO BID: #REC-210040-DM

### Evergreen Cemetery Grounds Maintenance

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

DATE: April 21, 2021 TIME: 10:30 P.M.

LOCATION: Evergreen Cemetery 401 SE 21<sup>st</sup> Avenue Gainesville, FL 32641

QUESTION SUBMITTAL DUE DATE: April 28, 2021

*All meetings and submittal deadlines are Eastern Time (ET).*

**DUE DATE FOR UPLOADING BID RESPONSE:** May 10, 2021 3:00pm

#### SUMMARY OF SCOPE OF WORK:

Furnish all supervision, labor, equipment and materials for grounds maintenance at Evergreen Cemetery, 401 SE 21<sup>st</sup> Avenue, Gainesville, Florida.

For questions relating to this bid, contact: [McPhallDT@cityofgainesville.org](mailto:McPhallDT@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 & 3

Legal Name of Bidder: Wyatt John Collins

DBA: Collins Lawn Care

Authorized Representative Name/Title: Wyatt J. Collins/Owner

E-mail Address: wyatt5@windstream.net

FEIN: 75-3004058

Street Address: 3768 SE 109th Street, Starke, Florida 32091

Mailing Address (if different): PO Box 432, Hampton, Florida 32044

Telephone: ( 352 ) 665-7754

Fax: ( 352 ) 468-3639

By signing this form, I acknowledge I have read and understand, and my business complies with all General Conditions and requirements set forth herein; and,

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: Wyatt J. Collins

SIGNER'S PRINTED NAME: Wyatt J. Collins

DATE: 05/10/21

## PART 4 – BID PRICES

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### 4.1 BID PRICES

## City of Gainesville

### Grounds Maintenance at Evergreen Cemetery

#### Bid Form

Bidder: Collins Lawn Care

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*THIS FORM MUST BE COMPLETED AND RETURNED WITH BID PROPOSAL. BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD WITHOUT COMPLETED FORM.*

**Please quote the cost of providing the full range of service outlined in the Technical Specifications for one 12-month period.**

\$ 91,850.00 \_\_\_\_\_ per year

**NOTE:** THE PRICES SET FORTH ABOVE SHALL BE CONSIDERED FIRM BIDS NOT SUBJECT TO PRICE ADJUSTMENT UNLESS BIDDER'S PROVISIONS FOR PRICE ESCALATION ARE STATED ON A SEPARATE SHEET ATTACHED TO THE BID.

**NOTE:** THE CITY RESERVES THE RIGHT TO ADD OR DELETE LOCATIONS, SERVICES, ITEMS, MATERIALS OR ANY OTHER ASPECTS OF CONSIDERATION FROM THIS CONTRACT SHOULD IT BE IN THE BEST INTEREST OF THE CITY. THE CONTRACT PRICE WILL BE ADJUSTED ACCORDINGLY UPON MUTUAL NEGOTIATION AND AGREEMENT OF THE CONTRACTOR AND THE CITY'S REPRESENTATIVE.

**Note:** THE PRICES SET FORTH ABOVE SHALL BE CONSIDERED FIRM BIDS NOT SUBJECT TO PRICE ADJUSTMENT UNLESS BIDDER'S PROVISIONS FOR PRICE ESCALATION ARE STATED ON A SEPARATE SHEET ATTACHED TO THE BID. (Any price escalation must be based upon a numerical or established index and must identify the terms in which the escalation will operate.)

**Note:** THE CITY RESERVES THE RIGHT TO AWARD THIS BID ON THE BASIS OF EACH LINE INDIVIDUALLY, ANY COMBINATION OF LINE ITEMS OR ALL LINE ITEMS COMBINED AS IT DETERMINES TO BE IN ITS BEST INTEREST. THE CITY RESERVES THE RIGHT TO NOT AWARD ANY LINE ITEM AS IT DETERMINES TO BE IN ITS BEST INTEREST.

**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.

**Note:** THE PRICES SET FORTH ABOVE SHALL BE CONSIDERED FIRM BIDS NOT SUBJECT TO PRICE ADJUSTMENT UNLESS BIDDER'S PROVISIONS FOR PRICE ESCALATION ARE STATED ON A

***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

Collins Lawn Care

does:

(Name of Bidder)

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.

