

EXHIBIT A

BID FORM (CONT'D)

BID NUMBER: 20-1 Annual Purchase of Plant Mix Asphalt Concrete

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

Bidder: John W. Taylor Company: Preferred Materials, Inc.

Address: 11482 Columbia Park Drive W. Ste 3

Jacksonville, FL 32258

Authorized Signature:  Title: Vice President

Clearly Print Signature: John W. Taylor Title: Vice President

PHONE: 904-288-6300 FAX: 904-288-6301 DATE: June 26th, 2019

Email Address: John.Taylor@Preferredmaterials.com

BID FORM

BID NUMBER: 20-1 Annual Purchase of Plant Mix Asphalt Concrete

BID OPENING DATE: 2:00 pm, Wednesday, June 26, 2019

PLACE OF BID OPENING: Alachua County Procurement, Third Floor
County Administration Building 12 SE 1st Street
Gainesville, Florida, 32601-6983

Superpave Asphaltic Concrete, Structural Course, Cost (\$) per Ton

Tons	SP-9.5	SP-12.5
0-150	\$ 66.00	\$ 66.00
151-250	\$ 65.00	\$ 65.00
251-500	\$ 65.00	\$ 65.00
501-1000	\$ 65.00	\$ 65.00
Over 1001	\$ 65.00	\$ 65.00

Superpave Asphaltic Concrete, Friction Course, Cost (\$) per Ton

Tons	FC-9.5	FC-12.5
0-150	\$ 90.00	\$ 88.00
151-250	\$ 90.00	\$ 88.00
251-500	\$ 90.00	\$ 88.00
501-1000	\$ 90.00	\$ 88.00
Over 1001	\$ 90.00	\$ 88.00

Liquid Asphalt, Cost (\$) per Gallon

GALLONS	TYPE RS-1 TACK	TYPE RS-2 TACK	TYPE RC-70 Prime	TYPE AEP-1 Prime	TYPE NTSS-1HM Trackless Tack
0-500	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid
501-1000	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid
1001-2000	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid
Over 2001	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid	\$ No Bid

ATTENTION:

**VENDOR
SHOULD
COMPLETE AND
SIGN EXHIBIT B
TO BE CONSIDERED
RESPONSIVE**

Small Business Enterprise (SBE) Program Participation Form

BID NUMBER: 20-1 Annual Purchase of Plant Mix Asphalt Concrete

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: 20-1 Annual Purchase of Plant Mix Asphalt Concrete
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.

SBE Name of Contractor	SBE Name of Contractor
Address	Address
Scope of Work to be Performed	Scope of Work to be Performed
\$ _____ % (Est \$ Value) (Est % of Total Bid)	\$ _____ % (Est \$ Value) (Est % of Total Bid)
SBE Name of Contractor	SBE Name of Contractor
Address	Address
Scope of Work to be Performed	Scope of Work to be Performed
\$ _____ % (Est \$ Value) (Est % of Total Bid)	\$ _____ % (Est \$ Value) (Est % of Total Bid)
SBE Name of Contractor	SBE Name of Contractor
Address	Address
Scope of Work to be Performed	Scope of Work to be Performed
\$ _____ % (Est \$ Value) (Est % of Total Bid)	\$ _____ % (Est \$ Value) (Est % of Total Bid)

BID NUMBER: 20-1Annual Purchase of Plant Mix Asphalt Concrete
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
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
2	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
3	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
4	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
5	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
6	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		
7	Name of SBE Company:	Date SBE Contacted
SBE Contact Name: Phone:		/ /
Must be completed by. SBE Response when contacted:		

BID NUMBER: 20-1 Annual Purchase of Plant Mix Asphalt Concrete

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


OPTION 1

OPTION 2

OPTION 3

OPTION 4

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

Vendor Name: Preferred Materials, Inc Date 6/26/2019Signature  Title Vice PresidentPrinted Name: John W. Taylor Title Vice President

DRUG FREE WORKPLACE

Section 22.09 Competitive Sealed Bidding of the Alachua County Purchasing Code and Section 41-530 of the City's Financial Services Procedures Manual 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 Florida Statute 287.087 and Section 22.09 of the Alachua County Purchasing Code hereby certifies that

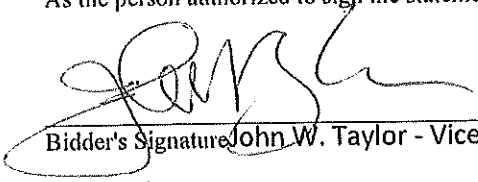
Preferred Materials, Inc.

