

LEE COUNTY, FLORIDA
PROPOSAL QUOTE FORM
FOR

LANDSCAPE MAINTENANCE FOR THE LEE COUNTY SPORTS COMPLEX

DATE SUBMITTED: Aug 6, 2014

VENDOR NAME: POT Lawn & Tractor Service, Inc

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

THIS IS AN INFORMAL BID SO YOU MAY E-MAIL IT OR FAX IT BACK TO ME BEFORE 2:30 P.M. ON AUGUST 7, 2014.

PLEASE E-MAIL IT TO: kciccarelli@leegov.com OR FAX IT TO : 239-485-5460.

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:

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

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: Lee County Parks and Recreation will provide all fertilizers to be used on this project. Vendors will only be responsible to put the fertilizers down. Also please note that all services frequencies are given for evaluation purposes only and no guarantees are implied.

THE COMPLEX HAS BEEN DIVIDED INTO THREE SECTIONS. FOR QUOTING PURPOSES THE VENDOR WILL QUOTE ALL APPLICATIONS, FIRST ON THE COMPLEX AS A WHOLE AND THEN THE INDIVIDUAL AREAS. SEE THE ATTACHED MAP.

ITEM (1)

WEED CONTROL: COMPLETE COMPLEX	\$ <u>1485.00</u> PER SERVICE
WEED CONTROL: SECTION A	\$ <u>300.00</u> PER SERVICE
WEED CONTROL: SECTION B	\$ <u>435.00</u> PER SERVICE
WEED CONTROL: SECTION C	\$ <u>375.00</u> PER SERVICE

ITEM (2)

WEED WHIPPING: COMPLETE COMPLEX	\$ <u>1,350.00</u> PER SERVICE
WEED WHIPPING: SECTION A	\$ <u>135.00</u> PER SERVICE

WEED WHIPPING: SECTION B

\$ 1080.00 PER SERVICE

WEED WHIPPING: SECTION C

\$ 135.00 PER SERVICE

NOTE: THIS WILL INCLUDE DITCHES, LAKE BANKS, PERIMETER FENCES, ETC. SEE SITE SUPERVISOR FOR ANY QUESTIONS ON AREAS THAT NEED TO BE WEED WHIPPED.

ITEM (3)

EDGING: COMPLETE COMPLEX

\$ 405.00 PER SERVICE

EDGING: SECTION A

\$ 135.00 PER SERVICE

EDGING: SECTION B

\$ 135.00 PER SERVICE

EDGING: SECTION C

\$ 135.00 PER SERVICE

NOTE: EDGING FOR THE SECTIONS LINED OUT ON THE MAP WILL INCLUDE ALL PLANTER BEDS, SIDEWALKS, CONCRETE AREAS AND ROADWAY, ETC. ALSO TO MAINTAIN AREAS WITH A NEAT APPEARANCE BLOWING WILL BE REQUIRED. SEE SITE SUPERVISOR FOR ANY QUESTIONS ON AREAS TO BE EDGED.

ITEM (4)

PRUNING: COMPLETE COMPLEX

\$ 4,050.00 PER SERVICE

PRUNING: SECTION A

\$ 1350.00 PER SERVICE

PRUNING: SECTION B

\$ 1125.00 PER SERVICE

PRUNING: SECTION C

\$ 1575.00 PER SERVICE

NOTE: When pruning all oak trees should be maintained to a minimum of 8' and any suckers on the trunk should be removed.

ITEM (5)

FERTILIZATION (APPLICATION ONLY) BUSHES, TREES & PLANTS

(COMPLETE COMPLEX)

\$ 1750.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) BUSHES, TREES & PLANTS

SECTION A

\$ 525.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) BUSHES, TREES & PLANTS

SECTION B

\$ 525.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) BUSHES, TREES & PLANTS

SECTION C \$ 700.00 PER SERVICE

ITEM (6)

FERTILIZATION (APPLICATION ONLY) PALM TREES

COMPLETE COMPLEX \$ 150.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) PALM TREES

SECTION A \$ 50.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) PALM TREES

SECTION B \$ 100.00 PER SERVICE

FERTILIZATION (APPLICATION ONLY) PALM TREES

SECTION C \$ - 0 - PER SERVICE

NOTE: FERTILIZER FOR THE PALMS IN THE PLAZA AREAS SHALL BE INJECTED INTO THE GROUND SO IT WILL NOT DAMAGE THE TURF AROUND THE TREES.

