

BAKER COUNTY BOARD OF COUNTY COMMISSIONERS



AQUATIC PLANT MANAGEMENT OF POND 30 BID # 2016-05

BAKER COUNTY BOARD OF COUNTY COMMISSIONERS
ADMINISTRATION OFFICE
55 N THIRD STREET
MACCLENNY, FL 32063
PHONE: 904-259-3613
EMAIL: kennie.downing@bakercountyfl.org

INVITATION TO BID # 2016-05
AQUATIC PLANT MANAGEMENT OF POND 30

The Baker County Board of County Commissioners, Florida (County) will receive sealed bids until **5:00 p.m.** local time, on **October 12, 2016** at the County Administration Office located at 55 N. Third Street, Macclenny, Florida 32063. Bids delivered to any other location will not be considered received by the Administration Office. Any bids received after the above time will not be accepted under any circumstances. Any uncertainty regarding the time will be resolved against the Bidder. Bids will not be accepted via fax. Shortly after the bid due time has expired, the bids will be publically opened and announced.

A clearly marked original and five (5) copies must be sealed in an envelope and clearly marked **“BID 2016-05 Aquatic Plant Management of Pond 30”** on the exterior of the package submitted.

Request for additional information or clarifications must be made in writing to the Administration Office. Facsimile or e-mail questions are acceptable. The Administration Office will issue replies to inquiries and additional information or amendments deemed necessary in written addenda, which will be issued prior to the deadline for responding to this Invitation To Bid. Questions must be received no later than **3:00 p.m. on October 10, 2016.**

Baker County Board of County Commissioners
Administration Office
55 N. Third Street
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It will be the sole responsibility of the Bidder to contact the Administration Office prior to submitting a response to determine if any addenda have been issued, to obtain such addenda, and to acknowledge addenda with their bid.

Respondents to this solicitation or persons acting on their behalf may not contact, between the release of the solicitation and the end of the 72-hour period following the agency posting the notice of intended award, excluding Saturdays, Sundays, and County holidays, any employee or officer of the executive or legislative branch concerning any aspect of this solicitation, except in writing to the Administration Office or as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a response.

The Baker County Board of County Commissioners reserves the right to reject any or all bids, to waive any informalities or irregularities in any bids received, to re-advertise for bids, or take any similar actions that may be deemed to be in the best interest of the County.

BAKER COUNTY BOARD OF COUNTY COMMISSIONERS, FLORIDA

Kennie Downing, County Manager

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Invitation To Bid

Aquatic Plant Management of Pond 30

Bid 2016-05

INTRODUCTION

The Baker County Board of Commissioners (hereforth referred as "County") seeks to enter into a contract with a qualified company to provide aquatic plant management of Pond 30 is approximately 2.6 surface acres, located at 6409 US 90 West, and lies within Veterans Memorial Park in Macclenny, Florida. The park is used for recreational fishing and small non-engine boating. The County wishes to award a one (1) year contract with the option to renew for two (2) additional one year terms. Contract will be awarded to the lowest responsible bidder.

QUALIFICATIONS

- 1) Bidder must have been in the business of performing aquatic pond maintenance services for a minimum of three (3) years.
- 2) Employees performing services to the County must possess a valid Certified Applicators license from the State of Florida.

SCOPE OF WORK FOR AQUATIC PLANT MANAGEMENT

- 1) The Bidder will provide all labor, equipment, herbicides and technology to control algae, torpedograss (shoreline grasses), pennywort, alligatorweed, and any other noxious aquatic weeds or algae in Pond 30.
- 2) The Bidder will inspect and/or apply the herbicide once each month to control and prevent underwater and floating vegetation from reestablishing in Pond 30 @ Veterans Memorial Park .
- 3) The Bidder will use only State of Florida approved herbicides, application techniques, and provide certificated applicators in treating Pond 30. Bidder shall provide monthly written services reports/ invoices.
- 4) Any requirement for callback services in between monthly treatments shall be included in the "monthly fee".
- 5) Services shall be provided in accordance with to local, state, and federal guidelines, codes,

and policies.

- 6) Services may be terminated by the County with or without cause by delivery of 30-day written notice to the bidder. The bidder shall invoice and be paid for services rendered through expiration of the 30-day notice.

Bid Price Sheet
 AQUATIC PLANT MANAGEMENT OF POND 30
 BID # 2016-05

The Contractor may submit a written bid in person, by U.S. Mail, or by mail carrier; no facsimiles will be accepted. Include proof of insurance, proof of pesticide licenses, conflict of interest questionnaire, and Bid Price Sheet in your submittal.

