



ADDENDUM # 1
BID # FY 2017-2018-015

CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS

Please ensure you check the City's website for the latest addendum released for this project. Below find the link to the City's website: www.cohb.org/solicitations.

Firm must provide this form signed by an authorized officer of your Firm to acknowledge receipt of ADDENDUM # 1 and provide with your Firm's response.

PLEASE NOTE: REVISED – BID PRICE SHEET AS OF 8/27/2018

The Bid Price Sheet found in Bid document, page 9-11 is no longer valid.

All Firms must use the following Revised - Bid Price Sheet as of 8/27/2018 to submit pricing for this Bid.

See below, changes have been made only to Manufactures Meyers, Item No. 6 and Item No. 7.

REVISED - BID PRICE SHEET AS OF 8/27/2018:

- I. Firms must use the Price Sheet(s) below to submit your Firm's Bid price for this Project.
- II. Firm's proposed costs must be inclusive of all related expenses to provide the services as defined in this Bid. Proposing Firm must completely fill out each column below to provide costs.
- III. The City reserves the right to increase, decrease, and/or choose the items and quantities below for the Project to meet its available budget using the unit prices provided below.
- IV. The City reserves the right to reject all proposals that have any variances and/or contingencies. Any variances and/or contingencies must be listed on the Variance Form.
- V. The City will issue a purchase order to the Firm shipping or delivering the purchased pump(s) to the City for installation by City Staff. The pumps must have a warranty for (1) year.
- VI. Firms prices will be firm and not increase for the initial Agreement term of two (2) years.
- VII. After the second (2nd) complete year of the Agreement term any increases shall be subject to City approval through the City's Project Manager and subject to an increase only if increases occur in the industry. Such increases shall not exceed two percent (2%) based on the Consumer Price Index (CPI) as published by the U.S. Bureau of Labor Statistics. The Firm must provide documentation proving that their operational costs to provide services have increased significantly and such must be provided to the City's Project Manager ninety (90) days prior to the end of the Agreement year.
- VIII. Not applicable or "N/A" is not acceptable and will cause your Firm's response to be determined non-responsive. An authorized officer of the Firm per the Firms Sunbiz, must sign the Total Bid Price Sheet.
- IX. The City is only purchasing the specified pumps from the authorized dealer for the brands stated in this Bid.

**MANUFACTURER
MEYERS**

REVISED BID PRICE SHEET AS OF 8/27/2018

ITEM NO.	DESCRIPTION AND PART NUMBER	LIFT STATION (LS)	QTY	GPM	TDH (FEET)	(HP)	VOLTAGE (V)	RPM	FLA	PHASE (Ø)	LEAD TIME OF DELIVERY FROM ISSUE OF PURCHASE ORDER	UNIT PRICE	TOTAL PRICE
1	Myers, 6VC250M4-43, Equipped with 35' power cable, SS lifting bails	LS-2	2			25	460	1,750	38	3		\$	\$
2	Myers, Myers model 6VC300M4-43, Equipped with 35' power cable, SS lifting bails	LS-3	1			30	460	1,750	47	3		\$	\$
3	Myers, 4R50M4-21, Equipped with 35' power cable, SS lifting bails	LS-5	2	770	44	5	230	1,750	34	1		\$	\$
4	Myers, 6VC600M4-43, Equipped with 35' power cable, SS lifting bails	LS-6	1			60	460	1,750	79	3		\$	\$
5	Myers, 6VC400M4-43, Equipped with 35' power cable, SS lifting bails	LS-7	1			40	460	1,750	61	3		\$	\$
6	Myers, 3RMW20DM4-21, Equipped with 30' power cable, and 3" flanged horizontal discharge	LS-10	1			2	230	1,750	16	1		\$	\$
7	Myers, 3MW20M4-21 Equipped with 30' power cable and 3" (NPT) vertical discharge	LS-11	1			2	230	1,750	12	1		\$	\$
8	Freight/Delivery											\$	\$
<i>No Bid</i> TOTAL BID PRICE ITEMS 1-8												\$	

**MANUFACTURER
KSB**

ITEM NO.	DESCRIPTION AND PART NUMBER	LIFT STATION (LS)	QTY	GPM	TDH (FEET)	(HP)	VOLTAGE (V)	RPM	FLA	PHASE (Ø)	LEAD TIME OF DELIVERY FROM ISSUE OF PURCHASE ORDER	UNIT PRICE	TOTAL PRICE
1	KSB, KRT F150-315/206XG-S Equipped with 50' power cable, 6' flanged H. Discharge, SS lifting bails	LS-14	3	966	42	24	230	1,160	61	3		\$	\$
2	Freight/Delivery											\$	\$
<i>No Bid</i> TOTAL BID PRICE ITEMS 1-2												\$	

ADDENDUM # 1

MANUFACTURER EBARA INTERNATIONAL CORPORATION													
ITEM NO.	DESCRIPTION AND PART NUMBER	LIFT STATION (LS)	QTY	GPM	TDH (FEET)	(HP)	VOLTAGE (V)	RPM	FLA	PHASE (Ø)	LEAD TIME OF DELIVERY FROM ISSUE OF PURCHASE ORDER	UNIT PRICE	TOTAL PRICE
1	Ebara, 150DLKFU6182 Equipped with 35' power cable, SS lifting bails	LS-9	1	1,310	45	25	208/230	1,800	67	3	4-6 wks	\$14,178	\$14,178
2	Freight/Delivery											\$	\$/RCL
TOTAL BID PRICE ITEMS 1-2												\$14,178 ⁰⁰	