ITEM (7)

PEST & DISEASE CONTROL:

COMPLETE COMPLEX \$ 900.00 PER SERVICE

SECTION A \$ 250.00 PER SERVICE

SECTION B \$ 250.00 PER SERVICE

SECTION C \$ 400- PER SERVICE

GRAND TOTAL: (ITEMS 1 - 7) \$ 19,805.00

OPTION A:

MULCH-RED FLORI MULCH (MULCH ONLY - NO LABOR)

COMPLETE COMPLEX \$ 9830.00 PER SERVICE

LABOR TO INSTALL MULCH \$ 9,663.00 PER SERVICE

MULCH SECTION A: \$ 2,550.00 PER SERVICE

LABOR TO INSTALL MULCH \$ 3,256.00 PER SERVICE
 MULCH SECTION B: \$ 2,800.00 PER SERVICE
 LABOR TO INSTALL MULCH \$ 3,007.00 PER SERVICE
 MULCH SECTION C: \$ 4,480.00 PER SERVICE
 LABOR TO INSTALL MULCH \$ 3,400.00 PER SERVICE

OPTION B:

MULCH-RED FLORI MULCH (INCLUDING LABOR) \$ 5.00 PER BAG
 COMPLETE COMPLEX \$ 19,493.00 PER SERVICE
 SECTION A \$ 5,806.00 PER SERVICE
 SECTION B \$ 5,807.00 PER SERVICE
 SECTION C \$ 7,880.00 PER SERVICE

OPTION C:

PINE STRAW
 COMPLETE COMPLEX

\$ 5.50 PER YARD BUNDLE
 PINE STRAW \$ 5.50 PER YARD
 LABOR TO APPLY PINESTRAW \$ 5.50 PER YARD LOOSE
 PINE STRAW LOOSE \$ 5.50 PER YARD
 LABOR TO APPLY PINESTRAW LOOSE \$ 5.50 PER YARD
 SECTION A
 PINE STRAW \$ 5.50 PER YARD BUNDLE
 LABOR TO APPLY PINESTRAW \$ 5.50 PER YARD
 PINE STRAW LOOSE \$ 5.50 PER YARD LOOSE
 LABOR TO APPLY PINESTRAW LOOSE \$ 5.50 PER YARD

OPTION D:

PINE STRAW \$ 5.50 PER YARD BUNDLE

LABOR TO APPLY PINESTRAW \$ 5.50 PER YARD
 PINE STRAW LOOSE \$ 5.50 PER YARD LOOSE
 LABOR TO APPLY PINESTRAW LOOSE \$ 5.50 PER YARD

OPTION E:

PINE STRAW \$ 5.50 PER YARD BUNDLE
 LABOR TO APPLY PINESTRAW \$ 5.50 PER YARD
 PINE STRAW LOOSE \$ 5.50 PER YARD LOOSE
 LABOR TO APPLY PINESTRAW LOOSE \$ 5.50 PER YARD

OPTION F:

PINE BARK (INCLUDING LABOR) \$ 5.50 PER BAG
 COMPLETE COMPLEX \$ 19,493.00 PER SERVICE
 SECTION A \$ 5,806.00 PER SERVICE
 SECTION B \$ 5,807.00 PER SERVICE
 SECTION C \$ 7,880.00 PER SERVICE

OPTION G:

OPTION: GRANULAR PRE-EMERGENCE HERBICIDE APPLICATION SUCH AS TREFLAN OR AN EQUAL, TO BE APPROVED BY SPORTS COMPLEX STAFF.