The City reserves the right to request additional information or to meet with representatives from proposing organizations or individuals to discuss points in the bid before and after submission, any and all of which may be used in forming a recommendation.

FULL LEGAL FIRM/COMPANY NAME: _____

ADDRESS: _____

CITY _____ STATE: _____ ZIP CODE: _____

CONTACT NAME: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

EMAIL ADDRESS: _____

Item	DESCRIPTION	UNIT PRICE	ANNUAL COST
1.	Aquatic Plant Management services as described in this bid.	\$_____ / mo	\$_____

I certify that this offer is made without prior understanding, agreement, or connection, with any Corporation, firm or person submitting an offer for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this offer and certify that I am authorized to sign this offer for the offeror and that the offeror is in compliance with all requirements of the solicitation, including but not limited to certification requirements.

Signature _____ Date _____

Bid Due Date and Time

Bids shall be submitted in a sealed envelope or package. All Bids submitted must be received in the Administration Office by the time specified in this solicitation. It is the sole responsibility of the Bidder to ensure that Proposals are received in the Administration Office by the due date and time. **The County shall not be responsible for delays caused by any occurrence.** Proposals received by the County after the time specified for receipt will not be considered.

a. Proposal Due Date

Sealed Proposals must be received at the Baker County Board of County Commissioners Administration Office, no later than **5:00 p.m. on October 12, 2016.**

b. Public Opening

There is no public opening of the proposals.

c. Public Record

Pursuant to Chapter 119, Florida Statutes, proposals received in response to this Request for Proposal are exempt from disclosure under the provisions of the Public Records Law until such time as an award decision has been made known or within thirty (30) days after the Proposal opening, whichever is earlier.

Method of Selection

The bid shall be awarded to the lowest responsive and responsible bidder. Authority to Award will be presented to County Commission for final award.

Reserved Rights - The County, at its sole and absolute discretion, reserves the right to reject any and all, or parts of any and all proposals, to re-advertise this solicitation, postpone or cancel, at any time, this solicitation process, or to waive minor irregularities and informalities in this BID or in the proposals received as a result of this BID.

Questions Regarding the Solicitation Process

To ensure fair consideration for all Bidders, the County prohibits communication to or with any officer, elected official, department, division, office or employee of the County, and any Evaluation Committee members during the solicitation process from the date of issuance of the BID through award, except as provided below. **All communications must be made through the Administration Office.** Any communications in violation of this provision

may be grounds for disqualifying the offending Bidder from consideration for award of the Proposal and/or any future Proposal.

Any questions relative to interpretation of the solicitation or the Proposal process shall be addressed in writing as indicated below. Questions must be received by the Administration Office on or before the cut-off date for questions as specified in the Proposal Schedule. Questions received after the cut-off date as specified in the Proposal Schedule will not be considered.

Addendum to Request for Proposals

Any interpretation, revision, or amendment to this BID will be expressed in the form of an addendum to the solicitation which, if issued, will be conveyed in writing to all prospective Bidders no later than five (5) days prior to the date set for receipt of Proposals. Oral answers will not be authoritative.

Indemnification

The Respondent agrees to indemnify and hold the County harmless for any and all claims, liability, losses and causes of action which may arise out of its fulfillment of the contract awarded pursuant to this BID. It agrees to pay all claims and losses, including related court costs and reasonable attorneys' fees, and shall defend all suits filed due to the negligent acts, error or omissions or Respondent employees and/or agents. In the event the completion of a project awarded pursuant to this BID (to include the work of others) is delayed or suspended as a result of the Respondent's failure to purchase or maintain the required insurance, the Respondent shall indemnify the County from any and all increased expenses resulting from such delay.

Insurance Requirements

The Bidder will be required to furnish evidence of the following insurance coverage by a licensed Florida Company.

A. Without limiting Bidder's indemnification, it is agreed that the successful Bidder will purchase at their expense and maintain in force at all times during the performance of services under this agreement the following insurance. Where specific limits are shown, it is understood that they must be the minimum acceptable limits. If successful Bidder's policy contains higher limits, the Baker County Board of County Commissioners will be entitled to coverage to the extent of such higher limits. Certificates of Insurance must be furnished to the County naming the Baker County Board of County Commissioners as additional insured. These certificates must provide a ten (10) calendar day notice to the County in the event of cancellation, non-renewal or a material change in the policy.

1. Workers' compensation insurance to apply for all employees of the contractor, sub-contractors and the contractor's architect and/or engineer meeting the "Workers' Compensation Law" of the State of Florida and all applicable federal laws.

