

## BID COVER PAGE



Procurement Division  
200 E University Avenue, Rm 339  
Gainesville, FL 32601  
(352) 334-5021 (main)  
Issue Date: 4/2/2021

## INVITATION TO BID: # PWDA-210036-MS

SW 27<sup>th</sup> Street Multi-Use Path (LAP 433989-1-58-01)

PRE-BID MEETING: ☐ Non-Mandatory ☐ Mandatory ☒ N/A ☐ Includes Site Visit  
DATE: N/A TIME: N/A  
LOCATION: N/A

Legal ad (Gainesville Sun) publish date: April 4, 2021

QUESTION SUBMITTAL DUE DATE: April 23<sup>rd</sup> 2021

**DUE DATE FOR UPLOADING BID RESPONSE:** May 3, 3:00 PM

**SUMMARY OF SCOPE OF WORK:** Asphalt path and sidewalk construction with related incidental work on SW 27<sup>th</sup> Street in Gainesville, FL

For questions relating to this bid, contact: Melanie Sowers at [sowersma@cityofgainesville.org](mailto: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-dated 4/27/2021

Legal Name of Bidder: DB Civil Construction, LLC

DBA: \_\_\_\_\_

Authorized Representative Name/Title: Connie Baylor, Manager

E-mail Address: estimating@dbcivilconstruction.com FEIN: 82-1245533

Street Address: 4475 US 1 South, Ste 707 St. Augustine FL 32086

Mailing Address (if different): \_\_\_\_\_

Telephone: (386-256-7460) Fax: ( )

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: Connie Baylor

SIGNER'S PRINTED NAME: Connie Baylor DATE: 5-3-2021

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

## PART 4 – BID FORM

**Bid # PWDA-210036-MS – SW 27<sup>th</sup> Street Multi-Use Path (LAP 433989-1-58-01)**

**Date:** 5/3/2021

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: PWDA-210036-MS - SW 27<sup>th</sup> Street Multi-Use Path (LAP 433989-1-58-01) 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 120 calendar 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 liquidated damages 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.

***This page must be completed and uploaded with your Submittal.***

**Bid # PWDA-210036-MS - SW 27<sup>th</sup> Street Multi-Use Path (LAP 433989-1-58-01)**

**4.1 BID FORM/PAY ITEM LIST**

ITEM NO.	FDOT Pay Item No.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
1	101-1	MOBILIZATION	1	LS	60,000.00	60,000.00
2	102-1	MAINTENANCE OF TRAFFIC	1	LS	30,000.00	30,000.00
3	104-CITY	PREVENTION, CONTROL & ABATEMENT OF EROSION & WATER POLLUTION	1	LS	8,000.00	8,000.00
4	104-10-3	SEDIMENT BARRIER	274	LS	4.00	1,096.00
5	104-18	INLET PROTECTION SYSTEM	6	EA	250.00	1,500.00
6	107-CITY	MOWING	6	AC	100.00	600.00
7	110-1-1	CLEARING & GRUBBING	1.77	AC	45,000.00	79,650.00
8	110-2-2	SELECTIVE CLEARING & GRUBBING	0.28	AC	40,000.00	11,200.00
9	120-1	REGULAR EXCAVATION	433	CY	52.00	22,516.00
10	120-6	EMBANKMENT	609	CY	64.00	38,976.00
11	160-4	TYPE B STABILIZATION	2810	SY	17.00	47,770.00
12	285-704	OPTIONAL BASE GROUP 04	2437	SY	20.00	48,740.00
13	327-70-1	MILLING EXISTING ASPHALT PAVEMENT, 1"	123	SY	35.00	4,305.00
14	334-1-13	SUPERPAVE ASPHALTIC CONCRETE	260	TN	290.00	75,400.00
15	400-0-11	CONC CLASS NS, GRAVITY WALL	3	CY	1,400.00	4,200.00

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ITEM NO.	FDOT Pay Item No.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
16	425-1-531	INLETS, DITCH BOTTOM, TYPE C MODIFIED, BACK OF SIDEWALK, <10'	1	EA	4,700.00	4,700.00
17	425-1-541	INLETS, DITCH BOTTOM, TYPE D, <10'	2	EA	5,500.00	11,000.00
18	425-3-41	JUNCTION BOX, DRAINAGE, P-7, <10'	2	EA	4,700.00	9,400.00
19	430-174-124	PIPE CULVERT, ROUND, 24" RCP	149	LF	180.00	26,820.00
20	430-174-218	PIPE CULVERT, ELLIP, 18" RCP	168	LF	175.00	29,400.00
21	430-963-1	PVC PIPE FOR BACK OF SIDEWALK, 4"	82	LF	38.00	3,116.00
22	430-984-129	MITERED END SECTION, 24" SD	1	EA	2,400.00	2,400.00
23	430-984-625	MITERED END SECTION, 18" ELLIP SD	5	EA	2,250.00	11,250.00
24	515-2-311	PED/BIKE RAIL, ALUM, 42" TYPE 1	33	LF	200.00	6,600.00
25	520-1-10	CURB & GUTTER, TYPE F	526	LF	35.00	18,410.00
26	520-2-4	CURB, TYPE D	35	LF	60.00	2,100.00
27	522-1	CONCRETE SIDEWALK & DRIVEWAYS, 4"	510	SY	67.00	34,170.00
28	522-2	CONCRETE SIDEWALK & DRIVEWAYS, 6"	135	SY	120.00	16,200.00
29	527-2	DETECTABLE WARNINGS	270	SF	50.00	13,500.00
30	570-1-2	SOD	5628	SY	6.00	33,768.00
31	700-1-11	SINGLE POST SIGN, F&I GROUND MOUNT, UP TO 12 SF	5	AS	700.00	3,500.00
32	700-1-50	SINGLE POST SIGN, RELOCATE	2	AS	200.00	400.00