SECTION A:

SUPPLIED BY VENDOR & LABOR TO APPLY \$ 1,200 PER SERVICE
 SUPPLIED BY COUNTY - LABOR ONLY \$ 700 PER SERVICE

SECTION B:

SUPPLIED BY VENDOR & LABOR TO APPLY \$ 11,000 PER SERVICE *
 SUPPLIED BY COUNTY - LABOR ONLY \$ 500.00 PER SERVICE

SECTION C:

SUPPLIED BY VENDOR & LABOR TO APPLY \$ 1400.00 PER SERVICE
 SUPPLIED BY COUNTY - LABOR ONLY \$ 700 PER SERVICE

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

ANTI-COLLUSION STATEMENT

THE BELOW SIGNED QUOTER HAS NOT DIVULGED TO, DISCUSSED OR COMPARED HIS
QUOTE WITH OTHER QUOTERS AND HAS NOT COLLUDED WITH ANY OTHER QUOTER
OR PARTIES TO A QUOTE 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) AND THE
REMOVAL FROM THE MASTER BIDDERS LIST.

FIRM NAME: POT Lawn & Tractor Service, Inc.

BY (Printed): Teena Zielinski

BY (Signature): Teena Zielinski

TITLE: President

FEDERAL ID # OR S.S. # 65-0249564

ADDRESS: 15980 Old Olga Rd
Alva, FL 33920

PHONE NO.: (239) 694-4848

FAX NO.: (239) 694-4848

CELLULAR PHONE/PAGER NO.: (239) 707-4610 or 4611

DUNS#: 79-283-9920

LEE COUNTY LOCAL BUSINESS TAX ACCOUNT NUMBER: 0905016

E-MAIL ADDRESS: Ztepet@comcast.net

DISADVANTAGED BUSINESS ENTERPRISE (DBE): Yes - attached cert



Lee County Tax Collector

2480 Thompson Street
Fort Myers, Florida 33901
www.leetc.com Tel: 239.533.6000

Local Business Tax Account: 0905016

Dear Business Owner:

Your 2014-2015 Lee County Local Business Tax Receipt is attached below. The receipt is non-regulatory and is issued using the information currently on file with our office. It does not signify compliance with zoning, health or other regulatory requirements nor is it an endorsement of work quality.

Annual account renewal notices are mailed in August to the address of record at that time; to ensure delivery of your annual notice, mailing addresses may be updated online at www.leetc.com. If there is a change in the business name, ownership, physical location or if the business is being closed, please follow the instructions on the back of this letter to transfer or to close the account.

I hope you have a successful year.

Lee County Tax Collector

Detach and display bottom portion and keep upper portion for your records



LEE COUNTY LOCAL BUSINESS TAX RECEIPT 2014 - 2015

ACCOUNT NUMBER: 0905016

ACCOUNT EXPIRES SEPTEMBER 30, 2015

Location
15980 OLD OLGA RD
ALVA FL 33920

P & T LAWN & TRACTOR SERVICE INC
ZIELINSKI PETE
15980 OLD OLGA RD
ALVA FL 33920

May engage in the business of:
PROFESSIONAL LANDSCAPING COMPANY

The business and qualifier on this Business Tax Receipt is
"REGISTERED" in compliance with ordinance 08-08.

THIS LOCAL BUSINESS TAX RECEIPT IS NON REGULATORY

THIS IS NOT A BILL - DO NOT PAY

PAID	019349-43-2	07/31/2014 10:10
	DP500	\$50.00



State of Florida
*Minority, Women &
Service-Disabled Veteran*
Business Certification

P & T Lawn & Tractor Service

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

05/16/2013 to 05/16/2015

A handwritten signature in black ink, appearing to read 'John P. Miles', is written over a horizontal line.

John P Miles, Secretary

Florida Department of Management Services
Office of Supplier Diversity



LIC2008-00752

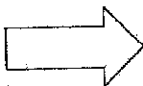
petezielinski@comcast.net renewa

License Holder Name: PETE J ZIELINSKI
Firm Name: P AND T LAWN AND TRACTOR SERVICE I
Address: 15980 OLD OLGA ROAD
ALVA FL 33920

Florida Department of Agriculture and Consumer Services

Pesticide Certification Office

This card is your license. It authorizes you, the license holder, to purchase and apply Restricted Use Pesticides (RUPs). Please sign your card and keep it with you when applying or purchasing RUPs.



