

LEE COUNTY, FLORIDA  
PROPOSAL QUOTE FORM  
FOR  
THE PURCHASE OF MULCH

DATE SUBMITTED: 6/5/2015VENDOR NAME: Forestry Resources, 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: \_\_\_\_\_

**SECTION A: FLORI MULCH**

PRICE PER YARD – PICKED UP	\$ <u>17.25</u> YD
PRICE PER YARD – DELIVERED	\$ <u>19.75</u> CU. YD.
MINIMUM NUMBER OF YARDS FOR DELIVERY	<u>80</u> CU. YD.
PRICE PER 80 CU. YD. LOT – PICKED UP	\$ <u>17.25</u> CU. YD.
PRICE PER 80 CU. YD. LOT – DELIVERED	\$ <u>19.75</u> CU. YD.
BAGS OF FLORI MULCH	BAG SIZE <u>2</u> CU.FT.
COST PER BAG – PICKED UP	\$ <u>1.59</u> PER BAG
COST PER BAG – DELIVERED	\$ <u>1.79</u> PER BAG
MINIMUM NUMBER OF BAGS FOR DELIVERY	<u>1260</u> BAGS
DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD	\$ <u>85.00</u>

**SECTION B: VITA MULCH**

PRICE PER YARD – PICKED UP \$ 14.00 YD

PRICE PER YARD – DELIVERED \$ 16.00 CU. YD.

PRICE PER 80 CU. YD. LOT – PICKED UP \$ 14.00 CU. YD.

PRICE PER 80 CU. YD. LOT – DELIVERED \$ 16.00 CU. YD.

MINIMUM NUMBER OF YARDS FOR DELIVERY 600 CU. YD.

BAGS OF VITA MULCH BAG SIZE 2 CU.FT.

COST PER BAG – PICKED UP \$ 1.40 PER BAG

COST PER BAG – DELIVERED \$ 1.60 PER BAG

MINIMUM NUMBER OF BAGS FOR DELIVERY 630 BAGS

DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD \$ 85.00

**SECTION C: SPECIALTY RED/GOLD MULCH**

PRICE PER YARD – PICKED UP \$ 19.00 YD

PRICE PER YARD – DELIVERED \$ 21.50 CU. YD.

MINIMUM NUMBER OF YARDS FOR DELIVERY 80 CU. YD.

PRICE PER 80 CU. YD. LOT – PICKED UP \$ 19.00 CU. YD.

PRICE PER 80 CU. YD. LOT – DELIVERED \$ 21.50 CU. YD.

BAGS OF SPECIALTY RED/GOLD MULCH BAG SIZE 2 CU.FT.

COST PER BAG – PICKED UP \$ 1.95 PER BAG

COST PER BAG – DELIVERED \$ 2.20 PER BAG

MINIMUM NUMBER OF BAGS FOR DELIVERY 700 BAGS

DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD \$ 85.00

**SECTION D: ENGINEERED WOOD FIBER (EWF)**

PRICE PER YARD – PICKED UP \$ 24.76 YD

PRICE PER YARD – DELIVERED \$ 25.76 CU. YD.

MINIMUM NUMBER OF YARDS FOR DELIVERY 100 CU. YD.

PRICE PER ~~80~~ <sup>100</sup> CU. YD. LOT – PICKED UP \$ 24.76 CU. YD.

PRICE PER ~~80~~ <sup>100</sup> CU. YD. LOT – DELIVERED \$ 25.76 CU. YD.

EWF is 100 per truckload

BAGS

BAG SIZE 2 CU.FT. (Special order only)

COST PER BAG – PICKED UP \$ 2.25 PER BAG

COST PER BAG – DELIVERED \$ 2.39 PER BAG

\* MINIMUM NUMBER OF BAGS FOR DELIVERY

1350 BAGS \* 18 pallet minimum

DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD

\$ N/A (Special order)  
\* Must order FULL Loads

**SECTION E: PRO EUC MULCH**

PRICE PER YARD – PICKED UP \$ 19.00 YD

PRICE PER YARD – DELIVERED \$ 21.50 CU. YD.