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ITEM NO.	FDOT Pay Item No.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
33	700-1-60	SINGLET POST SIGN, REMOVE	3	AS	120.00	360.00
34	711-11-123	THERMOPLASTIC, STD, WHITE SOLID, CROSSWALK	770	LF	3.00	2,310.00
35	711-11-125	THERMOPLASTIC, STD, WHITE SOLICE, STOP BAR/CROSSWALK 24"	80	LF	6.00	480.00
36	0710-3	THERMOPLATIC, PREFORMED, WHITE, SOLID, 24", CROSSWALK	163	LF	30.00	4,890.00
TOTAL AMOUNT BID					668,727.00	

List of Unit Abbreviations:

SY Square Yards  
 LS Lump Sum  
 CY Cubic Yards  
 EA Each  
 TN Tons  
 HR Hour

GL Gallons  
 MG Thousand Gallons  
 GM Gross Miles  
 LF Linear Feet  
 NM Net Miles  
 AS Assembly

SD Side Drain  
 ED Each Day  
 CD Cross Drain  
 AC Acre  
 RCP Reinforced Concrete Pipe  
 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.

**[THE REMAINDER OF THIS PAGE IS INTENTIONALLY BLANK]**

***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

DB Civil Construction, LLC

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.

  
Bidder's Signature

5/3/2021  
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

### **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 (# L17000064257 )

If the answer is "NO", please state reason why: \_\_\_\_\_

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

## CUSTOMER HISTORY

Name of Bidder: DB CIVIL CONSTRUCTION, 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: CITY OF DAVENPORT	
Address: 1 SOUTH ALLAPAHA AVENUE	
City, State, Zip: DAVENPORT, FL 33837	
Point of Contact: AARON PETCHOW	Phone Number: 863-270-1292
E-mail: apetschow@mydavenport.org	

Customer Name: CITY OF WINTERHAVEN	
Address: 451 THIRD STREET	
City, State, Zip: WINTERHAVEN, FL	
Point of Contact: RON BACH	Phone Number: 863-287-3928
E-mail: rbach@mywinterhaven.com	

Customer Name: CITY OF ST. AUGUSTINE	
Address: PO BOX 210	
City, State, Zip: ST. AUGUSTINE, FL 32085	
Point of Contact: JESSICA BEACH	Phone Number: 904-209-4227
E-mail: JBEACH@CITYSTAUG.COM	

Customer Name: CITY OF ORLANDO	
Address: 400 SOUTH ORANGE AVENUE	
City, State, Zip: ORLANDO, FL 32801	
Point of Contact: ADAM WALOSIK	Phone Number: 407-246-3528
E-mail: Adam.Walosik@cityoforlando.net	

Customer Name: CITY OF ST. AUGUSTINE	
Address: PO BOX 210	
City, State, Zip: ST. AUGUSTINE, FL 32085	
Point of Contact: JESSICA BEACH	Phone Number: 904-209-4227
E-mail: JBEACH@CITYSTAUG.COM	

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## **DB CIVIL CONSTRUCTION**

