



2023-380C

Bid Number: PRCA-230030-WB  
Bid Name: Open/Close Parks, Clean Restrooms

## ADDENDUM NO. 2

Date: March 10, 2023

Bid Date: March 14, 2023  
at 3:00 P.M. (Local Time)

Bid Name: Open/Close Parks, Clean Restrooms

Bid No.: PRCA-230030-WB

NOTE: This Addendum has been issued only to the holders of record of the specifications and to the attendees of the non-mandatory pre-bid conference held on February 28, 2023.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary.

1. This Addendum and the attached Exhibit A are issued to address questions that were emailed to the City of Gainesville Procurement Department after the pre bid meeting on February 28, 2023 and prior to the question submittal deadline of March 7, 2023.
2. Please find attached:
  - a) Copy of the cone of silence information (Financial Procedures Manual Section 41-524 Prohibition of Lobbying in Procurement Matters) distributed during non-mandatory pre-bid meeting.
  - b) Exhibit A, Bid Submission from Contractor's Enterprises Inc. in response to 2021's ITB 21008-RECP-RFP-OpenClose and Clean Restrooms
3. Questions and Answers:

1. How many contractors are on the current contract cleaning the 28 facilities?  
Currently, only one contractor.

2. How many contractors are bidding on this project?  
To date, 31 companies have downloaded the bid documents; we will not know how many actually submit a bid until the bid due date of March 14, 2023.

3. Is the current contractor scope of work the same as the current bid scope of work?  
No it is not.

4. What is the total square footage of each building/all buildings?  
Square footage information is not available; please refer to the Bid Document for a full description of each site and the duties for that site. Alternately, you can visit any of the sites during operating hours and see the scope for yourself.

5. What is the amount purchased each year on the consumables products, trash bags, toilet tissue, hand towels and hand soap for the 28 facilities?

We do not have those figures, as those items are supplied by the current contractor.

6. Is it possible to get the old contract to verify how many square feet for all locations and to see if we have to supply the cleaning supplies and consumables? Square footage information is not available, nor was it available in the prior bid solicitation or awarded contract for this work; please refer to the Bid Document for a full description of each site and the duties for that site. The awarded Contractor will be responsible for providing the cleaning supplies and consumables; please refer to page 7, section 4 of the Bid Document.

7. How can I get a copy of the prior bid of the current contractor?  
Please see the attached Bid Submittal, Exhibit A.

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 2 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

CERTIFICATION BY PROPOSER

The undersigned acknowledges receipt of this Addendum No. 2 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: \_\_\_\_\_

BY: \_\_\_\_\_

DATE: \_\_\_\_\_

# CITY OF \_\_\_\_\_ FINANCIAL SERVICES GAINESVILLE PROCEDURES MANUAL

## **41-524      Prohibition of Lobbying in Procurement Matters**

Except as expressly set forth in Resolution 170116, Section 9, during the Cone of Silence as defined herein no person may lobby, on behalf of a competing party in a particular procurement process, City Officials or employees, except the Procurement Division or the procurement designated staff contact person. Violation of this provision shall result in disqualification of the party on whose behalf the lobbying occurred.

Cone of Silence period means the period between the issue date which allows for immediate submittals to the City of Gainesville Procurement Division in response to an invitation to bid, or a request for proposal, or qualifications, or information, or an invitation to negotiate, as applicable, and the time that City Officials or the Procurement Division, or City Department awards the contract.

Lobbying means when a person seeks to influence or attempt to influence City Officials or employees with respect to a decision of the City, except as authorized by procurement procedures.



# Contractors Enterprises, Inc.

*“My Work May Be Dirty, But My Reputation Is Clean.”*

Qualified Specialists in Janitorial Extended Services

## JANITORIAL SERVICES FOR OPEN/ CLOSE AND CLEANING RESTROOM FOR CITY PARKS AND FACILITIES PROPOSAL

For:

City of Gainesville

#RECP-210008-DM

Due: Tues February 01, 2021  
3:00 PM EST

Submitted to:

City of Gainesville, Florida  
Attn: Darius McPhall, Procurement Specialist 3  
Procurement Division  
200 East University Avenue  
Gainesville, Florida 32601-0490  
Phone: (352) 334-5021  
mcphalldt@cityofgainesville.org



Procurement Division  
 200 E University Avenue, Rm 339  
 Gainesville, FL 32601  
 (352) 334-5021(main)  
 Issue Date: December 30, 2020

**REQUEST FOR PROPOSAL: RECP-210008-DM**  
**Open/Close and Cleaning Restroom for City Parks and Facilities**

PRE-PROPOSAL MEETING:  Non-Mandatory  Mandatory  N/A  Includes Site Visit  
 DATE: January 13, 2021 TIME: 11:00 a.m.  
 LOCATION: Via ZOOM, Details TBA

QUESTION SUBMITTAL DUE DATE: January 20, 2021 at 5:00 p.m.