MINIMUM NUMBER OF YARDS FOR DELIVERY 80 CU. YD.

PRICE PER 80 CU. YD. LOT – PICKED UP \$ 19.00 CU. YD

PRICE PER 80 CU. YD. LOT – DELIVERED \$ 21.50 CU. YD.

BAGS OF PRO EUC MULCH

BAG SIZE 2 CU.FT.

COST PER BAG – PICKED UP

\$ 2.09 PER BAG

COST PER BAG – DELIVERED \$ 2.29 PER BAG  
 MINIMUM NUMBER OF BAGS FOR DELIVERY 700 BAGS  
 DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD \$ 85.00

**SECTION F: PINE BARK**

PRICE PER YARD – PICKED UP \$ 22.75 YD  
 PRICE PER YARD – DELIVERED \$ 25.00 CU. YD.  
 MINIMUM NUMBER OF YARDS FOR DELIVERY 100 CU. YD.  
 PRICE PER 100 CU. YD. LOT – PICKED UP \$ 22.75 CU. YD.  
 PRICE PER 100 CU. YD. LOT – DELIVERED \$ 25.00 CU. YD.  
 BAGS OF PINE BARK BAG SIZE 2 CU.FT.

COST PER BAG – PICKED UP \$ 2.25 PER BAG  
 COST PER BAG – DELIVERED \$ 2.45 PER BAG  
 MINIMUM NUMBER OF BAGS FOR DELIVERY 700 BAGS  
 DELIVERY CHARGE FOR A PARTIAL TRUCK LOAD \$ 85.00

**SECTION G: PINE STRAW**

COST PER BALE – PICKED UP \$ 3.85 YD  
 COST PER BALE – DELIVERED \$ 4.45 CU. YD  
 MINIMUM NUMBER OF BALES FOR DELIVERY 150 BALES.

**SECTION H: WASHED SHELL**

PICKED UP

- |                             |                                |
|-----------------------------|--------------------------------|
| 1) 1/2" SIZE (Small)        | \$ <u>42.00</u> PER CUBIC YARD |
| 2) 1" - 1 1/2" SIZE (Large) | \$ <u>42.00</u> PER CUBIC YARD |

DELIVERED

- |                     |                                |
|---------------------|--------------------------------|
| 1) 1/2" SIZE        | \$ <u>47.00</u> PER CUBIC YARD |
| 2) 1" - 1 1/2" SIZE | \$ <u>47.00</u> PER CUBIC YARD |

MINIMUM NUMBER OF YARDS FOR DELIVERY

20 CU. YD.

**SECTION I: BROWN RIVER ROCK**

PICKED UP

- |                     |                                 |
|---------------------|---------------------------------|
| 1) 1/2" - 1" SIZE   | \$ <u>105.00</u> PER CUBIC YARD |
| 2) 1 1/2" - 2" SIZE | \$ <u>145.00</u> PER CUBIC YARD |

DELIVERED

- |                     |                                 |
|---------------------|---------------------------------|
| 1) 1/2" - 1" SIZE   | \$ <u>111.00</u> PER CUBIC YARD |
| 2) 1 1/2" - 2" SIZE | \$ <u>151.00</u> PER CUBIC YARD |

MINIMUM NUMBER OF YARDS FOR DELIVERY

15 CU. YD.

**SECTION J: CRUSHED SHELL**

PICKED UP

- |  |                                |
|--|--------------------------------|
| 1) <del>1/2" - 1" SIZE</del> 1/4" - 1/2" | \$ <u>42.00</u> PER CUBIC YARD |
| 2) 1" - 1 1/2" SIZE                      | \$ <u>42.00</u> PER CUBIC YARD |