**4475 US 1 South, Suite 502**

**St. Augustine, FL 32086**

**(386) 256-7460**

### **References**

**Entity:** FDOT

**Job Name:** FDOT Volusia Drainage

**Job Location:** Volusia County

**Start Date:** 01/2020

**Contract Cost:** \$413,864.50

**Contact:** Charles Long (407) 415-0764

**Job Description:** Storm drain

**Entity:** City of Davenport

**Job Name:** Davenport Water Main Replacement

**Job Location:** Davenport, Florida

**Start Date:** 10/2019

**Contract Cost:** \$6,200,000.00

**Contact:** Aaron Perschan (863) 270-1292

**Job Description:** 60,000 Linear feet of water main replacement

**Entity:** City of Winter Haven

**Job Name:** Winter Haven Regional Airport Utilities

**Job Location:** City of Winter Haven

**Start Date:** 10/2019

**Contract Cost:** \$1,700,000.00

**Contact:** Ron Bach (863) 287-3928

**Job Description:** Gravity sewer, lift station, water main and fiber.

**Entity:** City of Casselberry

**Job Name:** PW1335 Seminole Blvd Force Main Rehab

**Job Location:** Seminola Blvd in Casselberry

**Start Date:** 1/2019

**Contract Cost:** \$1,530,015

**Contact:** Lynn Jarrell (407) 773-3203

**Job Description:** Force Main Rehab

**Entity:** Volusia County

**Job Name:** Halifax Plantation

**Job Location:** Halifax Plantation

**Start Date:** 11/2019

**Contract Cost:** \$251,250

**Contact:** Scott Mays, 386-943-7027

**Job Description:** 6" Concentrate Main

**Entity:** JEA

**Job Name:** Trednick Parkway, Jacksonville

**Job Location:** Trednick Parkway, Jacksonville

**Start Date:** 10/2019

**Contract Cost:** \$ 2,061,951

**Contact:** Tom Hamilton, 904-665-5797

**Job Description:** 10" & 12" Reuse

**Entity:** City of St. Augustine

**Job Name:** Lincolnville Utility Rehab

**Job Location:** Riberia/Dehaven Street

**Start Date:** 7/2020

**Contract Cost:** \$1,503,299

**Contact:** Jes Beach, 904-209-4227

**Job Description:** Storm 15", 18"; Sewer 8"; Water 6"

**Entity:** City of Orlando

**Job Name:** WE 19-005

**Job Location:** Plaza Terrace Drive

**Start Date:** 6/2019

**Contract Cost:** \$850,000

**Contact:** Adam Walosik, 407-246-3528

**Job Description:** Sanitary Sewer 8"

**Entity:** Augustine Development Group  
**Job Name:** Cortez on the water  
**Job Location:** Comares avenue, St. Augustine  
**Start Date:** 2/2019  
**Contract Cost:** \$615,975  
**Contact:** Brian Greiner, 904-347-8331  
**Job Description:** SD, SM, WM

**Entity:** FDOT/Superior Construction  
**Job Name:** T-5641  
**Job Location:** AlA Flagler County Seawall  
**Start Date:** 2/2019  
**Contract Cost:** \$ 1,197,000  
**Contact:** David Blair, 352-208-3762  
**Job Description:** 5369 LF 12: PVC WM, 850 LF 8" gravity sewer

**Entity:** FDOT  
**Job Name:** E2Y30  
**Job Location:** Beach Blvd-Jacksonville  
**Start Date:** 7/2018  
**Contract Cost:** \$120,000  
**Contact:** Annely Karon, 904-360-5245  
**Job Description:** Storm Drain Replacement

**Entity:** FDOT

**Job Name:** E2Y19

**Job Location:** Beach Blvd-Jacksonville

**Start-Date:** 7/2018

**Contract Cost:** \$162,000

**Contact:** Annely Icaron\_904-360-52315

**Job Description:** Storm Drain Replacement

**Entity:** City of Holly Hill

**Job Name:** 7th Street Drainage Improvements

**Job Location:** 7th Street -Holly Hill

**Start Date:** 12/2017

**Contract Cost:** \$300,000

**Contact:** Walt Smyser, 386-348-9463

**Job Description:** Storm Sewer



CIVIL  
CONSTRUCTION

## EQUIPMENT LIST

- Caterpillar 252B
- Caterpillar 335
- Caterpillar 740
- John Deere 135
- John Deere 210G
- John Deere 324E
- John Deere 550 LGP
- John Deere 672G
- Linkbelt 235
- Loader 544
- BB250 Pull Behind Broom
- 24" Milling Head

**Request for Taxpayer  
Identification Number and Certification**

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

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

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.  
**DB Civil Construction**

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.  
**4475 S. US1**

6 City, state, and ZIP code  
**St. Augustine FL 32086**

7 List account number(s) here (optional)

Requester's name and address (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

or

Employer identification number

**02-1245533**

**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.

Sign Here Signature of U.S. person ▶ **C. M. Bugh**

Date ▶ **2-19-20**

**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-K (proceeds from real estate transactions)
  - Form 1099-S (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.



DBCIV-1

OP ID: LD

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/29/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Capital Partners Insurance 298 S. Nova Road, Suite F Ormond Beach, FL 32174 Alan Kidwell	386-672-2827	<b>CONTACT NAME</b> Alan Kidwell	<b>PHONE (A/C, No, Ext)</b> 386-672-2827	<b>FAX (A/C, No)</b> 386-672-5156
		<b>E-MAIL ADDRESS</b> alan@capitalpartnersinsurance.com		
		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		<b>INSURER A:</b> James River Insurance Company		
		<b>INSURER B:</b> Old Dominion Insurance Company		40231
		<b>INSURER C:</b> Florida Citrus Business & Ind		
		<b>INSURER D:</b> Travelers		27998
		<b>INSURER E:</b>		
		<b>INSURER F:</b>		