Wyatt J. Collins

Bidder's Signature

05/10/21

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 (# G21000062811)

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.*

### Collins Lawn Care

Bidder's Name

Wyatt J. Collins

Printed Name/Title of Authorized Representative

Wyatt J. Collins

Signature of Authorized Representative

05/10/21

Date

# City of Gainesville

## Grounds Maintenance at Evergreen Cemetery

### Reference Form

Bidder: Collins Lawn Care

List at least five (5) references of similar grounds maintenance projects performed over the past two years, NOT including jobs for Parks, Recreation and Cultural Affairs. You may use additional pages.

- 1) Job location: 5497 NE 49th Terr, Gainesville, FL Date work performed: 04/2001 - Present  
Business Name: Nordstrom Distrubution Center  
Contact Name: John Roane Phone Number: 352-384-2140  
FAX or email: john.roane@nordstrom.com
  
- 2) Job location: 5002 NE 54th Place, Gainesville, FL Date work performed: 05/2011 - Present  
Business Name: SiVance/Milliken Chemical Plant  
Contact Name: Alan Brown Phone Number: 352-244-2308  
FAX or email: alan.brown@milliken.com
  
- 3) Job location: 3780 NW 24th Blvd, Gainesville, FL Date work performed: 06/2020 - Present  
Business Name: Evergreen Uptown Apartments  
Contact Name: Crystal Collins Phone Number: 352-320-3806  
FAX or email: evergreenuptown-cm@pegasusresidential.com
  
- 4) Business Name: 4747 North Main Street, Gainesville, FL, GRU (Eastside Operations Center) - 06/2018 - Present  
Contact Name: Dean Hendrix Phone Number: 352-393-1851  
FAX or email: hendrixbd@gru.com
  
- 5) Job location: 9022 SE 186th Place, Lake Butler, FL Date work performed: 03/2021 - Present  
Business Name: West Fraser Lumber Mill  
Contact Name: Josh Crawford Phone Number: 904-290-6460  
FAX or email: joshua.crawford@westfraser.com
  
- 6) Job location: \_\_\_\_\_ Date work performed: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
FAX or email: \_\_\_\_\_

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Wyatt John Collins</b>	
2 Business name/disregarded entity name, if different from above <b>Collins Lawn Care</b>	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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 <b>not</b> 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. <input type="checkbox"/> 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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>PO Box 432</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Hampton, FL 32044</b>	
7 List account number(s) here (optional)	

### 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.

**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.

Social security number										
5	9	4	-	6	2	-	8	6	3	2
or										
Employer identification number										
7	5	-	3	0	0	4	0	5	8	

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>5/10/21</b>
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### 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](http://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.*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/24/2021

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 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).

<b>PRODUCER</b> Richard Dugger 2270 N Temple Avenue Starke, FL 32091 PH: 904-964-6369 / FAX 904-964-9666	<b>CONTACT NAME:</b> _____ <b>PHONE (A/C, No, Ext):</b> _____ <b>FAX (A/C, No):</b> _____ <b>E-MAIL ADDRESS:</b> _____																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> Florida Farm Bureau General</td> <td></td> <td></td> </tr> <tr> <td><b>INSURER B:</b> Retail First Insurance Company</td> <td></td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	<b>INSURER A:</b> Florida Farm Bureau General			<b>INSURER B:</b> Retail First Insurance Company			<b>INSURER C:</b>			<b>INSURER D:</b>			<b>INSURER E:</b>			<b>INSURER F:</b>	
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<b>INSURER E:</b>																					
<b>INSURER F:</b>																					
<b>INSURED</b> Wyatt Collins dba Collins Lawn Care Po Box 432 Hampton FL 32044																					

**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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____	X		9518498	11/25/2020	11/25/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 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>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____ _____ \$ _____	
A	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____	X		9527197	09/29/2020	09/29/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 _____ \$ _____	
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	X	520-60132-0000	03/01/2021	03/01/2022	PER STATUTE    OTH-ER    subr wvd E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

<b>CERTIFICATE HOLDER</b> Pegasus Residential LLC c/o Real Page Vendor Credentialing PO Box 115006 Carrollton TX 75011	<b>CANCELLATION</b> 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 Richard Dugger
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**APPLICATION FOR REGISTRATION OF FICTITIOUS NAME**

REGISTRATION# G21000062811

Fictitious Name to be Registered: COLLINS LAWN CARE

Mailing Address of Business: PO BOX 432  
HAMPTON, FL 32044

Florida County of Principal Place of Business: BRADFORD

FEI Number: 75-3004058

**FILED**  
**May 06, 2021**  
**Secretary of State**

Owner(s) of Fictitious Name:

CARE, COLLINS L  
PO BOX 432  
HAMPTON, FL 32044

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

WYATT J COLLINS

05/06/2021

Electronic Signature(s)

Date

**Certificate of Status Requested (X)**

**Certified Copy Requested (X)**

# City of Gainesville

## Grounds Maintenance at Evergreen Cemetery

### Resources

Bidder: Collins Lawn Care

THIS FORM MUST BE COMPLETED AND RETURNED WITH BID PROPOSAL. BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD WITHOUT COMPLETED FORM. YOU MAY USE ADDITIONAL PAGES.

Bidders must list all equipment that is to be used in maintaining the grounds of Evergreen Cemetery. The Contractor shall maintain and own appropriate equipment. Equipment used shall have the capacity required to manage the grounds at Evergreen Cemetery to the highest quality. Examples of the equipment, at a minimum, are Zero Turn Radius (ZTR) type mowers, string trimmers, edgers, blowers, hedge trimmers, and other small equipment used for landscape work.

**All mowing equipment to be used on this project must be commercial grade and less than 10 years old. All hand held equipment such as string trimmers, blowers, edgers and other machines must be less than 5 years old. Transportation vehicles and trailering equipment must be less than 15 years old.**

Make/Model	EQUIPMENT	
	Year (age)	Use of Equipment
1) <u>Dodge Ram 2500</u>	<u>2007</u>	<u>Truck for pulling trailer</u>
2) <u>Dodge Ram 2500</u>	<u>2016</u>	<u>Truck for pulling trailer</u>
3) <u>Predator Eagle 7x22</u>	<u>2011</u>	<u>Exclosed equipment trailer</u>
4) <u>Predator Eagle 7x22</u>	<u>2020</u>	<u>Exclosed equipment trailer</u>
5) <u>Gravely Pro 152 XDZ</u>	<u>2019</u>	<u>Zero turn mowers</u>
6) <u>Gravely Pro 152 XDZ</u>	<u>2019</u>	<u>Zero turn mower</u>
7) <u>Gravely Pro 152 XDZ</u>	<u>2017</u>	<u>Zero turn mower</u>
8) <u>Gravely Pro 152 XDZ</u>	<u>2017</u>	<u>Zero turn mower</u>
9) <u>Gravely Pro 152 XDZ</u>	<u>2015</u>	<u>Zero turn mower</u>
10) <u>John Deere Z 930m</u>	<u>2018</u>	<u>Zero turn mower</u>
11) <u>Cyclone Rake XL</u>	<u>2015</u>	<u>Leaf Vacuum</u>
12) <u>Stihl FC 90</u>	<u>2018</u>	<u>Edger</u>
13) <u>Stihl FC 90</u>	<u>2018</u>	<u>Edger</u>
14) <u>Stihl FC 90</u>	<u>2018</u>	<u>Edger</u>

15)	Stihl FC 90	2019	Edger
16)	Stihl FS 90	2018	String Trimmer
17)	Stihl FS 90	2018	String Trimmer
18)	Stihl FS 90	2018	String Trimmer
19)	Stihl FS 91r	2018	String Trimmer
20)	Stihl FS 91r	2019	String Trimmer
21)	Stihl FS 91r	2019	String Trimmer
22)	Stihl FS 91r	2021	String Trimmer
23)	Stihl FS 91r	2021	String Trimmer
24)	Stihl HL 100k	2018	Hedge Trimmer
25)	Stihl HL 100k	2018	Hedge Trimmer
26)	Stihl HL 94k	2019	Hedge Trimmer
27)	Stihl HL 94k	2020	Hedge Trimmer
28)	Stihl HT 103	2018	Pole Saw
29)	Stihl HT 133	2018	Pole Saw
30)	Stihl BR700	2018	Blower
31)	Stihl BR700	2018	Blower
32)	Stihl BR700	2018	Blower
33)	Stihl BR700	2019	Blower
34)	Stihl BR600	2018	Blower
35)			
36)			
37)			
38)			
39)			
40)			
41)			
42)			
43)			

# City of Gainesville

## Grounds Maintenance at Evergreen Cemetery

### Technical Expertise and Experience

Bidder: Collins Lawn Care

*THIS FORM MUST BE COMPLETED AND RETURNED WITH BID PROPOSAL. BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD WITHOUT COMPLETED FORM.*

Bidders must demonstrate, at a minimum, the following experience levels for staff that will be working on site or supervising the work at Evergreen Cemetery: A minimum of 5 years in commercial landscape maintenance for personnel in a supervisory role, including field supervisory staff. Field and labor force must have at least 1 year experience in commercial landscape maintenance.