Florida Department of Agriculture and Consumer Services
Pesticide Certification Office
Commercial Applicator License
License # CM20022

ZIELINSKI, PETE JOHN
15980 OLD OLGA RD
ALVA, FL 33920

Categories
3, 6

Issued: September 11, 2013

Expires: September 30, 2017

Signature of Licensee

ADAM H. PUTNAM, COMMISSIONER

The above individual is licensed under the provisions of Chapter 487, F.S. to purchase and apply restricted use pesticides.

Cut Here

Conditions of Certificate

Renewal due for active and inactive certificate each year in September.

COMP. NO. shall appear on all advertisements including vehicles reflecting a business name.

Shall only contract in D/B/A name as it appears on certificate. Board of Approval required on business name changes.

LEE COUNTY
CERTIFICATE OF COMPETENCY
(239) 533-8895

NAME: PETE J ZIELINSKI
D/B/A P AND T LAWN AND TRACTOR SERVICE IN
LICENSED FOR: Irrigation Sprinkler Cntr

COMP. NO.: LS08-00752
NOT VALID AFTER: 09/30/2014

Signature of License Holder

Conditions of Certificate

Shall maintain required insurances on active certificates.

Shall inform the Contractor Licensing Office of any Address or telephone # change.



CERTIFICATE OF LIABILITY INSURANCE

P&TLA-1

OP ID: G0

DATE (MM/DD/YYYY)
03/21/2014

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).

PRODUCER
Sihle Insurance Group (DEL 5)
1300 S WOODLAND BLVD
DELAND, FL 32720
Brad Roberts

CONTACT NAME: Gina Grasso
PHONE (A/C, No, Ext): 386-626-1051
E-MAIL ADDRESS: ggrasso@sihle.com
FAX (A/C, No): 386-736-6772

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Westfield Insurance Group	24112
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
P & T Lawn & Tractor Service
15980 Old Olga Rd
Alva, FL 33920

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	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOG		CWP7769042	10/05/2013	10/05/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CWP7769042	10/05/2013	10/05/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$ PIP \$ 10,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTIONS 0		CWP7769042	10/05/2013	10/05/2014	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 104, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

Lee County Board of County Commissioners
Code Enforcement/Lot Mowing
P.O. BOX 398
Fort Myers, FL 33902

CANCELLATION

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

Brad Roberts

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/21/2014

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).

PRODUCER Alliance Insurance Solutions, LLC. ID: (Direct) HR
c/o IOA
1855 West State Road 434
Longwood, FL 32750

CONTACT NAME: Ve Gonzalez
PHONE (A/C, No, Ext): 407-998-4249 FAX (A/C, No): 407-788-7933
E-MAIL ADDRESS: ve.gonzalez@ioabusa.com
INSURER(S) AFFORDING COVERAGE
INSURER A: SUNZ Insurance Company NAIC #: 34762
INSURER B: Aspen Re - London - Best Rating "A"
INSURER C: Catlin Syndicate - Lloyds - Best Rating "A"
INSURER D: Brit Syndicate - Lloyds - Best Rating "A"
INSURER E:
INSURER F:

INSURED
Direct HR Services, Inc.
PO Box 1367
Holmes Beach FL 34218

REVISION NUMBER:

CERTIFICATE NUMBER: 19557967

COVERAGES 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 INSURER (INSR) END	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					EACH OCCURRENCE \$ AGGREGATE \$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) (If yes, describe under DESCRIPTION OF OPERATIONS below)	Y/N N	WCP00000109 03 WCP00000109 02	2/1/2014 2/1/2013	2/1/2015 2/1/2014	<input checked="" type="checkbox"/> PER STATUTE <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 This is for informational purposes and nothing shall create any right under such reinsurance.
B	Workers Compensation					
C	Excess Coverage					
D						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 107, Additional Remarks Schedule, may be attached if more space is required)

Coverage provided for all leased employees but not subcontractors of: P&T Lawn and Tractor Service, Inc
Location Effective: 3/31/2013

CERTIFICATE HOLDER
819
LCBCC/Code Enforcement
Lot Mowing
PO Box 398
Fort Myers FL 33902

CANCELLATION
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
Glenn J. Distefano
Glenn J. Distefano

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AFFIDAVIT CERTIFICATION
IMMIGRATION LAWS

SOLICITATION NO.: IT 140434 PROJECT NAME: Landscape Maint for the Lee County Sports Complex

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").