MANUFACTURER GOULDS WATER TECHNOLOGY													
ITEM NO.	DESCRIPTION AND PART NUMBER	LIFT STATION (LS)	QTY	GPM	TDH (FEET)	(HP)	VOLTAGE (V)	RPM	FLA	PHASE (Ø)	LEAD TIME OF DELIVERY FROM ISSUE OF PURCHASE ORDER	UNIT PRICE	TOTAL PRICE
1	Gould, WS3032D4 (With: 7" impeller, 4" discharge, 3" solids, 20' power cable)	LS-15	1	440	20	3	230	1,725	14	3		\$	\$
2	Freight/Delivery											\$	\$
No Bid												\$	
TOTAL BID PRICE ITEMS 1-2												\$	

TOTAL BID PRICE FOR MYERS ITEMS 1-8, KSB ITEMS 1-2, EBARA INTERNATIONAL CORPORATION ITEMS 1-2, GOULDS WATER TECHNOLOGY ITEMS 1-2.												\$14,178 ⁰⁰	
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I, FRED NUGENT, PRESIDENT
Name of authorized Officer per Sunbiz and/or legal documentation Title

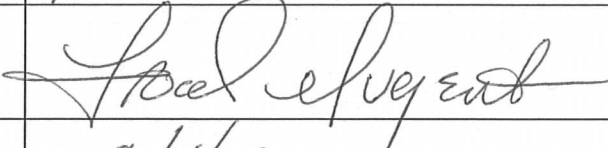
of F J NUGENT & ASSOCIATES INC
Name of Firm as it appears on Sunbiz and/or legal documentation

hereby, attest that I have the authority to sign this notarized certification and certify that the above referenced information is true, complete and correct.

FRED NUGENT FRED NUGENT, President
Signature Print Name and Title

PLEASE NOTE RECEIPT OF ADDENDUM # 1 BY SIGNING BELOW AND INCLUDE WITH YOUR FIRM'S SUBMISSION.

I ACKNOWLEDGE RECEIPT OF ADDENDUM # 1:

Company	FJ NUGENT & ASSOCIATES INC
Name	FRED NUGENT
Title	PRESIDENT
Signature	
Date	9/14/18

Sincerely,



Andrea Lues, Director, Procurement Department



ADDENDUM # 2
BID # FY 2017-2018-015
CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS

Please ensure you check the City's website for the latest addendum released for this project. Below find the link to the City's website: www.cohb.org/solicitations.

Firm must provide this form signed by an authorized officer of your Firm to acknowledge receipt of ADDENDUM # 2 and provide with your Firm's response.

PLEASE NOTE:

Correction to Exhibit A – Technical Pump Specifications, page 10, Table 1.

CHANGE FROM: EXHIBIT A – TECHNICAL PUMP SPECIFICATIONS, PAGE 10, TABLE 1:

Table 1

Quantity	Manufacturer/ Lift Station(LS)	Part Number	GPM	TDH (feet)	(HP)	Voltage (V)	RPM	FLA	Phase (Ø)
2	Myers / (LS-2)	6VC250M4-43, Equipped with 35' power cable, SS lifting bails			25	460	1750	38	3
1	Myers / (LS-3)	Myers model 6VC300M4-43, Equipped with 35' power cable, SS lifting bails			30	460	1750	47	3
2	Myers / (LS-5)	4R50M4-21, Equipped with 35' power cable, SS lifting bails	770	44	5	230	1750	34	1
1	Myers / (LS-6)	6VC600M4-43, Equipped with			60	460	1750	79	3

		35' power cable, SS lifting bails							
1	Myers / (LS-7)	6VC400M4-43, Equipped with 35' power cable, SS lifting bails			40	460	1750	61	3
1	Myers / (LS-10)	3RMW20DM4-21, Equipped with 30' power cable, and 3" flanged horizontal discharge			2	230	1750	16	3
1	Myers / (LS-11)	3MW20M4-21 Equipped with 30' power cable and 3" (NPT) vertical discharge			2	230	1750	12	3
3	KSB / (LS-14)	KRT F150-315/206XG-S. Equipped with 50' power cable, 6' flanged H. Discharge, SS lifting bails	966	42	24	230	1160	61.2	3
1	Ebara / (LS-9)	150DLKFU618 2 Equipped with 35' power cable, SS lifting bails	1310	45	25	208/230	1800		3
1	Gould / (LS-15)	WS3032D4 (With: 7" impeller, 4" discharge, 3" solids, 20' power cable)	440	20	3	230	1725	14.4	3

CHANGE TO: EXHIBIT A – TECHNICAL PUMP SPECIFICATIONS, PAGE 10, TABLE 1:

Table 1

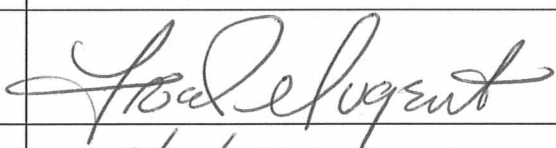
Quantity	Manufacturer/ Lift Station(LS)	Part Number	GPM	TDH (feet)	(HP)	Voltage (V)	RPM	FLA	Phase (Ø)
2	Myers / (LS-2)	6VC250M4-43, Equipped with 35' power cable, SS lifting bails			25	460	1750	38	3
1	Myers / (LS-3)	Myers model 6VC300M4-43, Equipped with 35' power cable, SS lifting bails			30	460	1750	47	3
2	Myers / (LS-5)	4R50M4-21, Equipped with 35' power cable, SS lifting bails	770	44	5	230	1750	34	1
1	Myers / (LS-6)	6VC600M4-43, Equipped with 35' power cable, SS lifting bails			60	460	1750	79	3
1	Myers / (LS-7)	6VC400M4-43, Equipped with 35' power cable, SS lifting bails			40	460	1750	61	3
1	Myers / (LS-10)	3RMW20DM4- 21, Equipped with 30' power cable, and 3" flanged horizontal discharge			2	230	1750	16	1
1	Myers / (LS-11)	3MW20M4-21 Equipped with 30' power cable			2	230	1750	12	1

ADDENDUM # 2

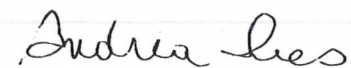
		and 3" (NPT) vertical discharge							
3	KSB / (LS-14)	KRT F150- 315/206XG-S Equipped with 50' power cable, 6' flanged H. Discharge, SS lifting bails	966	42	24	230	1160	61.2	3
1	Ebara / (LS-9)	150DLKFU618 2 Equipped with 35' power cable, SS lifting bails	1310	45	25	208/230	1800		3
1	Gould / (LS-15)	WS3032D4 (With: 7" impeller, 4" discharge, 3" solids, 20' power cable)	440	20	3	230	1725	14.4	3

PLEASE NOTE RECEIPT OF ADDENDUM # 2 BY SIGNING BELOW AND INCLUDE WITH YOUR FIRM'S SUBMISSION.

I ACKNOWLEDGE RECEIPT OF ADDENDUM # 2:

Company	F. J. Nugent & Associates Inc
Name	FRED NUGENT
Title	PRESIDENT
Signature	
Date	9/4/18

Sincerely,



Andrea Lues, Director, Procurement Department



ADDENDUM # 3
BID # FY 2017-2018-015

CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS

Please ensure you check the City's website for the latest addendum released for this project. Below find the link to the City's website: www.cohb.org/solicitations.

Firm must provide this form signed by an authorized officer of your Firm to acknowledge receipt of ADDENDUM # 3 and provide with your Firm's response.

PLEASE NOTE:

Correction to Exhibit A – Technical Pump Specifications, Manufacturer (2) – KSB, page 6, Equipment Tests.

CHANGE FROM: EXHIBIT A – TECHNICAL PUMP SPECIFICATIONS, MANUFACTURER (2) – KSB, PAGE 6, EQUIPMENT TESTS:

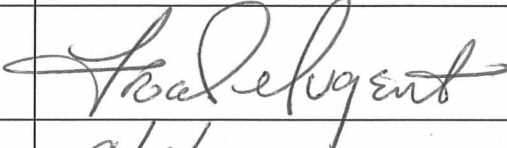
Equipment Tests - Tests shall be performed in accordance with the Test Code for Centrifugal Pumps per the Standards of the Hydraulic Institute, Level A. Tests shall be performed on the actual assembled pumps to be supplied. Tests shall cover a range from shut-off to a minimum 20% beyond specified design capacity. Conduct test per above specification on all supplied pumps, generating a curve showing actual flow, head, BHP and hydraulic efficiency.

CHANGE TO: EXHIBIT A – TECHNICAL PUMP SPECIFICATIONS, MANUFACTURER (2) – KSB, PAGE 6, EQUIPMENT TESTS:

Equipment Tests - Pumps tested and certified at latest ISO Standards are acceptable.

PLEASE NOTE RECEIPT OF ADDENDUM # 3 BY SIGNING BELOW AND INCLUDE WITH YOUR FIRM'S SUBMISSION.

I ACKNOWLEDGE RECEIPT OF ADDENDUM # 3:

Company	F. J. Nugent & ASSOCIATES Inc
Name	FRED Nugent
Title	President
Signature	
Date	9/4/18

Sincerely,



Andrea Lues, Director, Procurement Department



ADDENDUM # 4
BID # FY 2017-2018-015
CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS

Please ensure you check the City's website for the latest addendum released for this project. Below find the link to the City's website: www.cohb.org/solicitations.

Firm must provide this form signed by an authorized officer of your Firm to acknowledge receipt of ADDENDUM # 4 and provide with your Firm's response.

PLEASE NOTE:

Question #1:

I am looking to get an update on the following project. Is there a sign in sheet available from the pre-bid meeting? Thank you!

Answer #1:

The Non-Mandatory Pre-Bid Conference sign-in sheet is available on the City of Hallandale Beach website at www.cohb.org/solicitations.

Question #2:

We are inquiring regarding the subject bid. Could someone please put us in contact with the project manager for this job? We would like to know who will be installing these pumps once they are purchased and delivered. We are a lift station contractor with numerous contracts available for cooperative purchase.

Answer #2:

A). See Bid document, page 51 – 53, Cone of Silence. There is no communication with anyone in the City except the Procurement Department via email at csmith@cohb.org

B). See Bid document, page 9, Bid Price Sheet, item V.

Question #3:

The first paragraph of the Myers pump specification calls for the pump and motor shall be FM listed for Class 1, Groups C and D hazardous location service. Do the Myers pumps have to be explosion-proof? In the past this wasn't a requirement. Also, the pump model number doesn't designate it explosion-proof.

