

LEE COUNTY, FLORIDA  
PROPOSAL QUOTE FORM  
FOR  
JANITORIAL SERVICES FOR NORTHWEST REGIONAL LIBRARY

DATE SUBMITTED: 12/17/2014VENDOR NAME: Reliance Contractors Inc.

TO: The Board of County Commissioners  
Lee County  
Fort Myers, Florida

Having carefully examined the "General Conditions", and the "Detailed Specifications", all of which are contained herein, the Undersigned proposes to furnish the following which meet these specifications:

**NOTE REQUIREMENT: IT IS THE SOLE RESPONSIBILITY OF THE VENDOR TO CHECK LEE COUNTY PROCUREMENT MANAGEMENT WEB SITE FOR ANY PROJECT ADDENDA ISSUED FOR THIS PROJECT. THE COUNTY WILL POST ADDENDA TO THIS WEB PAGE, BUT WILL NOT NOTIFY.**

The undersigned acknowledges receipt of Addenda numbers: #1, 12/12/14

**TOTAL ANNUAL CHARGES**  
(BASIS OF AWARD)

\$ 45,600.00  
ANNUAL COST

**OPTIONS:**

a) COST TO ADD/DELETE AN EVENING OF SERVICE

\$ 120.00  
Cost Per Evening

b) COST TO ADD/DELETE MID DAY PERSON

\$ 40.00  
Cost Per Service

c) COST TO ADD/DELETE FULL DAY PORTER

\$ 39,000.00  
Annual Cost

d) HOURLY RATE/PERSON FOR EMERGENCY WORK

\$ 35.00  
Per Hour

e) HOURLY RATE PER PERSON FOR ADDED SPACE OR ITEM

\$ 18.00  
Per Hour

TO BE STARTED WITHIN 7 CALENDAR DAYS AFTER RECEIPT OF  
AWARD AND PURCHASE ORDER.

**REQUIRED ANCILLARY BID INFORMATION**

**Note:** The following required information is for monitoring, and internal analysis and evaluation purposes only. All contractual prices shall be included in the space provided, above, for your "Total Annual Charges" Annual cost; the basis of award.

Provide estimated hours or estimated cost for the following:

- |   |  |
|---|--|
| 1. <u>DAILY SERVICES</u>                |  |
| a. Restrooms                            | <u>2</u> Total Estimated Daily Hours           |
| b. Kitchen                              | <u>1</u> Total Estimated Daily Hours           |
| c. Outside                              | <u>1</u> Total Estimated Daily Hours           |
| d. Interior (not covered above)         | <u>2</u> Total Estimated Daily Hours           |
| 2. <u>MIDDAY SERVICE</u>                |  |
| a. Restrooms                            | <u>3</u> Total Estimated Daily Hours           |
| 3. <u>WEEKLY SERVICE</u>                |  |
|   | <u>9</u> Total Estimated Hours                 |
| 4. <u>SEMI-MONTHLY SERVICE</u>          |  |
|   | <u>3</u> Total Estimated Hours                 |
| 5. <u>MONTHLY SERVICE</u>               |  |
|   | <u>10</u> Total Estimated Hours                |
| 6. <u>QUARTERLY SERVICE</u>             |  |
| a. Carpet and Upholstery Cleaning       | <u>5300</u> Total Estimated Price Per Cleaning |
| b. Balance of services (See Checklist)  | <u>35</u> Total Estimated Hours                |
| 7. <u>SEMI-ANNUAL SERVICE</u>           |  |
| a. High Glass Cleaning Int/Ext Cleaning | <u>500</u> Total Estimated Price Per           |
| b. Strip/Wax Vinyl Floors               | <u>10</u> Total Estimated Hours                |
| c. Building Pressure Washing            | <u>4000</u> Total Estimated Price Per Cleaning |

Quoters should carefully read all the terms and conditions of the specifications. Any representation of deviation or modification to the quote may be grounds to reject the quote.

Are there any modifications to the quote or specifications?

YES \_\_\_\_\_ NO ✓ \_\_\_\_\_

Failure to clearly identify any modifications in the space below or on a separate page may be grounds for the quoter being declared nonresponsive or to have the award of the quote rescinded by the County.

MODIFICATIONS:

Bidder shall submit his/her bid on the County's Proposal Quote Form, including the firm name and authorized signature. Any blank spaces on the Proposal Quote Form, qualifying notes or exceptions, counter offers, lack of required submittals, or signatures, on County's Form may result in the Bidder/Bid being declared non-responsive by the County.