**INSURED**  
DB Civil Construction LLC  
1760 N US Hwy 1  
Ormond Beach, FL 32174

## 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	ADDITIONAL SUBROGATION WAIVED	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"/> XCU <input checked="" type="checkbox"/> Professional Liab GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		000932311	06/28/2020	06/28/2021	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 Pollution \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		DBAU179864	06/28/2020	06/28/2021	COMBINED SINGLE LIMIT (EA ACCIDENT) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> CED <input type="checkbox"/> RETENTION \$		000932371	06/28/2020	06/28/2021	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	10661731	07/26/2020	07/26/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ 1,000,000 EL DISEASE - EA EMPLOYEE \$ 1,000,000 EL DISEASE - POLICY LIMIT \$ 1,000,000
D	<b>Contractor's Equip</b>		8N509206	06/28/2020	06/28/2021	Rental 200,000 Deduct 1,000

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

## CERTIFICATE HOLDER

## CANCELLATION

## INFOMAT

For Informational Purposes Only

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





DIVISION of  
**CORPORATIONS**  
an official service of the state of florida

[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Data By Document Number](#) /

## Detail by Entity Name

Florida Limited Liability Company  
DB CIVIL CONSTRUCTION, LLC

### Filing Information

Document Number	L17000064257
FE/EIN Number	82-1245533
Date Filed	03/21/2017
State	FL
Status	ACTIVE
Last Event	LC AMENDMENT
Event Date Filed	07/21/2017
Event Effective Date	NONE

### Principal Address

176C US 1  
ORMOND BEACH, FL 32174

Changed: 07/21/2017

### Mailing Address

176C N US 1  
ORMOND BEACH, FL 32174

Changed: 01/21/2020

### Registered Agent Name & Address

BAYLOR, CONNIE  
176C N US 1  
ORMOND BEACH, FL 32174

Address Changed: 01/21/2020

### Authorized Person(s) Detail

#### Name & Address

Title MGR / AMBR

BAYLOR, CONNIE  
176C N US 1  
ORMOND BEACH, FL 32174

Title Manager



Ron DeSantis, Governor

Julie I. Brown, 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



**BAYLOR, CONNIE**  
DB CIVIL CONSTRUCTION, LLC  
1142 ATHLONE WAY  
★ ORMOND BEACH, FL 32174 ★

**LICENSE NUMBER: CUC1224644**

**EXPIRATION DATE: AUGUST 31, 2022**

Always verify licenses online at [MyFloridaLicense.com](http://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.

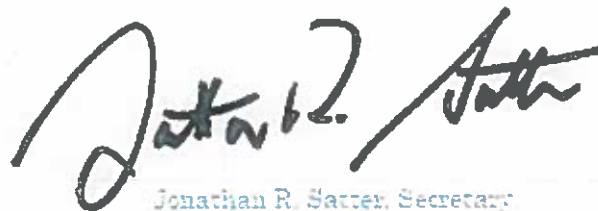
# State of Florida

## DB Civil Construction, LLC

Is certified under the provisions of  
287 and 295.187, Florida Statutes, for a period from:

09/27/2019

09/27/2021



Jonathan R. Satter, Secretary  
Florida Department of Management Services

Department of  
**MANAGEMENT  
SERVICES**



Office of Supplier Diversity

Office of Supplier Diversity  
4050 Esplanade Way, Suite 380  
Tallahassee, FL 32399  
850-487-0915  
[www.dms.myflorida.com/osd](http://www.dms.myflorida.com/osd)





GREATER ORLANDO  
AVIATION AUTHORITY



FLORIDA DEPARTMENT OF  
TRANSPORTATION  
DOT/DBE

*Florida Unified Certification Program*  
**Disadvantaged Business Enterprise (DBE)**  
**Certificate of Eligibility**

***DB CIVIL CONSTRUCTION LLC***  
***MEETS THE REQUIREMENTS OF 49 CFR, PART 26***

***APPROVED NAICS CODES:***  
***237110***

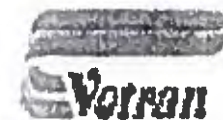
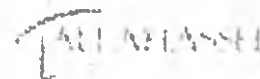


Samuel Febres

***Samuel (Sammy) Febres***  
***DBE & Small Business Development Manager***  
***Florida Department of Transportation***



***Tampa  
International  
Airport***



## Listing of Prequalified Contractors

Contractor with Name DB CIVIL CONSTRUCTION, LLC  
1-1 of 1 contractors

VENDOR NAME	HOME OFFICE ADDRESS	BIDDING OFFICE ADDRESS
DB CIVIL CONSTRUCTION, LLC F821245533001 EXPIRES: 6/30/2021	4475 US 1 SOUTH STE 502 ST AUGUSTINE, FL 32086 (386)256-7460	4475 US 1 SOUTH STE 502 ST AUGUSTINE, FL 32086 (386)256-7460
<b>WORK CLASSES</b>		
DRAINAGE		
GRASSING, SEEDING AND SODDING		
* Driveways, Underground Utilities (Water & Sewer) Water mains.		
FENCING		
SIDEWALK		

## PROPOSED SUBCONTRACTORS FORM

Name of Bidder: DB Civil Construction, LLC

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

Name of Contractor: DH Striping

Address: 750 Clark St. Oviedo, FL

Scope of Work to be Performed: Striping

Total \$ Value: \$ 12,839.00 % of Total BID/RFP: \_\_\_\_\_%

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Scope of Work to be Performed: \_\_\_\_\_