**Please describe your company's experience in landscape maintenance services. You may use extra pages.**

Collins Lawn Care was established in 1999. We are a family-owned and operated business. We have a qualified staff with our supervisors having more than seven years of experience in commercial landscape maintenance. All our labor force has more than two years of experience in the commercial landscape maintenance industry. Our goal as a company is to exceed our client's expectations by using our skilled, uniformed employees to ensure all aspects of landscape maintenance are performed to the highest standards. We have provided the highest quality commercial landscape maintenance service to properties in Gainesville and the surrounding areas. We also pride ourselves on our team's good character, integrity, and respect for others and their property.

We look forward to the opportunity of providing our service to Evergreen Cemetery.

Sincerely,  
Wyatt J. Collins  
Collins Lawn Care



## ADDENDUM NO.1

Date: April 12, 2021

Bid Date: May 12, 2021, at 3:00 P.M. (Local Time)(New Revised Date)

Bid Name Evergreen Cemetery  
Grounds Maintenance

Bid No.: RECN-210040-DM

NOTE: This Addendum has been issued only to the holders of record of the specifications.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary:

**The Following are revisions to the original project specifications:**

1. The Mandatory Prebid/Site Visit will be held April 21, 2021 at 9:00 A.M. at the Evergreen Cemetery 401 se 21<sup>st</sup> Avenue Gainesville, FL 32641.
2. Please note revised due date of project May 12, 2021 3:00 p.m.

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 1 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

### CERTIFICATION BY PROPOSER

The undersigned acknowledges receipt of this Addendum No. 1 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: Collins Lawn Care \_\_\_\_\_

BY: *Wyatt J. Collins* \_\_\_\_\_

DATE: 05/10/21 \_\_\_\_\_

CITY OF \_\_\_\_\_ FINANCIAL SERVICES  
GAINESVILLE PROCEDURES MANUAL

**41-423      Prohibition of lobbying in procurement matters**

Except as expressly set forth in Resolution 060732, Section 10, during the blackout period as defined herein no person may lobby, on behalf of a competing party in a particular procurement process, City Officials or employees except the purchasing division, the purchasing designated staff contact. Violation of this provision shall result in disqualification of the party on whose behalf the lobbying occurred.

Black out period means the period between the issue date which allows for immediate submittals to the City of Gainesville Purchasing Department for an invitation for bid or the request for proposal, or qualifications, or information, or the invitation to negotiate, as applicable, and the time the City Officials and Employee awards the contract.

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## ADDENDUM NO.2

Date: April 27, 2021  
Bid Date: May 12, 2021, at 3:00 P.M. (Local Time)

Bid Name Evergreen Cemetery  
Grounds Maintenance  
Bid No.: REC-210040-DM

NOTE: This Addendum has been issued only to the holders of record of the specifications.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary:

1. Any questions shall be submitted in writing to the City of Gainesville Purchasing Division by 5:00 p.m.(local time), April 28, 2021. Questions may be submitted as follows:  
Email: [mcphalldt@cityofgainesville.org](mailto:mcphalldt@cityofgainesville.org)
2. Please find attached:
  - a) Copy of the blackout period information (Financial Procedures Manual Section 41-423 Prohibition of lobbying in procurement matters).
3. Darius McPhall, Purchasing Division, discussed bid requirements.
  - a. We only accept electronic submittals.
  - b. Bids are to be received by the Purchasing office no later than 3:00 p.m. on May 12, 2021. DemandStar will not accept bids after 3:00 p.m. on that date.
  - c. Send questions in writing to Darius McPhall via email or fax.
    - i. All communication through Darius McPhall or purchasing staff only. Do not communicate with other City staff.
    - ii. Question deadline April 28, 2021 at 5 p.m.
  - d. Blackout period
  - e. Various forms (i.e. addenda, reference form, resource form, technical expertise and experience form, etc.) are to be completed and returned with your bid.
    - i. Sign, date and return all Addenda
4. John Weber Parks, Recreation, and Cultural Affairs Manager, discussed the project scope
  - a. Approximately 54 acres.
  - b. Please pay close attention to the bid document specifications.
5. Karen Pruss, Recreation, and Cultural Affairs Cemetery Coordinator, discussed the project scope
  - a. Perimeters of the cemetery.