ANTI-COLLUSION STATEMENT

**THE BELOW SIGNED BIDDER HAS NOT DIVULGED TO, DISCUSSED OR COMPARED HIS BID WITH OTHER BIDDERS AND HAS NOT COLLUDED WITH ANY OTHER BIDDER OR PARTIES TO A BID WHATSOEVER. NOTE: NO PREMIUMS, REBATES OR GRATUITIES TO ANY EMPLOYEE OR AGENT ARE PERMITTED EITHER WITH, PRIOR TO, OR AFTER ANY DELIVERY OF MATERIALS. ANY SUCH VIOLATION WILL RESULT IN THE CANCELLATION AND/OR RETURN OF MATERIALS (AS APPLICABLE).**

FIRM NAME: Reliance Contractors Inc.BY (Printed): Joshua BeckerBY (Signature): TITLE: President.

FEDERAL ID # OR S.S.# \_\_\_\_\_

ADDRESS: 199 E Flagler St. #155  
Miami FL, 33131PHONE NO.: (305) 575-9149 Direct / (877) 499-9267 office

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

CELLULAR PHONE/PAGER NO.: (305) 575-9149DUNS#: 079568040

LEE COUNTY LOCAL BUSINESS TAX ACCOUNT NUMBER: \_\_\_\_\_

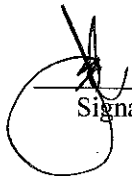
E-MAIL ADDRESS: jbecker@reliancecontractors.comDISADVANTAGED BUSINESS ENTERPRISE (DBE): In Process of Approval.

AFFIDAVIT CERTIFICATION  
IMMIGRATION LAWSSOLICITATION NO.: IFB150064 PROJECT NAME: Journal Services for Northwest  
Regional Library

LEE COUNTY WILL NOT INTENTIONALLY AWARD COUNTY CONTRACTS TO ANY CONTRACTOR WHO KNOWINGLY EMPLOYS UNAUTHORIZED ALIEN WORKERS, CONSTITUTING A VIOLATION OF THE EMPLOYMENT PROVISIONS CONTAINED IN 8 U.S.C. SECTION 1324 a(e) {SECTION 274A(e) OF THE IMMIGRATION AND NATIONALITY ACT ("INA").

LEE COUNTY MAY CONSIDER THE EMPLOYMENT BY ANY CONTRACTOR OF UNAUTHORIZED ALIENS A VIOLATION OF SECTION 274A(e) OF THE INA. **SUCH VIOLATION BY THE RECIPIENT OF THE EMPLOYMENT PROVISIONS CONTAINED IN SECTION 274A(e) OF THE INA SHALL BE GROUNDS FOR UNILATERAL CANCELLATION OF THE CONTRACT BY LEE COUNTY.**

BIDDER ATTESTS THAT THEY ARE FULLY COMPLIANT WITH ALL APPLICABLE IMMIGRATION LAWS (SPECIFICALLY TO THE 1986 IMMIGRATION ACT AND SUBSEQUENT AMENDMENTS).


 Company Name: Reliance Contractors Inc.  
 Signature \_\_\_\_\_ Title President Date Dec. 17, 2014

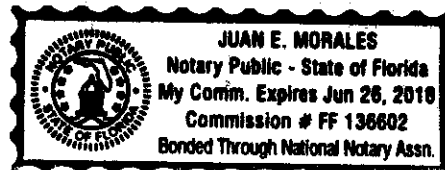
STATE OF Florida  
COUNTY OF Dade

The foregoing instrument was signed and acknowledged before me this 17 day of December 2014, by Joshua David Becker who has produced  
 (Print or Type Name)  
Florida Driver's licence as identification.  
 (Type of Identification and Number)

Notary Public Signature

Juan E. Morales  
 Printed Name of Notary Public

06/26/2018  
 Notary Commission Number/Expiration



The signee of this Affidavit guarantee, as evidenced by the sworn affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made. **LEE COUNTY RESERVES THE RIGHT TO REQUEST SUPPORTING DOCUMENTATION, AS EVIDENCE OF SERVICES PROVIDED, AT ANY TIME.**

# Local Business Tax Receipt

Miami-Dade County, State of Florida

THIS IS NOT A BILL - DO NOT PAY

# LBT

7176046

**BUSINESS NAME/LOCATION**  
RELIANCE CONTRACTORS INC  
OPERATING IN DADE COUNTY

**RECEIPT NO.**  
NEW BUSINESS  
7455796

**EXPIRES**  
SEPTEMBER 30, 2015

Must be displayed at place of business  
Pursuant to County Code  
Chapter 8A - Art. 9 & 10

**OWNER**  
RELIANCE CONTRACTORS INC  
C/O JOSHUA D BECKER

**SEC. TYPE OF BUSINESS**  
213 SERVICE BUSINESS

**PAYMENT RECEIVED  
BY TAX COLLECTOR**

Employee(s) 1

75.00 10/01/2014  
0221-15-000033

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276

For more information, visit [www.miamidade.gov/taxcollector](http://www.miamidade.gov/taxcollector)

MIAMI-DADE  
COUNTY