2. Commercial General Liability insurance to provide coverage of not less than one million dollars (\$1,000,000) combined single limit per occurrence and annual aggregates where generally applicable and must include premises-operations, independent contractors, products/completed operations, broad form property damage, blanket contractual and personal injury endorsements.

3. Comprehensive Automobile Liability Insurance covering all owned, hired and non-owned vehicles with coverage limits not less than one hundred thousand dollars (\$100,000) per person, three hundred thousand dollars (\$300,000) per occurrence and one hundred thousand dollars (\$100,000) property damage.

B. The official title of the owner is "Baker County Board of County Commissioners". This official title will be used in all insurance documentation.

Proof of Insurance

The Bidder will furnish to the Administration Office Certificates of Insurance or endorsements evidencing the insurance coverage specified above within seven (7) days after notification of an award. The required Certificates of Insurance or endorsements will not only name the types of policies continued, but will also refer specifically to this contract and will state that such insurance is as required by this contract. If the initial insurance expires before the completion of the work, renewal Certificates of Insurance will be furnished thirty (30) days before the date of their expiration. Notice of cancellation and/or restriction Policy(s) must be endorsed to give the County thirty (30) days' notice of cancellation and / or restriction.

[The balance of this page has been left intentionally blank. The following pages are required forms that must be submitted with the bid.]

**SWORN STATEMENT UNDER SECTION
287.133(3)(n), FLORIDA STATUTES ON PUBLIC ENTITY CRIMES**

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted with BID No. _____.
2. This sworn statement is submitted by _____ whose business address is _____ and (if applicable) it's Federal Identification No. (FEIN) is _____. If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement _____.
3. My name is _____ and my relationship to the entity named above is _____.
4. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to, and directly related to, the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy or material misrepresentations.
5. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes means:
 - a. A predecessor or successor of a person convicted of a public entity crime; or
 - b. an entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members and agents who are active in the management of an affiliate. The Ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or

income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

7. I understand that a "person" as defined in Paragraph 287.133 (1) (c), Florida Statutes, means any natural person or entity organized under the laws of any state of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members and agents who are active in management of an entity.

8. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies)

Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members or agents who are active in neither management of the entity, nor any affiliate of the entity have been charged with or convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity, or an affiliate of the entity has been charged with, and convicted of a public entity crime subsequent to July 1, 1989, and (Please indicate which additional statement applies)

There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order)

The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order)

The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by, or pending with, the Department of General Services)

Signature: _____ Date _____

STATE OF _____

COUNTY OF _____

Personally appeared before me, the undersigned authority, _____ who after first being sworn by me, affixed his/her signature in the space provided above and on this _____ day of _____ 20_____.

Notary Public, State at large

My Commission Expires:

THIS FORM MUST BE INCLUDED WITH PROPOSAL

CONFLICT OF INTEREST STATEMENT

STATE OF FLORIDA, COUNTY OF _____

Before me, the undersigned authority, personally appeared _____, who was duly sworn deposes and states:

1. I am the _____ of _____ with a local office in _____ and principal office in _____ and principal office in _____ County & State _____ County & State _____.
2. The above named entity is submitting a Proposal for the Baker County Board of County Commissioners **BID 2016-05** described as **Aquatic Plant Management for Pond 30**.
3. The Affiant has made diligent inquiry and provides the information contained in the Affidavit based upon his/her own knowledge.
4. The Affiant states that only one submittal for the above proposal is being submitted and that the above named entity has no financial interest in other entities submitting proposals for the same project.
5. Neither the Affiant nor the above named entity has directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraints of free competitive pricing in connection with the entity's submittal for the above proposal. This statement restricts the discussion of pricing data until the completion of negotiations if necessary and execution of the Contract for this project.
6. Neither the entity nor its affiliates, nor anyone associated with them, is presently suspended or otherwise ineligible from participation in contract letting by any local, State, or Federal Agency.
7. Neither the entity nor its affiliates, nor anyone associated with them have any potential conflict of interest due to any other clients, contracts, or property interests for this project.
8. I certify that no member of the entity's ownership or management is presently applying for an employee position or actively seeking an elected position with the Baker County Board of County Commissioners.
9. I certify that no member of the entity's ownership or management, or staff has a vested interest in any aspect of the Baker County Board of County Commissioners.
10. In the event that a conflict of interest is identified in the provision of services, I, on behalf of the above named entity, will immediately notify the Baker County Board of County Commissioners.