DELIVERED

- |  |                                |
|--|--------------------------------|
| 1) <del>1/2" - 1" SIZE</del> 1/4" - 1/2" | \$ <u>47.00</u> PER CUBIC YARD |
|--|--------------------------------|

2) 1" – 1 ½" SIZE

\$ 47.00 PER CUBIC YARD

MINIMUM NUMBER OF YARDS FOR DELIVERY

20 CU. YD.

**SECTION K: BLOWN IN MULCH**

**PRICE PER CUBIC YARD FOR INSTALLATION:**

1. FLORA MULCH

\$ N/A PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

2. VITA MULCH

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

3. SPECIALTY RED OR GOLD MULCH

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

4. ENGINEERED WOOD FIBER (EWF)

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

5. PRO EUC MULCH

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

6. MEDIUM RUSTIC PINE BARK NUGGETS

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

7. PINE STRAW

\$ \_\_\_\_\_ PER CUBIC YARD

LABOR TO INSTALL

\$ \_\_\_\_\_ PER CUBIC YARD

TO BE STARTED WITHIN 3-4 CALENDAR DAYS AFTER RECEIPT OF AWARD  
AND PURCHASE ORDER.

WILL YOU DELIVER WITH YOUR OWN VEHICLE AS OPPOSED TO COMMON CARRIER?  
YES ✓ NO ✓

**Alternate options for Certified Playsafe Material  
Bid # B-150271**

**Product: Playsafe**

Price per cubic yard picked up \$ 19.75

Price per cubic yard delivered \$ 22.25

Minimum number of cubic yards for delivery 80 yards

Size of bag 2CF

Cost per bag - picked up \$ 1.75

Cost per bag - delivered \$ 2.00

Minimum number of bags for delivery 650

Delivery Charge for a Partial truckload \$85<sup>00</sup>

Submitted by: Forestry Resources, Inc

Signed: Robert Olney

Date: 6/5/15

Does your firm have a location/office/facility in Lee County?

YES ✓ NO           

Address: 4325 Michigan Link Fort Myers, FL 33916

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

Are there any modifications to the bid or specifications:

YES ✓ NO           

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

MODIFICATIONS:

- ① Size Available on Section J + Changes to Section D
- ② ADDED Item to Bid List "Playsafe" ADA  
+ ASTM

Bidder shall submit his/her bid on the County's Proposal Quote Form, including the firm name and Certified 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 MATERIAL (AS APPLICABLE).

FIRM NAME Forestry Resources, Inc.

BY (Printed): Robert Olinger

BY (Signature): Robert Olinger

TITLE: VP Sales + marketing

FEDERAL ID # OR S.S. # 59-2438601

ADDRESS: 4353 Michigan Link  
Fort Myers, FL 33916

PHONE NO.: 239.334.7343

FAX NO.: 239.334.4602

CELLULAR PHONE/PAGER NO.: 239.707.3911

DUNS #: \_\_\_\_\_

LEE COUNTY LOCAL BUSINESS TAX ACCOUNT NUMBER:  
1000119

E-MAIL ADDRESS: Service@gomulch.com, Rolinger@gomulch.com

DISADVANTAGED BUSINESS ENTERPRISE (DBE): \_\_\_\_\_ Yes ☒ No

**ATTACHMENT A**  
**LOCAL VENDOR PREFERENCE QUESTIONNAIRE**  
**(LEE COUNTY ORDINANCE NO. 08-26)**

Instructions: Please complete either Part A or B whichever is applicable to your firm

**PART A: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS LOCATED WITHIN  
LEE/COLLIER COUNTY (Only complete Part A if your principal place of business is  
located within the boundaries of Lee/Collier County)**

1. What is the physical location of your principal place of business that is located within the boundaries of Lee/Collier County, Florida?