Answer #3:

No, the Myers pump does not have to be explosion-proof. See Exhibit A- Technical Pump Specifications, page 2.

Question #4:

Table 1 (Myers / LS-10) the pump model number indicates single phase. However the line item shows 3 phase. Are they single or 3 phase pumps?

Answer #4:

See addendum 1 and 2.

Question #5:

Table 1 (Myers / LS-10) the 3RMW pump has a Recessed Impeller, they are not a dual (2) vane impellers.

Answer #5:

Where a specific model of pump is called for (such as table 1), the vendor is required to supply that specific model of pump. When only the pump parameters (phases, voltage, TDH, GPM, etc.) are given then the pump has to meet the written specifications.

Question #6:

Table 1 (Myers / LS-11) the pump model number indicates single phase. However the line item shows 3 phase. Are they single or 3 phase pumps?

Answer #6:

See addendum 1 and 2.

Question #7:

KSB test to a Level A are witnessed test. Which means the city's personnel must witness these tests? Does the KSB pumps need to be tested? All pumps are tested and certified to ISO9000 standards.

Answer #7:

See addendum 3.

Question #8:

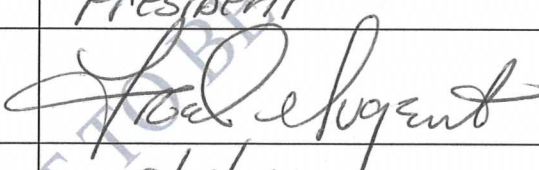
Can a provision be added in case of any unusual situation, i.e. Tariffs? This could cause the price increases to exceed normal inflation levels. Tariffs seem to be real possibility at this time and all pump companies could be exposed to dramatic cost increases if imposed.

Answer #8:

No.

PLEASE NOTE RECEIPT OF ADDENDUM # 4 BY SIGNING BELOW AND INCLUDE WITH YOUR FIRM'S SUBMISSION.

I ACKNOWLEDGE RECEIPT OF ADDENDUM # 4:

Company	F.J. Nugent & Associates Inc
Name	FRED NUGENT
Title	PRESIDENT
Signature	
Date	9/4/18

Sincerely,



Andrea Lues, Director, Procurement Department



EBARA INTERNATIONAL CORPORATION

4613 HANCOCK WAY, LILBURN, GEORGIA 30047
PHONE (770) 638-3406 FAX (770) 638-3407

September 4, 2018

City of Hallandale Beach
Attention: Purchasing Department
400 S. Federal Highway
Hallandale Beach, FL 33009

RE: Ebara Pump Distributor

Dear Sir or Madam:

This letter is written to confirm that the authorized distributor for Ebara Fluid Handling Products in Florida is F. J. Nugent & Associates, Inc.

F. J. Nugent & Associates is the ***sole source*** authorized distributor for cast iron submersible pumps and parts in Florida.

Please contact their office for information on price and availability or technical assistance with Ebara products. You may contact them by phone, fax, mail at the address provided below:

Main Office

F. J. Nugent & Associates, Inc.
411 Wylly Avenue
Sanford, FL 32773

Phone: 407-936-1139
Fax: 407-936-1640

We thank you for your interest in Ebara Fluid Handling products.

Sincerely,

A handwritten signature in black ink, appearing to read 'Wes Haskell', written over a horizontal line.

Wes Haskell
National Sales Manager

cc: Mike Cook, F. J. Nugent Assoc.
Fred Nugent, F. J. Nugent Assoc



VARIANCE FORM

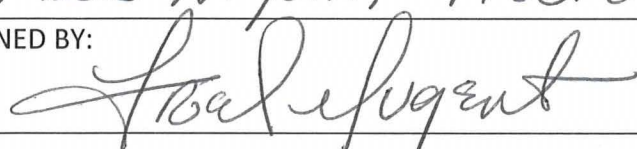
The proposing Firm must provide and state any and all variances to this BID, specifications, the Terms and Conditions and City Form Agreement on this variance form (provide additional pages if necessary).

After award of Contract through City Commission, via the Resolution, the awarded Firm's Variance Form will be reviewed by appropriate City Staff, the City Attorney and the Risk Manager. If the variances presented by your Firm are acceptable to the City, the Agreement will be routed to the awarded Firm for execution by the authorized officer of the Firm. The fully executed Agreement will be required to be returned to the City of Hallandale Beach Procurement Department, Tom Camaj, via email tcamaj@cohb.org within five (5) business days from receipt of the email from the Procurement Department to the awarded Firm's contact. Failure to provide a duly executed agreement by the awarded Firm to the City within five (5) business days from receipt may result in loss of award of such contract to your Firm. Variances requested to either the Bid, the Terms and Conditions and the City Form Agreement from your Firm may result in the City rescinding award of contract to your Firm.

If your Firm has no variances, please state "None" below. This form must be provided back in your submission.

<i>— None —</i>

THIS PROPOSAL SUBMITTED BY:

COMPANY:	F. J. Nugent & Associates Inc
ADDRESS:	411 WYLLY AVENUE
CITY & STATE:	SANFORD FL 32773
ZIP CODE:	32773
TELEPHONE:	407-936-1139
DATE OF BID:	9-5-18
FACSIMILE NUMBER:	407-936-1640
E-MAIL ADDRESS:	FRED@NUGENTCO.COM
FEDERAL ID NUMBER:	59-3310448
NAME & TITLE PRINTED:	FRED Nugent, President
SIGNED BY:	

WE (I) the above signed hereby agree to furnish the item(s), service(s) and have read all attachments including specifications, terms and conditions and fully understand what is required.