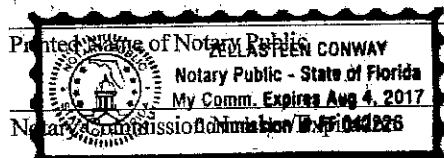
LEE COUNTY MAY CONSIDER THE EMPLOYMENT BY ANY CONTRACTOR OF UNAUTHORIZED ALIENS A VIOLATION OF SECTION 274A (e) OF THE INA. SUCH VIOLATION BY THE RECIPIENT OF THE EMPLOYMENT PROVISIONS CONTAINED IN SECTION 274A (e) OF THE INA SHALL BE GROUNDS FOR UNILATERAL CANCELLATION OF THE CONTRACT BY LEE COUNTY.

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

Company Name: PWT Lawn & Tractor Service, Inc
Teena Zielinski President 08-06-2014
Signature Title Date
STATE OF FL
COUNTY OF LEE

The foregoing instrument was signed and acknowledged before me this 6 day of August, 2014, by Teena Zielinski who has produced me as identification.
(Print or Type Name) (Type of Identification and Number)

Zellaster Conway
Notary Public Signature



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.**



GV20407-1

Certificate #
GV20407

Trainee ID #

UNIVERSITY OF
FLORIDA
IFAS Extension

Certificate of Training Best Management Practices Florida Green Industries

The undersigned hereby acknowledges that

Eric Suarez

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.

Donald B. Rainey

Issuer

S. Brown

Instructor

12/18/2012

Date of Class

Kristina P. Jones

DEP Program Administrator

Not valid without seal



GV4469-1

Certificate #
GV4469

Trainee ID #

UNIVERSITY OF
FLORIDA
IFAS EXTENSION

Certificate of Training Best Management Practices Florida Green Industries

The undersigned hereby acknowledges that

Pete Zielinski

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.

Dr. L.E. Trenholm

Issuer

Brown

Instructor

3/17/2009

Date of Class

John Churchard

DEP Program Administrator

Not valid without seal



GV4470-1

Certificate #

GV4470

Trainee ID #

UNIVERSITY OF
FLORIDA
IFAS EXTENSION

Certificate of Training Best Management Practices Florida Green Industries

The undersigned hereby acknowledges that

Robert Zielinski

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.

Dr. L.E. Trenholm

Issuer

Brown

Instructor

3/17/2009

Date of Class

John Churchill
DEP Program Administrator

Not valid without seal



GV20400-1

Certificate #

GV20400

Trainee ID #

UF UNIVERSITY OF
FLORIDA
IFAS Extension

Certificate of Training Best Management Practices Florida Green Industries

The undersigned hereby acknowledges that

Jason P. Cleland

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.

Handwritten initials

Handwritten signature: Kristina P. Jones

Ciccarelli, Kathryn

From: Ciccarelli, Kathryn
Sent: Friday, August 08, 2014 8:36 AM
To: 'Teena Zielinski'
Cc: Blasingim, Robert
Subject: Landscape Maintenance for the Sports Complex

Hi Teena,

We received your bid for the above project but would like a couple of clarifications:

On page 11 under Option C for Pine Straw can you give us a price for the complete complex

On page 12 under Option G Section B supplied by vendor & labor to apply you have \$11,000 per service is this correct?

Thank you

Kathy Ciccarelli, CPPB
Procurement Analyst
Division of Procurement Management
kciccarelli@leegov.com
Phone: 239-533-5456
Fax: 239-485-5460