DATED: this _____ day of _____ 20_____.

(Affiant)

Typed Name and Title

Sworn to and subscribed before me this ____ day of _____ 20_____
_____. Personally Known _____ Or
produced identification _____.
Identification _____ type: _

Notary Public-State _____ of _

Printed, typed, or stamped commissioned name of notary public.
My commission expires _____.

THIS FORM MUST BE INCLUDED WITH PROPOSAL

DISPUTES DISCLOSURE FORM

Answer the following questions by placing an "X" after "YES" or "NO". If you answer "YES", please explain in the space provided, or via attachment.

Has your firm or any of its officers, received a reprimand of any nature or been suspended by the Department of Professional Regulations or any other regulatory agency or professional association within the last five (5) years?

YES _____ NO _____

Has your firm, or any member of your firm, been declared in default, terminated or removed from a contract or job related to the services your firm provides in the regular course of business within the last five (5) years?

YES _____ NO _____

Has your firm had against it or filed any request for equitable adjustment, contract claims, bid protest, or litigation in the past five (5) years that is related to the services your firm provides in the regular course of business?

YES _____ NO _____

If yes, state the nature of the request for equitable adjustment, contract claim, litigation, or protest, and state a brief description of the case, the outcome or status of the suit and the monetary amounts or extended contract time involved.

I hereby certify that all statements made are true and agree and understand that any misstatement or misrepresentation or falsification of facts shall be cause for forfeiture of rights for further consideration of this proposal for the Baker County Board of County Commissioners.

Firm Date

Authorized Signature Printed or Typed Name and Title

THIS FORM MUST BE INCLUDED WITH PROPOSAL

DRUG FREE WORKPLACE CERTIFICATE

I, the undersigned, in accordance with Florida Statute 287.087, hereby certify that, _____ (print or type name of firm) publishes a written statement notifying that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace named above, and specifying actions that will be taken against violations of such prohibition.

- Informs employees about the dangers of drug abuse in the work place, the firm’s policy of maintaining a drug free working environment, and available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug use violations.
- Gives each employee engaged in providing commodities or contractual services that are under bid or proposal, a copy of the statement specified above.
- Notifies the employees that as a condition of working on the commodities or contractual services that are under bid or proposal, the employee will abide by the terms of the statement and will notify the employer of any conviction of, plea of guilty or nolo contender to, any violation of Chapter 1893, of any controlled substance law of the State of Florida or the United States, for a violation occurring in the work place, no later than five (5) days after such conviction, and requires employees to sign copies of such written (*) statement to acknowledge their receipt.
- Imposes a sanction on, or requires 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.
- Makes a good faith effort to continue to maintain a drug free work place through the implementation of the drug free workplace program.

“As a person authorized to sign this statement, I certify that the above named business, firm or corporation complies fully with the requirements set forth herein”

Authorized Signature

Date Signed

State of Florida
County of _____

Sworn to and subscribed before me this _day of _____ 20__.
Personally known ___ or Produced Identification _____

Signature of Notary
My Commission Expires: _____

THIS FORM MUST BE INCLUDED WITH PROPOSAL

BIDDER CHECK LIST

IMPORTANT: Please read carefully, sign in the spaces indicated and return with your Proposal.

Bidder should check off each of the following items as the necessary action is completed:

- The Bid has been signed.
- All information as requested in the BID is included.
- All applicable forms have been signed and included.
- Any addenda have been signed and included.
- The mailing envelope has been addressed to:

Baker County Board of
County Commissioners
Administration Office
55 N. 3rd Street
Macclenny, Florida 32063

- The mailing envelope must be sealed and marked with BID Number, Title and Due Date.**
- The Bid will be mailed or delivered in time to be received no later than the specified due date and time. (Otherwise Proposal cannot be considered.)

ALL COURIER-DELIVERED PROPOSALS MUST HAVE THE BID NUMBER, TITLE AND DUE DATE ON THE OUTSIDE OF THE COURIER PACKET

Company

Address

Authorized Signature

County, State, Zip Code

Printed Name & Title

Telephone No.

Email

Fax No.

THIS FORM MUST BE INCLUDED WITH PROPOSAL

Cut and use this label for PROPOSAL Package

BAKER COUNTY BOARD OF
COUNTY COMMISSIONERS
ADMINISTRATION OFFICE
55 N. 3RD STREET
MACCLENNY, FLORIDA 32063

BID-2016-05
AQUATIC PLANT MANAGEMENT OF POND 30

DEADLINE DATE/TIME:

October 12, 2016 by

5:00 p.m.