The Request for Proposals, Specifications, Proposal Forms, and/or any other pertinent document form a part of this proposal and by reference made a part hereof. Signature indicates acceptance of all terms and conditions of the Bid.

LEGAL PROCEEDINGS FORM

Proposing Firm must provide items a-d with your Firm's response as an attachment and checking off that documents were provided. Your Firm must ensure your response is addressing by title for each item a-d below. If an item(s) is not applicable, your Firm must check off as applicable stating "N/A" and authorized officer per Sunbiz to provide signature.

- a. Arbitrations: List all arbitration demands filed by or against your Firm in the last five (5) years, and identify the nature of the claim, the amount in dispute, the parties and the ultimate resolution of the proceeding.

☐ Check here if provided

☒ Check here if Not Applicable (N/A)

- b. Lawsuits: List all lawsuits filed by or against, your Firm in the last five (5) years, and identify the nature of the claim, the amount in dispute, the parties, and the ultimate resolution of the lawsuit.

☐ Check here if provided

☒ Check here if Not Applicable (N/A)

- c. Other Proceedings: Identify any lawsuits, administrative proceedings, or hearings initiated by the National Labor Relations Board, Occupational Safety and Health or similar state agencies in the past five (5) years concerning any labor practices or project safety practices by your Firm. Identify the nature of any proceeding and its ultimate resolution.

☐ Check here if provided

☒ Check here if Not Applicable (N/A)

- d. Bankruptcies: Has your Firm or its parents or any subsidiaries ever had a Bankruptcy Petition filed in its name, voluntarily or involuntarily? (If yes, specify date, circumstances, and resolution).

☐ Check here if provided

☒ Check here if Not Applicable (N/A)

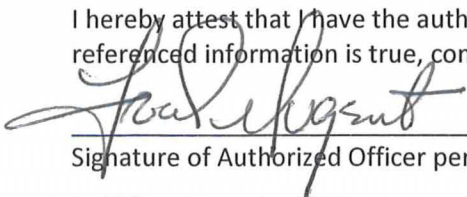
- e. Settlements: Identify all settlements for your Firm in detail in the last five (5) years.

☐ Check here if provided

☒ Check here if Not Applicable (N/A)

I, FRED NUGENT, President
Name of Authorized Officer per Sunbiz Title
of FJ NUGENT & ASSOCIATES INC
Name of Firm as it appears on Sunbiz

I hereby attest that I have the authority to sign this notarized certification and certify that the above referenced information is true, complete and correct.


Signature of Authorized Officer per Sunbiz

FRED NUGENT
Print Name of Authorized Officer per Sunbiz

PUBLIC ENTITY CRIME FORM

SWORN STATEMENT PURSUANT TO SECTION 287.133(2) (a),
FLORIDA STATUTES,
PUBLIC ENTITY CRIME INFORMATION

"A person or affiliate who has been placed on the convicted Firm list following a conviction for a public entity crime may not submit a bid, proposal, or reply on a contract to provide any goods or services to a public entity; may not submit a bid, proposal, or reply on a contract with a public entity for the construction or repair of a public building or public work; may not submit bids, proposals, or replies on leases of real property to a public entity; may not be awarded or perform work as a Contractor, supplier, subcontractor, or consultant under a contract with any public entity; and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months following the date of being placed on the convicted Firm list."

By: [Signature]
Title: PRESIDENT
Signed and Sealed 4 day of Sept., 2018

Domestic Partnership Certification Form

This form must be completed and submitted with your Firm's submittal.

Equal Benefits Requirements As part of the competitive solicitation and procurement process a Contractor seeking a Contract shall certify that upon award of a Contract it will provide benefits to Domestic Partners of its employees on the same basis as it provides benefits to employees' spouses. Failure to provide such certification shall result in a Contractor being deemed non-responsive.

Domestic Partner Benefits Requirement means a requirement for City Contractors to provide equal benefits for domestic partners. Contractors with five (5) or more employees contracting with City, in an amount valued over \$50,000, provide benefits to employees' spouses and the children of spouses.

The Firm providing a response, by virtue of the signature below, certifies that it is aware of the requirements of City of Hallandale Beach Ordinance 2013-03 Domestic Partnership Benefits Requirement, and certifies the following:

Check only one box below:

- ☒ 1. The Contractor certifies and represents that it will comply during the entire term of the Contract with the conditions of the Ordinance 2013-03, Section 23-3, Domestic Partner Benefits Requirement of the City of Hallandale Beach, or
- ☐ 2. The firm does not need to comply with the conditions of Ordinance 2013-03, Section 23-3, Domestic Partner Benefits Requirement of the City of Hallandale Beach, because of allowable exemption: **(Check only one box below):**
- ☐ The Firm's price for the contract term awarded is \$50,000 or less.
 - ☐ The Firm employs less than five (5) employees.
 - ☐ The Firm does not provide benefits to employees' spouses nor spouse's dependents.
 - ☐ The Firm is a religious organization, association, society, or non-profit charitable or educational institution or organization operated, supervised or controlled by or in conjunction with a religious organization, association or society.
 - ☐ The Firm is a government entity.
 - ☐ The contract is for the sale or lease of property.