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

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Scope of Work to be Performed: \_\_\_\_\_

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

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Scope of Work to be Performed: \_\_\_\_\_

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

Name of Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Scope of Work to be Performed: \_\_\_\_\_

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

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

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

## RESPONSIBLE AGENT FORM

RESPONSIBLE AGENT: Dalton Baylor VP

ADDRESS: 4475 US 1 South, Ste 707 St. Augustine Fl 32086

PHONE NO.: 386-256-7460

FAX NO.: \_\_\_\_\_

EMAIL ADDRESS: estimating@dbcivilconstruction.com

ALTERNATE RESPONSIBLE AGENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

FAX NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

***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**

<b><u>NAME AND TITLE</u></b>		<b><u>ROLE IN THIS PROJECT</u></b>	<b><u>YEARS EXPERIENCE</u></b>	
DALTON BAYLOR MANAGER		PROJECT MANAGER	TOTAL 15	WITH THIS FIRM 4
<b><u>RELEVANT PROJECTS</u></b>				
<b>1. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> CITY OF DAVENPORT WATERMAIN REPLACEMENT, DAVENPORT, FL			<b><u>YEAR COMPLETED</u></b> 2021	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> 60,000 Linear feet of water main replacement. 6.2 MILLION			<input checked="" type="checkbox"/> Check if project completed with current firm	
<b>2. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> FDOT- VOLUSIA DRAINAGE, DAYTONA BEACH, FL			<b><u>YEAR COMPLETED</u></b> 2020	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> STORM DRAIN REPAIR, 413k			<input checked="" type="checkbox"/> Check if project completed with current firm	
<b>3. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> CITY OF WINTERHAVEN, WH REGIONAL AIRPORT UTILITIES			<b><u>YEAR COMPLETED</u></b> 2019	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> Gravity sewer, lift station, water main and fiber. 1.7 MILLION			<input checked="" type="checkbox"/> Check if project completed with current firm	
<b>4. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> FDOT A1A FLAGLER COUNTY SEAWALL, SUPERIOR CONSTRUCTION			<b><u>YEAR COMPLETED</u></b> 2019	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> 5369 LF 12" PVC WM, 850 LF 8" gravity sewer, \$1,197,000.00			<input checked="" type="checkbox"/> Check if project completed with current firm	
<b>5. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> CITY OF ORLANDO			<b><u>YEAR COMPLETED</u></b> 2019	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> 1,900 LF GRAVITY SEWER, \$850,000.00			<input checked="" type="checkbox"/> Check if project completed with current firm	
<b>6. <u>PROJECT TITLE AND LOCATION</u> (city and state)</b> CITY OF ST. AUGUSTINE			<b><u>YEAR COMPLETED</u></b> 2020	
<b><u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and SPECIFIC ROLE</b> Storm 15", 18"; Sewer 8"; Water 6", \$1,503,299.00			<input checked="" type="checkbox"/> Check if project completed with current firm	

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



STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**NON-COLLUSION DECLARATION AND  
COMPLIANCE WITH 49 CFR § 29**

575-060-13  
RIGHT OF WAY  
05/01  
Page 1 of 3

ITEM/SEGMENT NO \_\_\_\_\_  
F.A.P. NO. \_\_\_\_\_  
MANAGING DISTRICT \_\_\_\_\_  
PARCEL NO. \_\_\_\_\_  
COUNTY OF \_\_\_\_\_  
BID LETTING OF \_\_\_\_\_

I, CONNIE BAYLOR, hereby declare that I am  
(NAME)  
MANAGER of DB CIVIL CONSTRUCTION, LLC  
(TITLE) (FIRM)  
of ST. AUGUSTINE, FL  
(CITY AND STATE)

and that I am the person responsible within my firm for the final decision as to the price(s) and amount of this Bid on this State Project

I further declare that

1. The price(s) and amount of this bid have been arrived at independently, without consultation, communication or agreement, for the purpose of restricting competition with any other contractor, bidder or potential bidder.

2. Neither the price(s) nor the amount of this bid have been disclosed to any other firm or person who is a bidder or potential bidder on this project and will not be so disclosed prior to the bid opening.

3. No attempt has been made or will be made to solicit, cause or induce any other firm or person to refrain from bidding on this project, or to submit a bid higher than the bid of this firm, or any intentionally high or non-competitive bid or other form of complementary bid.

4. The bid of my firm is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary bid.

5. My firm has not offered or entered into a subcontract or agreement regarding the purchase of materials or services from any firm or person, or offered, promised or paid cash or anything of value to any firm or person, whether in connection with this or any other project, in consideration for an agreement or promise by any firm or person to refrain from bidding or to submit a complementary bid on this project.

6. My firm has not accepted or been promised any subcontract or agreement regarding the sale of materials or services to any firm or person, and has not been promised or paid cash or anything of value by any firm or person, whether in connection with this or any other project, in consideration for my firm's submitting a complementary bid, or agreeing to do so, on this project.