- b. Discussed the importance of the work, respect and care for the monuments, and the visibility of this site.
- c. Mentioned the new Veterans Monument
- d. The 3 acres that are listed in the bid document, do not need to be cut at this time.
- e. Please pay close attention to the important holidays Mother's Day, Memorial Day, Father's Day, Veterans Day.

Please pay close attention to the bid document specifications

The following are answers/clarifications to questions received at the non-mandatory pre-bid conference:

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 2 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

CERTIFICATION BY PROPOSER

The undersigned acknowledges receipt of this Addendum No. 2 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: Collins Lawn Care

BY: Wyatt J. Collins

DATE: 05/10/21

CITY OF \_\_\_\_\_ FINANCIAL SERVICES  
GAINESVILLE PROCEDURES MANUAL

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CITY OF GAINESVILLE  
GENERAL GOVERNMENT PURCHASING DIVISION  
MANDATORY PRE-BID CONFERENCE  
Evergreen Cemetery Grounds Maintenance  
DATE: April 21, 2021 @ 9:00 AM LOCAL TIME  
BID #REC- 210040-DM  
DUE DATE: May 12, 2021, AT 3:00PM

YOUR COMPANY'S LEGAL NAME, DBA NAME  
& ADDRESS

YOUR SIGNATURE, PRINTED NAME,  
PHONE NUMBER & EMAIL ADDRESS

1) Legal Name: Wyatt Collins  
DBA: Collins Lawn Care  
\_\_\_\_\_  
\_\_\_\_\_

Wyatt J. Collins  
SIGNATURE  
Wyatt Collins  
PRINTED NAME  
PHONE # (352) 665-7754  
E-MAIL: Wyatt5@Windstream.net

2) Legal Name: Tim McQuaig  
DBA: Southern Lawn Care  
Mid Florida Inc.  
\_\_\_\_\_

Tim McQuaig  
SIGNATURE  
Tim McQuaig  
PRINTED NAME  
PHONE # (352) 304-3921  
E-MAIL: Kawboy32x@gmail.com

3) Legal Name: \_\_\_\_\_  
DBA: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE  
\_\_\_\_\_  
PRINTED NAME  
PHONE # (\_\_\_\_\_) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

4) Legal Name: \_\_\_\_\_  
DBA: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE  
\_\_\_\_\_  
PRINTED NAME  
PHONE # (\_\_\_\_\_) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

5) Legal Name: \_\_\_\_\_  
DBA: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE  
\_\_\_\_\_  
PRINTED NAME  
PHONE # (\_\_\_\_\_) \_\_\_\_\_  
E-MAIL: \_\_\_\_\_



### ADDENDUM NO.3

Date: May 10, 2021  
Bid Date: May 12, 2021, at 3:00 P.M. (Local Time)

Bid Name Evergreen Cemetery  
Grounds Maintenance  
Bid No.: REC-210040-DM

NOTE: This Addendum has been issued only to the holders of record of the specifications.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary:

**1. Bid Opening Information, Attendance is NOT Mandatory Wednesday May 12, 2021 at 3:00p.m.**

Join Zoom Meeting

<https://us02web.zoom.us/j/89953144317?pwd=SXplc1IHT25TWE40SXQ4K2xieWVWQT09>

Meeting ID: 899 5314 4317

Passcode: tM6Maa

One tap mobile

+13017158592,,89953144317#,,,,\*814531# US (Washington DC)

+13126266799,,89953144317#,,,,\*814531# US (Chicago)

Dial by your location

+1 301 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

+1 646 876 9923 US (New York)

+1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 408 638 0968 US (San Jose)

Meeting ID: 899 5314 4317

Passcode: 814531

Find your local number: <https://us02web.zoom.us/j/89953144317>

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 3 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

CERTIFICATION BY PROPOSER

The undersigned acknowledges receipt of this Addendum No. 3 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: Collins Lawn Care  
BY: Wyatt J. Collins  
DATE: 05/10/21

CITY OF \_\_\_\_\_  
GAINESVILLE

FINANCIAL SERVICES  
PROCEDURES MANUAL

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