- ☐ The covered contract is necessary to respond to an emergency.
- ☐ The provision of Ordinance 2013-03, Section 23-3 Definition, of the City of Hallandale Beach, would violate grant requirements, the laws, rules or regulations of federal or state law.

I, FRED NUGENT, PRESIDENT
Name of authorized Officer per Sunbiz Title
of F. J. NUGENT & ASSOCIATES INC
Name of Firm as it appears on Sunbiz

hereby attest that I have the authority to sign this notarized certification and certify that the above referenced information is true, complete and correct.

Fred Nugent FRED NUGENT
Signature Print Name

STATE OF FLORIDA
COUNTY OF SEMINOLE

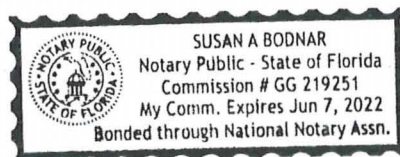
SWORN TO AND SUBSCRIBED BEFORE ME THIS 4th DAY OF
September, 2018 BY FRED NUGENT

TO ME PERSONALLY KNOWN OR PRODUCED IDENTIFICATION:

(type of ID)

Susan A Bodnar
Signature of Notary
SUSAN A BODNAR
Print Name of Notary Public

June 7, 2022
Commission expires



CONFLICT OF INTEREST NOTIFICATION REQUIREMENT QUESTIONNAIRE

If you are an employee, board member, elected official(s) or an immediate family member of any such person, please indicate the relationship below. Pursuant to the City of Hallandale Beach Standards of ethics any potential conflict of interest must be disclosed and if requested, obtain a conflict of interest opinion or waiver from the Board of Directors prior to entering into a contract with the City.

1. Name of Firm submitting a response to this BID.

F. J. NUGENT & ASSOCIATES INC

2. Describe each affiliation or business relationship with an employee, board member, elected official(s) or an immediate family member of any such person of the City of Hallandale Beach or Hallandale Beach Community Redevelopment Agency, if none so state.

— None —

3. Name of City's or City of Hallandale Beach or Hallandale Beach Community Redevelopment Agency employee, board member, elected official(s) or immediate family member with whom filer/respondent/firm has affiliation or business relationship, if none so state.

— None —

4. Describe any other affiliation or business relationship that might cause a conflict of interest, if none so state.

— None —

CONFLICT OF INTEREST NOTIFICATION REQUIREMENT QUESTIONNAIRE

5.

F. J. Nugent
Signature of person/Firm

9/4/18
Date

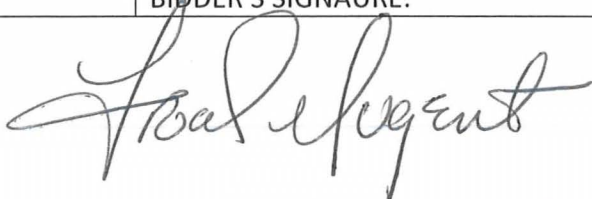
DRUG-FREE WORKPLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087

Hereby certified that F. J. Nugent & Associates Inc does:
(Name of Business)

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 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 1893 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.

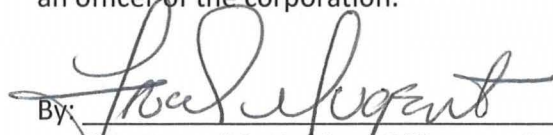
As a person authorized to sign the statement, I certify that this Firm complies fully with the above requirements.

DATE:		BIDDER'S SIGNATURE:
	9/4/18	

ANTI-KICKBACK AFFIDAVIT

STATE OF FLORIDA)
COUNTY OF SEMINOLE) SS: 59-3370448 FEIN

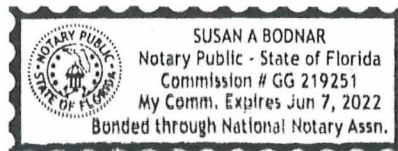
I, the undersigned hereby duly sworn, depose and say that no portion of the sum herein proposed will be paid to any employees of the City of Hallandale Beach and its elected officials, as a commission, kickback, reward or gift, directly or indirectly by me or any member of my firm or by an officer of the corporation.

By: 
Signature of Authorized Officer per Sunbiz
FRED NUGENT
Print Name of Authorized Officer per Sunbiz
PRESIDENT
Title of Authorized Officer per Sunbiz

Sworn and subscribed before me this 4th day of September, 2018.

NOTARY PUBLIC

State of Florida at Large



My Commission Expires: June 7, 2022

REFERENCE CHECK FORM

Please note that the references provided below must be the same as the projects/contracts provided for response to MQR #3.

BID # FY 2017-2018-015 CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS
PROPOSING FIRM'S NAME(S) : <i>F J Nugent & Associates Inc</i>
PROJECT NAME: <i>N/A</i>
NAME OF FIRM THAT WAS AWARDED THE AGREEMENT FOR THE PROJECT: <i>FJ NUGENT & ASSOCIATES INC</i>
NAME ALL THE FIRMS THAT WERE SUBCONTRACTORS TO THE PROJECT AND PROVIDED SERVICES:

Name of reference:	<i>Bobby Clayton</i>	Phone:	<i>954-786-4154</i>
Title of reference:		E-mail Address:	<i>bobby.clayton@cohbfl.com</i>
Company/Employer:	<i>Pompano Beach</i>		

Please answer the following questions regarding services provided by the proposer named above.

1. What brand and pump did your entity purchase?

2. Were you satisfied with the competence, accessibility, and responsiveness of the Firm's personnel to supply the goods and/or services timely? Was the expected delivery met?