7. I have made a diligent inquiry of all members, officers, employees, and agents of my firm with responsibilities relating to the preparation, approval or submission of my firm's bid on this project and have been advised by each of them that he or she has not participated in any communication, consultation, discussion, agreement, collusion, act or other conduct inconsistent with any of the statements and representations made in this Declaration.

8. As required by Section 337.165, Florida Statutes, the firm has fully informed the Department of Transportation in writing of all convictions of the firm, its affiliates (as defined in Section 337.165(1)(a), Florida Statutes), and all directors, officers, and employees of the firm and its affiliates for violation of state or federal antitrust laws with respect to a public contract or for violation of any state or federal law involving fraud, bribery, collusion, conspiracy or material misrepresentation with respect to a public contract. This includes disclosure of the names of current employees of the firm or affiliates who were convicted of contract crimes while in the employ of another company.

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

9 I certify that, except as noted below, neither my firm nor any person associated therewith in the capacity of owner, partner, director, officer, principal, investigator, project director, manager, auditor, and/or position involving the administration of Federal funds

(a) is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions, as defined in 49 CFR §29.110(a), by any Federal department or agency.

(b) has within a three-year period preceding this certification been convicted of or had a civil judgment rendered against him or her for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a Federal, State or local government transaction or public contract, violation of Federal or State antitrust statutes, or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property,

(c) is presently indicted for or otherwise criminally or civilly charged by a Federal, State or local governmental entity with commission of any of the offenses enumerated in paragraph 9(b) of this certification, and

(d) has within a three-year period preceding this certification had one or more Federal, State or local government public transactions terminated for cause or default

10 I(We), certify that I(We), shall not knowingly enter into any transaction with any subcontractor, material supplier, or vendor who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this contract by any Federal Agency unless authorized by the Department

Where I am unable to declare or certify as to any of the statements contained in the above stated paragraphs numbered (1) through (10), I have provided an explanation in the "Exceptions" portion below or by attached separate sheet

#### EXCEPTIONS

(Any exception listed above will not necessarily result in denial of award but will be considered in determining bidder responsibility. For any exception noted, indicate to whom it applies, initiating agency and dates of agency action. Providing false information may result in criminal prosecution and/or administrative sanctions.)

I declare under penalty of perjury that the foregoing is true and correct

CONTRACTOR (Seal)

BY CONNIE BAYLOR  
NAME AND TITLE PRINTED

BY Connie Baylor  
SIGNATURE

WITNESS

WITNESS

Executed on this 3 day of May 2021

**FAILURE TO FULLY COMPLETE AND EXECUTE THIS DOCUMENT  
MAY RESULT IN THE BID BEING DECLARED NONRESPONSIVE**

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

**CERTIFICATION FOR DISCLOSURE OF LOBBYING ACTIVITIES  
ON FEDERAL-AID CONTRACTS  
(Compliance with 49CFR, Section 20.100 (b))**

The prospective participant certifies, by signing this certification, that to the best of his or her knowledge and belief:

(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities", in accordance with its instructions. (Standard Form-LLL can be obtained from the Florida Department of Transportation's Professional Services Administrator or Procurement Office.)

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The prospective participant also agrees by submitting his or her proposal that he or she shall require that the language of this certification be included in all lower tier subcontracts, which exceed \$100,000 and that all such subrecipients shall certify and disclose accordingly.

Name of Consultant:

By: Chris Bayl Date: 5/3/2021 Authorized Signature

Title: Manager

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**DISCLOSURE OF LOBBYING ACTIVITIES**

375-030-34  
 PROCUREMENT  
 02/16

Is this form applicable to your firm?  
 YES ☐ NO ☒  
 If no, then please complete section 4  
 below for "Prime"

<b>1. Type of Federal Action:</b> a contract b grant c cooperative agreement d loan e loan guarantee f loan insurance		<b>2. Status of Federal Action:</b> a bid/offer/application b initial award c post-award		<b>3. Report Type:</b> a initial filing b material change <b>For Material Change Only:</b> Year _____ Quarter _____ Date of last report _____ (mm/dd/yyyy)	
<b>4. Name and Address of Reporting Entity</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____ if known <b>DB CIVIL CONSTRUCTION, LLC</b> 4475 US 1 SOUTH, STE 707 ST. AUGUSTINE, FL 32086 Congressional District, if known 4c _____			<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime</b> _____ _____ _____ Congressional District, if known _____		
<b>6. Federal Department/Agency:</b> _____ _____			<b>7. Federal Program Name/Description:</b> _____ _____ CFDA Number, if applicable _____		
<b>8. Federal Action Number, if known:</b> _____			<b>9. Award Amount, if known:</b> \$ _____		
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI) _____ _____ _____			<b>b. Individuals Performing Services (including address if different from No. 10a)</b> (last name, first name, MI) _____ _____ _____		
<b>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b>			Signature <u>Connie Baylor</u> Print Name <u>CONNIE BAYLOR</u> Title <u>MANAGER</u> Telephone No. <u>386-256-7460</u> Date (mm/dd/yyyy) <u>5/3/21</u>		
<b>Federal Use Only:</b>			Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)		