**DUE DATE FOR UPLOADING PROPOSAL: February 1, 2021 3:00PM**

**SUMMARY OF SCOPE OF WORK:**

The purpose and scope of these specifications is to establish the requirements for a contract for the opening, closing and cleaning of Parks, Recreation and Cultural Affairs (PRCA) parks and facilities as identified in the technical specifications.

For questions relating to this solicitation, contact: [McPhallDT@Cityofgainesville.org](mailto:McPhallDT@Cityofgainesville.org)

Bidder is not in arrears to City upon any debt, fee, tax or contract:  Bidder is NOT in arrears  Bidder IS in arrears  
 Bidder is not a defaulter, as surety or otherwise, upon any obligation to City:  Bidder is NOT in default  Bidder IS in default

Bidders who receive this bid from sources other than City of Gainesville Procurement Division or DemandStar.com MUST contact the Procurement Division prior to the due date to ensure any addenda are received in order to submit a responsible and responsive offer. Uploading an incomplete document may deem the offer non-responsive, causing rejection.

**ADDENDA ACKNOWLEDGMENT:** Prior to submitting my offer, I have verified that all addenda issued to date are considered as part of my offer: Addenda received (list all) # **01 (01/08/21), 02 (01/19/21)**

Legal Name of Bidder: **Nicoliss Johnson**

DBA: **Contractors Enterprises, Inc.**

Authorized Representative Name/Title: **Nicoliss Johnson, President Evelyn Bell, Vice President**

E-mail Address: **nicoliss\_johnson62@yahoo.com ebell4242@gmail.com** FEIN: **72-1494295**

Street Address: **616 Crane Drive Kissimmee, FL 34759**

Mailing Address (if different):  
**850 251-0677**

Telephone: **(850) 597-5852** Fax: **(863) 496-4061**

By signing this form, I acknowledge I have read and understand, and my business complies with all General Conditions and requirements set forth herein; and,

- Proposal is in full compliance with the Specifications.
- Proposal is in full compliance with the Specifications except as specifically stated and attached hereto.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: Nicoliss Johnson

SIGNER'S PRINTED NAME: **Nicoliss Johnson** DATE: **02/01/21**



## ADDENDUM NO. 1

Date: January 8, 2021  
Bid Date: February 1, 2021, at 3:00 P.M. (Local Time)

Bid Name Open/Close and Cleaning Restrooms for City Parks and Facilities  
Bid No.: RECP-210008-DM

NOTE: This Addendum has been issued only to the holders of record of the specifications.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary:

The following are answers/clarifications to questions received:

1. Any questions shall be submitted in writing to the City of Gainesville Purchasing Division by 3:00 p.m. (local time), January 20, 2021. Questions may be submitted as follows:  
Email: [mcphalldt@cityofgainesville.org](mailto:mcphalldt@cityofgainesville.org)
2. Please find attached:
  - a) Copy of the blackout period information (Financial Procedures Manual Section 41-423 Prohibition of lobbying in procurement matters).
3. ***Non-Mandatory Pre Bid Meeting via Zoom Meeting Wednesday, January 13, 2021 at 11:00A.M. Attendance is NOT Mandatory.***

Join Zoom Meeting

<https://us02web.zoom.us/j/86516084250?pwd=bkRXR1lLa25kRnVrTzZGZlJXcUtYdz09>

Meeting ID: 865 1608 4250

Passcode: 1LjyMh

One tap mobile

+13017158592,86516084250#,,,,\*124581# US (Washington D.C)

+13126266799,86516084250#,,,,\*124581# US (Chicago)

Dial by your location

+1 301 715 8592 US (Washington D.C)

+1 312 626 6799 US (Chicago)

+1 646 876 9923 US (New York)

+1 408 638 0968 US (San Jose)



+1 669 900 6833 US (San Jose)  
+1 253 215 8782 US (Tacoma)  
+1 346 248 7799 US (Houston)

Meeting ID: 865 1608 4250  
Passcode: 124581  
Find your local number: <https://us02web.zoom.us/j/kdzkK6D19L>

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 1 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

**CERTIFICATION BY PROPOSER**

The undersigned acknowledges receipt of this Addendum No. 1 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: Contractors Enterprises, Inc.  
BY: *Nicoliss Johnson*  
DATE: 02/01/21

CITY OF \_\_\_\_\_  
GAINESVILLE

FINANCIAL SERVICES  
PROCEDURES MANUAL

**41-423      Prohibition of lobbying in procurement matters**

Except as expressly set forth in Resolution 060732, Section 10, during the blackout period as defined herein no person may lobby, on behalf of a competing party in a particular procurement process, City Officials or employees except the purchasing division, the purchasing designated staff contact. Violation of this provision shall result in disqualification of the party on whose behalf the lobbying occurred.