3. Provide detail information about the Firm's response time as required by your Agreement. Where there ever any issues and why.

4. Did your Firm encounter any issue(s) during the Agreement? If so, what were they and were they resolved in a timely manner?



5. How would you characterize your overall experience dealing with the Firm?

ADDITIONAL COMMENTS:

SIGNATURE: _____ Date: _____

REFERENCE CHECK FORM

Please note that the references provided below must be the same as the projects/contracts provided for response to MQR #3.

BID # FY 2017-2018-015 CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS	
PROPOSING FIRM'S NAME(S) : <i>F J Nugent & Associates Inc</i>	
PROJECT NAME: <i>N/A</i>	
NAME OF FIRM THAT WAS AWARDED THE AGREEMENT FOR THE PROJECT: <i>F J Nugent & Associates Inc</i>	
NAME ALL THE FIRMS THAT WERE SUBCONTRACTORS TO THE PROJECT AND PROVIDED SERVICES:	

Name of reference:	<i>Bobby Legg</i>	Phone:	<i>941-628-0497</i>
Title of reference:		E-mail Address:	<i>b1egg@ci.punta-gorda.fl.us</i>
Company/Employer:	<i>City of Punta Gorda</i>		

Please answer the following questions regarding services provided by the proposer named above.

1. What brand and pump did your entity purchase?

2. Were you satisfied with the competence, accessibility, and responsiveness of the Firm's personnel to supply the goods and/or services timely? Was the expected delivery met?

3. Provide detail information about the Firm's response time as required by your Agreement. Where there ever any issues and why.

4. Did your Firm encounter any issue(s) during the Agreement? If so, what were they and were they resolved in a timely manner?

5. How would you characterize your overall experience dealing with the Firm?

ADDITIONAL COMMENTS:

SIGNATURE: _____ **Date:** _____

REFERENCE CHECK FORM

Please note that the references provided below must be the same as the projects/contracts provided for response to MQR #3.

BID # FY 2017-2018-015 CITY OF HALLANDALE BEACH PURCHASE OF SEWER LIFT STATIONS PUMPS	
PROPOSING FIRM'S NAME(S) : <i>F. J. Nugent & Associates Inc</i>	
PROJECT NAME: <i>N/A</i>	
NAME OF FIRM THAT WAS AWARDED THE AGREEMENT FOR THE PROJECT: <i>F. J. Nugent & Assoc. Inc</i>	
NAME ALL THE FIRMS THAT WERE SUBCONTRACTORS TO THE PROJECT AND PROVIDED SERVICES:	

Name of reference:	<i>Paul KIRLEW</i>	Phone:	<i>954-831-0856</i>
Title of reference:		E-mail Address:	<i>PKIRLEW@BROWARD.ORG</i>
Company/Employer:	<i>BROWARD County</i>		

Please answer the following questions regarding services provided by the proposer named above.

1. What brand and pump did your entity purchase?

2. Were you satisfied with the competence, accessibility, and responsiveness of the Firm's personnel to supply the goods and/or services timely? Was the expected delivery met?

3. Provide detail information about the Firm's response time as required by your Agreement. Where there ever any issues and why.

4. Did your Firm encounter any issue(s) during the Agreement? If so, what were they and were they resolved in a timely manner?

5. How would you characterize your overall experience dealing with the Firm?

ADDITIONAL COMMENTS:

SIGNATURE: _____ Date: _____

fred@nugentco.com

From: donotreply@sunbiz.org
Sent: Saturday, January 13, 2018 2:16 PM
To: fred@nugentco.com
Subject: Sunbiz.org Payment Receipt

Thank you for submitting your payment to Florida Department of State, Division of Corporations. This email will serve as confirmation that your payment was received by our office.

Your filing will be posted on our website <http://www.sunbiz.org/> in the order received.

The transaction information is listed below:

Receipt Number: 3719029703
Transaction Date/Time: 01/13/2018 02:15 PM
Card Number: XXXX XXXX XXXX 6003
Card Type: AM
Approval Code: 225910
Payment Amount: \$150.00
Tracking Number: CC2910988165
Document Number: P96000029025

9/4/18 @ 10:12AM

NOTE Sunbiz.org was Not functioning
This is a receipt to demonstrate
we PAID OUR ANNUAL REGISTRATION FEE
AND THAT WE ARE AN ACTIVE CORPORATION
IN FLORIDA

Fred Nugent, Pres
F.J. Nugent & Assoc. Inc.



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Please reply to this office:
☒ Central Florida Office
411 Wylly Avenue
Sanford, FL 32773
Phone: 407-936-1139
Fax: 407-936-1640

September 4, 2018

**CITY OF HALLANDALE BEACH
PURCHASE OF SEWER LIFT PUMPS
ITB: FY 2017-2018-015**

Submitted by:
F. J. NUGENT & ASSOCIATES INC
411 WYLLY AVENUE
SANFORD, FL 32773
PH: 407-936-1139
fred@nugentco.com

Offices located throughout Florida

MINIMUM QUALIFICATION REQUIREMENTS (MQRs):

This Bid contains Minimum Qualification Requirements (MQRs) which the proposing Firm **must** meet for the Firm's response to be considered responsive. **Please read the MQRs to ensure your Firm meets these requirements prior to submitting a response to this Bid.**

Firm(s) that do not comply with MQRs will be determined non-responsive and disqualified from the evaluation process and their proposal will not be evaluated.