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

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**CERTIFICATION REGARDING DEBARMENT, SUSPENSION,  
INELIGIBILITY AND VOLUNTARY EXCLUSION-  
LOWER TIER COVERED TRANSACTIONS FOR FEDERAL AID CONTRACTS**  
(Compliance with 2 CFR Parts 180 and 1200)

375-030-32  
PROCUREMENT  
11/15

It is certified that neither the below identified firm nor its principals are presently suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency

Name of Consultant/Contractor DB CIVIL CONSTRUCTION, LLC

By 

Date 5/3/21

Title MANAGER

Instructions for Certification

**Instructions for Certification - Lower Tier Participants**

(Applicable to all subcontracts, purchase orders and other lower tier transactions requiring prior FHWA approval or estimated to cost \$25,000 or more - 2 CFR Parts 180 and 1200)

- a By signing and submitting this proposal, the prospective lower tier is providing the certification set out below
- b The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department, or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- c The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous by reason of changed circumstances
- d The terms "covered transaction," "debarred," "suspended," "ineligible," "participant," "person," "principal," and "voluntarily excluded," as used in this clause, are defined in 2 CFR Parts 180 and 1200. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations. "First Tier Covered Transactions" refers to any covered transaction between a grantee or subgrantee of Federal funds and a participant (such as the prime or general contract). "Lower Tier Covered Transactions" refers to any covered transaction under a First Tier Covered Transaction (such as subcontracts). "First Tier Participant" refers to the participant who has entered into a covered transaction with a grantee or subgrantee of Federal funds (such as the prime or general contractor). "Lower Tier Participant" refers any participant who has entered into a covered transaction with a First Tier Participant or other Lower Tier Participants (such as subcontractors and suppliers).
- e The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- f The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions exceeding the \$25,000 threshold.
- g A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant is responsible for ensuring that its principals are not suspended, debarred, or otherwise ineligible to participate in covered transactions. To verify the eligibility of its principals, as well as the eligibility of any lower tier prospective participants, each participant may, but is not required to, check the Excluded Parties List System website (<https://www.epls.gov/>), which is compiled by the General Services Administration.
- h Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- i Except for transactions authorized under paragraph e of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

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

-Bidding Document - ITR - Services - Page 92 of 97



STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**BID OPPORTUNITY LIST FOR COMMODITIES & CONTRACTUAL  
SERVICES**

375-040-62  
PROCUREMENT  
01/16

Prime Contractor: DB CIVIL CONSTRUCTION, LLC

Address/Phone Number: 4475 US 1 SOUTH, STE 707, ST. AUGUSTINE, FL 32806

Procurement Number: \_\_\_\_\_

49 CFR Part 26.11 The list is intended to be a listing of all firms that are participating, or attempting to participate, on DOT-assisted contracts. The list must include all firms that bid on prime contracts, or bid or quote subcontracts and supplies materials on DOT-assisted projects, including both DBEs and non-DBEs. This list must include all subcontractors contacting you and expressing an interest in teaming with you on a specific DOT-assisted project. Prime contractors must provide information for Numbers 1, 2, 3 and 4, and should provide any information they have available on Numbers 5, 6, and 7 for themselves, and their subcontractors.

<p>1 Federal Tax ID Number <u>82-1245533</u></p> <p>2 Firm Name <u>DB CIVIL CONSTRUCTION, LLC</u></p> <p>3 Phone: <u>386-256-7460</u></p> <p>4 Address: <u>4475 US 1 SOUTH, STE 707</u> <u>ST. AUGUSTINE, FL 32806</u></p> <p>5 Year Firm Established <u>2017</u></p>	<p>6</p>	<p><input checked="" type="checkbox"/> DBE <input type="checkbox"/> Non-DBE</p> <p>7. Annual Gross Receipts  <input type="checkbox"/> Less than \$1 million  <input type="checkbox"/> Between \$1 - \$5 million  <input checked="" type="checkbox"/> Between \$5 - \$10 million  <input type="checkbox"/> Between \$10 - \$15 million  <input type="checkbox"/> More than \$15 million</p>
---	----------	--

<p>1 Federal Tax ID Number _____</p> <p>2 Firm Name _____</p> <p>3 Phone: _____</p> <p>4 Address: _____</p> <p>5 Year Firm Established _____</p>	<p>6</p>	<p><input type="checkbox"/> DBE <input type="checkbox"/> Non-DBE</p> <p>7. Annual Gross Receipts  <input type="checkbox"/> Less than \$1 million  <input type="checkbox"/> Between \$1 - \$5 million  <input type="checkbox"/> Between \$5 - \$10 million  <input type="checkbox"/> Between \$10 - \$15 million  <input type="checkbox"/> More than \$15 million</p>
--	----------	--