4353 Michigan Link  
Fort Myers, FL 33916

2. What is the size of this facility (i.e. sales area size, warehouse, storage yard, etc.)

23 Acre Site - includes production  
operation + Bagging plant, Storage yard  
+ Retail Center

**PART B: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS NOT LOCATED WITHIN  
LEE/COLLIER COUNTY OR DOES NOT HAVE A PHYSICAL LOCATION WITHIN  
LEE/COLLIER COUNTY (Please complete this section.)**

1. How many employees are available to service this contract? \_\_\_\_\_

2. Describe the types, amount and location of equipment you have available to service this contract.

---

---

---

LOCAL VENDOR PREFERENCE QUESTIONNAIRE CONTINUED

3. Describe the types, amount and location of material stock that you have available to service this contract.

manufacturer of bulk + bag mulches + Soils

---

---

4. Have you provided goods or services to Lee County on a regular basis for the preceding, consecutive three years?

Yes ✓ No         

If yes, please provide your contractual history with Lee County for the past three, consecutive years. Attach additional pages if necessary.

Awarded bid holder Since 2000

---

---

---

---

---

---



# LEE COUNTY

SOUTHWEST FLORIDA

Lee County Ordinance No. 08-26

Local Bidder's Preference

AFFIDAVIT  
PRINCIPAL PLACE OF BUSINESS



Principal place of business is located within the boundaries of Lee County.

Company Name: Forestry Resources, Inc.  
Signature: Robert Olinger Date: 6/5/2015

STATE OF Florida  
COUNTY OF Lee

The foregoing instrument was signed and acknowledged before me this 5 day of

June, 2015, by Robert Olinger who has produced

(Print or Type Name)  
0452-767-55-164-0 as identification. FL DL  
(Type of Identification and Number)

Candice L. Freese  
Notary Public Signature

Printed Name of Notary Public: CANDICE L. FREESE  
MY COMMISSION # FF072761  
EXPIRES: January 28, 2018  
Bonded Thru Budget Notary Services

Notary Commission Number/Expiration

The signee of this Affidavit guarantees, 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.**

AFFIDAVIT CERTIFICATION  
IMMIGRATION LAWS

SOLICITATION NO.: B-150271 PROJECT NAME: The Purchase of Mulch

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: Forestry Resources Inc  
Signature: Robert Olinger Title: VP Forestry Resources Inc. Date: \_\_\_\_\_

STATE OF Florida  
COUNTY OF Lee

The foregoing instrument was signed and acknowledged before me this 5 day of June, 2015, by Robert Olinger who has produced  
(Print or Type Name)  
0452-7167-55-114-0 as identification. FL DL  
(Type of Identification and Number)

Candice L. Freese  
Notary Public Signature

Printed Name of Notary Public: CANDICE L. FREESE  
 MY COMMISSION # FF 072761  
EXPIRES: January 28, 2018  
Bonded Thru Budget Notary Services

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.**

Client#: 71566

FORRE

DATE (MM/DD/YYYY)

12/05/2014

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

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

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

<b>PRODUCER</b> Gulfshore Insurance - Naples 4100 Goodlette Road North Naples, FL 34103 -3303 239 261-3646		<b>CONTACT NAME:</b> Karla Palacio <b>PHONE (A/C, No, Ext):</b> 239 263-4527 <b>FAX (A/C, No):</b> 239 213-2836 <b>E-MAIL ADDRESS:</b> kpalacio@gulfshoreinsurance.com	
<b>INSURED</b> Forestry Resources, Inc. & Forestry Resources Ecological Inc. FRT Solutions, Inc 4353 Michigan Link Fort Myers, FL 33916		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Amerisure Insurance Company <b>INSURER B:</b> Federal Insurance Company <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> PD Ded:1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			GL20907660001	01/01/2015	01/01/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			CA20907640002	01/01/2015	01/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0			CU20907680001	01/01/2015	01/01/2016	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC209076900	01/01/2015	01/01/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$1,000,000 EL DISEASE - EA EMPLOYEE \$1,000,000 EL DISEASE - POLICY LIMIT \$1,000,000
B	<b>Cargo Liability</b>			06691601	01/01/2015	01/01/2016	10,000

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

Project: RFQ-10-80 Environmental Maintenance Contract.