All Firms that are submitting a response to this Bid, either through Joint Venture, a Joint Collaborative Proposal, etc., must submit a single response proposal and all Firm(s) must submit all forms requested in the [Forms Section](#).

The Firm awarded the contract will be required to maintain the Minimum Qualification Requirements #1 during the term of the contract and any contract renewals.

All Minimum Qualification Requirements (MQRs) must be submitted with your Firm's response.

Minimum Qualification Requirement # 1: Years in Business- Sunbiz

Proposing Firm must be incorporated through Sunbiz with a status of "Active" within the past five (5) years.

Provide a copy of your Firm's Sunbiz with your response.

Minimum Qualification Requirement # 2: Authorized Distributor Letter

Proposing Firm must provide an authorized distributor letter from the manufacture(s) for any of the four (4) pump manufacturers specified. If proposing Firm is a distributor for more than one (1) manufacturer, provide multiple authorized distributor letters one (1) for each brand.

Minimum Qualification Requirement # 3: Previous Experience

Please note a [Reference Check Form](#) must be provided for each of the charts below.

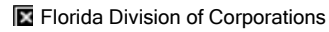
Proposing Firm must show experience having sold pumps as those specified in Exhibit A of this Bid. Firm must have sold to three (3) companies in the State of Florida within the past ten (10) years. Firm must demonstrate in detail the ten (10) years of previous experience in the provided charts below.

Proposing Firm must provide the information for MQR #3 on the following chart(s):

Reference #1	
Name of Entity that purchased the pumps.	<i>City of Pompano Beach</i>
Updated contact name, phone and email for Project Manager where sales were provided to.	<i>Bobby Clayton At: 954-786-4154 bobby.clayton@copbfl.com</i>
Date product was ordered.	<i>VARIOUS</i>
Requested lead time for delivery of pump(s).	<i>4-6 WEEKS</i>
Date product was delivered.	<i>ON TIME</i>
Proposing Firm must answer the following questions and show how proposing Firm meets MQR # 3:	
a). What specific brand and pump did your Firm sell?	<input type="checkbox"/> Myers <input type="checkbox"/> KSB <input checked="" type="checkbox"/> EBARA <input type="checkbox"/> GOULDS
b). Was the sale of these pump(s) a one (1) time purchase?	<input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No
c). Was the sale of these pumps over multiple years? If yes, how many times within the last ten (10) years were these pumps bought by this entity?	<input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No <i>MULTIPLE</i>

Reference #2	
Name of Entity that purchased the pumps.	PUNTA GORDA, CITY of
Updated contact name, phone and email for Project Manager where sales were provided to.	Bobby LEGG 941-628-0497 blegg@ci.punta-gorda.fl.us
Date product was ordered.	VARIOUS
Requested lead time for delivery of pump(s).	4-6 WEEKS
Date product was delivered.	ON TIME
<p>Proposing Firm must answer the following questions and show how proposing Firm meets MQR # 3:</p> <p>a). What specific brand and pump did your Firm sell?</p> <p><input type="checkbox"/> Myers <input type="checkbox"/> KSB <input checked="" type="checkbox"/> EBARA <input type="checkbox"/> GOULDS</p> <p>b). Was the sale of these pump(s) a one (1) time purchase?</p> <p><input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No</p> <p>c). Was the sale of these pumps over multiple years?</p> <p><input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No</p> <p>If yes, how many times within the last ten (10) years were these pumps bought by this entity?</p> <p>MULTIPLE</p>	

Reference #3	
Name of Entity that purchased the pumps.	Broward County
Updated contact name, phone and email for Project Manager where sales were provided to.	PAUL KIRLEW 954-831-0856 PKIRLEW@BROWARD.ORG
Date product was ordered.	VARIOUS
Requested lead time for delivery of pump(s).	4-6 WEEKS
Date product was delivered.	ON TIME
<p>Proposing Firm must answer the following questions and show how proposing Firm meets MQR # 3:</p> <p>a). What specific brand and pump did your Firm sell?</p> <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Myers <input checked="" type="checkbox"/> EBARA </div> <div> <input type="checkbox"/> KSB <input type="checkbox"/> GOULDS </div> </div> <p>b). Was the sale of these pump(s) a one (1) time purchase?</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No </div> <p>c). Was the sale of these pumps over multiple years?</p> <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No </div> <p>If yes, how many times within the last ten (10) years were these pumps bought by this entity?</p> <p>MULTIPLE</p>	



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Florida Profit Corporation

F.J. NUGENT & ASSOCIATES, INC.

Filing Information

Document Number	P96000029025
FEI/EIN Number	59-3370448
Date Filed	04/03/1996
State	FL
Status	ACTIVE

Principal Address

411 WYLLY AVENUE
SANFORD, FL 32773

Changed: 04/09/2007

Mailing Address

P O BOX 521925
LONGWOOD, FL 32752

Changed: 09/05/1997

Registered Agent Name & Address

NUGENT, FRED J
1343 GRACE VIEW CT
LONGWOOD, FL 32750

Name Changed: 01/26/2009

Address Changed: 09/05/1997

Officer/Director Detail

Name & Address

Title PSTD

NUGENT, FREDERICK J
1343 GRACE VIEW COURT
LONGWOOD, FL 32750

Annual Reports

Report Year	Filed Date
2016	03/19/2016

2017 01/14/2017

2018 01/13/2018

Document Images

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