<p>1 Federal Tax ID Number _____</p> <p>2 Firm Name _____</p> <p>3 Phone: _____</p> <p>4 Address: _____</p> <p>5 Year Firm Established _____</p>	<p>6</p>	<p><input type="checkbox"/> DBE <input type="checkbox"/> Non-DBE</p> <p>7. Annual Gross Receipts  <input type="checkbox"/> Less than \$1 million  <input type="checkbox"/> Between \$1 - \$5 million  <input type="checkbox"/> Between \$5 - \$10 million  <input type="checkbox"/> Between \$10 - \$15 million  <input type="checkbox"/> More than \$15 million</p>
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<p>1 Federal Tax ID Number _____</p> <p>2 Firm Name _____</p> <p>3 Phone: _____</p> <p>4 Address: _____</p> <p>5 Year Firm Established _____</p>	<p>6</p>	<p><input type="checkbox"/> DBE <input type="checkbox"/> Non-DBE</p> <p>7. Annual Gross Receipts  <input type="checkbox"/> Less than \$1 million  <input type="checkbox"/> Between \$1 - \$5 million  <input type="checkbox"/> Between \$5 - \$10 million  <input type="checkbox"/> Between \$10 - \$15 million  <input type="checkbox"/> More than \$15 million</p>
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AS APPLICABLE, PLEASE SUBMIT THIS FORM WITH YOUR:

**BID SHEET (Invitation to Bid – ITB)  
PRICE PROPOSAL (Request for Proposal – RFP)  
REPLY (Invitation to Negotiate – ITN)**

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

**Bond Number: SFL21849731**

**Contractor Information**

**Principal:** DB Civil Construction, LLC

**Address:** 1760 US 1 Ormond Beach Florida 32720 United States

**Owner/Obligee Information**

**Bond Form:** Bid Bond In accordance with Contract Specifications

**Owner/Obligee:** Florida Department of Transportation

**Address:** 605 Suwanee Street MS 55 room B1 Tallahassee Florida 32399 United States

**Bond Information**

**Surety:** Western Surety Company

**Bid Date:** 4/5/2021

**Estimated Contract Price:** 350,000

**Time For Completion:**

**Liquidated Damages:**

**Estimated Work On Hand:**

**Amount of Bid Security:** 5%

**Contract # or IFB #:** PWDA-210023-MA

**Description of Job:** NW 19th Lane Multi-Use Trail

**Job Breakdown:**

**Electronic Bidding Information**

**Bid Security Percentage:** 5

**Bid Security Maximum:**

**Owner Assigned Contractor Number:**FB21245533

**Primary Agency:**

**Hackett Bonds & Insurance Services, LLC**

**Power of Attorney Limited to:** unlimited

**Executed**

**Entered By:** Sean McCauley, Jr. - 4/5/2021 10:07:00 AM ET

**Approved & Executed By:**

*Sean McCauley, Jr.*

Sean McCauley, Jr. (Signed: 05-Apr-2021 10:07 AM EDT  
(UTC-04:00))

[Signature Information](#)

Know all men by these presents that Western Surety Company, a Corporation duly organized under the laws of the State of South Dakota, are held and firmly bound unto the above owner/obligee by this transmission. The surety agrees to waive the Statute of Fraud defense and further agrees that the owner/obligee is a third party beneficiary of the waiver for the purposes of enforcing this bid bond.



## ADDENDUM NO. 1

Date: April 27, 2021

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

Bid Name ITB SW 27<sup>th</sup> St. Multi-Use Path (LAP 433989-1-58-01)

Bid No.: PWDA-210036-MS

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 3:00 p.m. (local time), April 23, 2021. Questions may be submitted as follows:

Email: [sowersma@cityofgainesville.org](mailto:sowersma@cityofgainesville.org)

And

[holderds@cityofgainesville.org](mailto:holderds@cityofgainesville.org)

2. Please find attached:

- a) Copy of the blackout period information (Financial Procedures Manual Section 41-424 Prohibition of lobbying in procurement matters).

The following are answers/clarifications to questions received:

3. Question: I am reaching out to find out if there is an SBE Participation Goal for this project and if so, what is the percentage?

Answer: There is no SBE goal. FDOT form 275-030-11 - DBE Bid Package Information, provided in Part 8 – Exhibits, provides the Disadvantage Business Enterprise goal. Comply with the instructions on the form and submit FDOT form 375-040-62 – Bid Opportunity List for Commodities & Contractual Services, provided in Part 8 – Exhibits.

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:

DB Civil Construction LLC

BY:

Cmm Bayle

DATE:

5-3-2021

ADDENDUM #1-1



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

## 41-424 Prohibition of lobbying in procurement matters

Except as expressly set forth in Resolution 170116, Section 9, during the Cone of Silence as defined herein no person may lobby, on behalf of a competing party in a particular procurement process, City Officials or employees, except the Procurement Division or the procurement designated staff contact person. Violation of this provision shall result in disqualification of the party on whose behalf the lobbying occurred.

Cone of Silence period means the period between the issue date which allows for immediate submittals to the City of Gainesville Procurement Division in response to an invitation to bid, or a request for proposal, or qualifications, or information, or an invitation to negotiate, as applicable, and the time that City Officials or the Procurement Division, or City Department awards the contract.

Lobbying means when a person seeks to influence or attempt to influence City Officials or employees with respect to a decision of the City, except as authorized by procurement procedures.