Certificate Holder is Named as Additional Insured As Respects to General Liability as needed per written contract per form CG7184 0508.

kwiktag® 177 797 212



## CERTIFICATE HOLDER

## CANCELLATION

Lee County Board of County Commissioners  
 Attn: Contracts Management  
 PO Box 398  
 Fort Myers, FL 33902

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

14 DEC 9 PM 1:05

© 1988-2010 ACORD CORPORATION. All rights reserved.

Client#: 71566

FORRE

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/05/2014

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

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

<b>PRODUCER</b> Gulfshore Insurance - Naples 4100 Goodlette Road North Naples, FL 34103 -3303 239 261-3646		<b>CONTACT NAME:</b> Karla Palacio <b>PHONE (A/C, No, Ext):</b> 239 263-4527 <b>FAX (A/C, No):</b> 239 213-2836 <b>E-MAIL ADDRESS:</b> kpalacio@gulfshoreinsurance.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Amerisure Insurance Company	
		<b>INSURER B:</b> Federal Insurance Company	
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> PD Ded: 1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		GL20907660001	01/01/2015	01/01/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CA20907640002	01/01/2015	01/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0		CU20907680001	01/01/2015	01/01/2016	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC209076900	01/01/2015	01/01/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
B	<b>Cargo Liability</b>		06691601	01/01/2015	01/01/2016	10,000

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

Project: RFQ-1009 Emergency Debris Removal

Certificate Holder is Named as Additional Insured As Regards to General Liability as needed per written contract per form CG7184 0508.

## CERTIFICATE HOLDER

## CANCELLATION

Lee County Board of County Commissioners  
 Attn: Contracts Management  
 PO Box 398  
 Fort Myers, FL 33902

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

*[Signature]*

14 DEC 9 PM 1:04

© 1988-2010 ACORD CORPORATION. All rights reserved.

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Profit Corporation**

FORESTRY RESOURCES, INC.

**Filing Information**

<b>Document Number</b>	G57345
<b>FEI/EIN Number</b>	592438601
<b>Date Filed</b>	08/29/1983
<b>State</b>	FL
<b>Status</b>	ACTIVE
<b>Last Event</b>	CORPORATE MERGER
<b>Event Date Filed</b>	12/27/2000
<b>Event Effective Date</b>	12/31/2000

**Principal Address**4353 MICHIGAN LINK  
FT. MYERS, FL 33916

Changed: 01/22/2007

**Mailing Address**4353 MICHIGAN LINK  
FT. MYERS, FL 33916

Changed: 01/22/2007

**Registered Agent Name & Address**CAUTHEN, JOHN W  
4353 MICHIGAN LINK  
FORT MYERS, FL 33916

Name Changed: 04/21/2004

Address Changed: 03/31/2010

**Officer/Director Detail****Name & Address**

Title C

CAUTHEN, JOHN W  
4353 MICHIGAN LINK  
FORT MYERS, FL 33916



## Title P

CAUTHEN, JOHN W  
 4353 MICHIGAN LINK  
 FORT MYERS, FL 33916

**Annual Reports**

Report Year	Filed Date
2013	04/11/2013
2014	03/13/2014
2015	03/09/2015

**Document Images**

<a href="#">03/09/2015 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/13/2014 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/11/2013 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">05/29/2012 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/14/2011 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/31/2010 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/13/2009 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/28/2008 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/22/2007 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/20/2006 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/04/2005 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/21/2004 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/17/2003 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">05/17/2002 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/24/2001 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">12/27/2000 -- Merger</a>	<a href="#">View image in PDF format</a>
<a href="#">05/16/2000 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/27/1999 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/07/1998 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/04/1997 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/16/1996 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/06/1995 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>

[Copyright © and Privacy Policies](#)

State of Florida, Department of State