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 John W. Taylor - Vice President

6/26/2019

Date

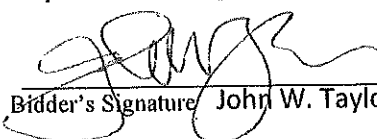
PUBLIC RECORD DECLARATION OR CLAIM OF EXEMPTION

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(1), F.S. A document is subject to personal inspection and copying unless it falls under one of the public records exemptions created under Florida law. Please designate what portion of your bid or proposal, if any, qualifies to be exempt from inspection and copying:

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

I. NO EXEMPTION FROM PUBLIC RECORDS LAW

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

 6/26/2019
 Bidder's Signature John W. Taylor - Vice President Date

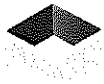
--- OR ---

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

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

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

 Bidder's Signature Date



Preferred
MATERIALS, INC.
A CRH COMPANY

Preferred Materials, Inc.
11482 Columbla Park Dr. W
Suite 3
Jacksonville, FL 32258

T (904) 288 6300
F (904) 288 6301

www.preferredmaterials.com

June 26th, 2019

Bid : 20-1 Annual Purchase of Plant Mix Asphalt Concrete

RE: Delivery of Supplies or Performance Of Services

Preferred Materials, Inc. requires a minimum of twelve (12) hours notification prior to the pickup of any asphalt.



John W. Taylor - Vice President



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A CRH COMPANY

Preferred Materials, Inc.
11482 Columbia Park Dr. W
Suite 3
Jacksonville, FL 32258

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F (904) 288 6301

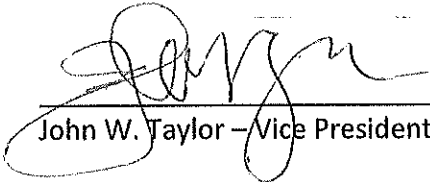
www.preferredmaterials.com

June 26th, 2019

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RE: Pricing

Preferred Materials, Inc. guarantees firm pricing of items listed in the bid form for the initial two (2) year contract period. Renewal periods subject to market fluctuation.



John W. Taylor – Vice President



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/25/2019

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(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 Liberty Mutual Insurance Co. National Insurance East
2000 Westwood Dr.
Wausau, WI 54401

www.LibertyMutual.com

INSURED
Preferred Materials, Inc. (216-JAC)
11482 Columbia Park Dr W, Suite 3
Jacksonville FL 32258

CONTACT NAME: Valerie Reece
PHONE (A/C, No. Ext): 513-867-3822 FAX (A/C, No):
E-MAIL ADDRESS: CMeCertProduction@libertymutual.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Liberty Mutual Fire Insurance Company	23035
INSURER B:	Liberty Insurance Corporation	42404
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 49494105

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 VWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Primary/Non-Contributory <input checked="" type="checkbox"/> Separation of Insured GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TB2-C81-004095-118 XCU Coverage Included	9/1/2018	9/1/2019	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$250,000 MED EXP (Any one person) \$50,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	AS2-C81-004095-128 AS2-C81-054502-528 Physical Damage only: Comprehensive Ded \$10,000 Collision Ded \$10,000	9/1/2018 9/1/2018	9/1/2019 9/1/2019	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
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 N	N/A	WA7-C8D-004095-028 All except OH, ND, WA, WY WC7-C81-004095-018 WI, MN	9/1/2018 9/1/2018	9/1/2019 9/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

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

RE: Bid-20-1 Annual Purchase of Plant Mix Asphalt Concrete; Public Works, Engineering; Brian Singleton; 352.374.5245; bsingleton@alachuacounty.us
The Alachua County Board of County Commissioners, its officials, employees and volunteers are listed as additional insured with regards to the general liability, for ongoing and completed operations, and automobile liability policies on a primary and non-contributory basis, where required by written contract. 30 day written Notice of Cancellation
Waiver of subrogation is included in favor of the additional insured, where required by written contract, and where applicable by law.

CERTIFICATE HOLDER

CANCELLATION

Alachua County Board of County
Commissioners and City of Gainesville
12 SE 1st Street
Gainesville FL 32601-6983

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

Valerie Reece

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ACORD 25 (2016/03)

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