Black out period means the period between the issue date which allows for immediate submittals to the City of Gainesville Purchasing Department for an invitation for bid or the request for proposal, or qualifications, or information, or the invitation to negotiate, as applicable, and the time the City Officials and Employee awards the contract.

Lobbying means when any natural person for compensation, seeks to influence the governmental decision making, to encourage the passage, defeat, or modification of any proposal, recommendation or decision by City Officials and Employees, except as authorized by procurement documents.

## ADDENDUM NO. 2



Date: January 19, 2021

Bid Date: February 1, 2021, at 3:00 P.M. (Local Time)

Bid Name Open/Close and Cleaning Restrooms for City Parks and Facilities

Bid No.: RECP-210008-DM

NOTE: This Addendum has been issued only to the holders of record of the specifications and to the attendees of the non-mandatory pre-bid conference held on January 13, 2021.

The original Specifications remain in full force and effect except as revised by the following changes which shall take precedence over anything to the contrary:

1. Any questions shall be submitted in writing to the City of Gainesville Purchasing Division by 5:00 p.m.(local time), January 20, 2021. Questions may be submitted as follows:  
Email: [mcphalldt@cityofgainesville.org](mailto:mcphalldt@cityofgainesville.org)
2. Please find attached:
  - a) Copy of the blackout period information (Financial Procedures Manual Section 41-423 Prohibition of lobbying in procurement matters).
3. Darius McPhall, Purchasing Division, discussed bid requirements.
  - a. We only accept electronic submittals.
  - b. Bids are to be received by the Purchasing office no later than 3:00 p.m. on February 1, 2021. DemandStar will not accept bids after 3:00 p.m. on that date.
  - c. Send questions in writing to Darius McPhall via email or fax.
    - i. All communication through Darius McPhall or purchasing staff only. Do not communicate with other City staff.
    - ii. Question deadline January 20, 2021 at 5 p.m.
  - d. Blackout period
  - e. Various forms (i.e. addenda, reference form, resource form, technical expertise and experience form, etc.) are to be completed and returned with your bid.
    - i. Sign, date and return all Addenda
4. John Weber Parks, Recreation, and Cultural Affairs Manager, discussed the project scope
  - a. Approximately 25 City Parks, vendors have the ability to bid 1 or all of the parks.

- b. Please pay close attention to the details of what each park requires.
- c. Please make sure you are aware that materials and supplies are the responsibility of the vendor. Please keep that in mind when pricing the particular parks.
- d. Also some of the parks operate 365 days a year regardless of holidays.
- e. Please keep in mind some parks will require opening and closing at very specific hours.

The following are answers/clarifications to questions received at the non-mandatory pre-bid conference:

- 5. Question: Are there any specific cleaners are not allowed or required to be in the different parks?  
Answer: Taken from project specifications: Do not use abrasive (e.g. powders) or caustic (e.g. bleach) cleaning products on any stainless steel surface as these products will cause discoloration and damage.
  
- 6. Question: This is a request for past bid tabulations/pricing and technical proposals that were received for proposal.  
Answer: (See attached). Please be aware that the scope and the number of parks previously bid has been revised.

ACKNOWLEDGMENT: Each Proposer shall acknowledge receipt of this Addendum No. 2 by his or her signature below, **and a copy of this Addendum to be returned with proposal.**

CERTIFICATION BY PROPOSER

The undersigned acknowledges receipt of this Addendum No. 2 and the Proposal submitted is in accordance with information, instructions, and stipulations set forth herein.

PROPOSER: Contractors Enterprises, Inc.

BY: *Nicoliss Johnson*

DATE: 02/01/21

# PART 3 - PRICE PROPOSAL

## 3.1

### Proposed Cost Breakdown by Location

Please provide your estimate of the monthly cost you would charge for each park or facility, followed by the annual cost. You do not have to bid on all locations. You only need to submit estimates for those locations on which you are bidding, based on the requirements for each (listed in the Technical Specifications). Locations are broken down by the quadrant of the city in which they are located (NE, SE, SW, NW); you may choose to bid on an entire quadrant, to bid on all locations, or pick and choose the individual locations that work best for your company; it's up to you. PRCA reserves the right to accept or reject bids on any and all sites listed. Sites may be added or removed during the contract term; charges will be negotiated at that time, should it be necessary.

#### **REGION 1:**

Northside Park	Dollars (\$ <u>340.00</u> ) per/month x 12 = <u>\$4,080.00</u> annually
Greentree Park/Kiwanis	Dollars (\$ <u>296.00</u> ) per/month x 12 = <u>\$3,552.00</u> annually
Challenge Playground	
Hogtown Creek Headwaters Park	Dollars (\$ <u>350.00</u> ) per/month x 12 = <u>\$4,200.00</u> annually
Possum Creek Park	Dollars (\$ <u>380.00</u> ) per/month x 12 = <u>\$4,560.00</u> annually
San Felasco Park	Dollars (\$ <u>342.00</u> ) per/month x 12 = <u>\$4,104.00</u> annually
<b>Total, IF bidding the whole region:</b>	Dollars (\$ <u>1,708.00</u> ) per/month x 12 = <u>\$20,496.00</u> annually

#### **REGION 2:**

Gainesville High School Tennis Courts	Dollars (\$ <u>200.00</u> ) per/month x 12 = <u>\$2,400.00</u> annually
Albert Ray Massey "Westside" Park	Dollars (\$ <u>230.00</u> ) per/month x 12 = <u>\$2,760.00</u> annually
Cofrin Nature Park	Dollars (\$ <u>300.00</u> ) per/month x 12 = <u>\$3,600.00</u> annually
Loblolly Nature Park	Dollars (\$ <u>350.00</u> ) per/month x 12 = <u>\$4,200.00</u> annually
Alfred A. Ring Park	Dollars (\$ <u>390.00</u> ) per/month x 12 = <u>\$4,680.00</u> annually
Forest Park	Dollars (\$ <u>460.79</u> ) per/month x 12 = <u>\$5,529.48</u> annually
Oakview Park	Dollars (\$ <u>325.00</u> ) per/month x 12 = <u>\$3,900.00</u> annually
<b>Total, IF bidding the whole region:</b>	Dollars (\$ <u>2,255.79</u> ) per/month x 12 = <u>\$27,069.48</u> annually

#### **REGION 3:**

Bivens Arm Nature Park	Dollars (\$ <u>362.00</u> ) per/month x 12 = <u>\$4,344.00</u> annually
Sweetwater Wetlands Park	Dollars (\$ <u>370.00</u> ) per/month x 12 = <u>\$4,440.00</u> annually
Boulware Springs Park	Dollars (\$ <u>380.00</u> ) per/month x 12 = <u>\$4,560.00</u> annually
TB McPherson Park	Dollars (\$ <u>230.00</u> ) per/month x 12 = <u>\$2,760.00</u> annually
Lincoln Park	Dollars (\$ <u>210.00</u> ) per/month x 12 = <u>\$2,520.00</u> annually
<b>Total, IF bidding the whole region:</b>	Dollars (\$ <u>1,552.00</u> ) per/month x 12 = <u>\$18,624.00</u> annually

#### **REGION 4:**

Bo Diddley Plaza	Dollars (\$ <u>460.00</u> ) per/month x 12 = <u>\$5,520.00</u> annually
Fred Cone Park	Dollars (\$ <u>510.00</u> ) per/month x 12 = <u>\$6,120.00</u> annually
NE Complex	Dollars (\$ <u>310.00</u> ) per/month x 12 = <u>\$3,720.00</u> annually
Morningside Nature Center	Dollars (\$ <u>300.00</u> ) per/month x 12 = <u>\$3,600.00</u> annually
Smokey Bear Park	Dollars (\$ <u>200.00</u> ) per/month x 12 = <u>\$2,400.00</u> annually
Tom Petty Park	Dollars (\$ <u>300.00</u> ) per/month x 12 = <u>\$3,600.00</u> annually
Ironwood Golf Course	Dollars (\$ <u>200.00</u> ) per/month x 12 = <u>\$2,400.00</u> annually
<b>Total, IF bidding the whole region:</b>	Dollars (\$ <u>2,280.00</u> ) per/month x 12 = <u>\$27,360.00</u> annually

## DRUG-FREE WORKPLACE FORM

The undersigned bidder in accordance with Florida Statute 287.087 hereby certifies that

Contractors Enterprises, Inc. does:

(Name of Bidder)

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 the 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 893 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 the person authorized to sign the statement, I certify that this bidder complies fully with the above requirements.

Nicoliss Johnson

Bidder's Signature

02/01/21

Date

*In the event of a tie bid, bidders with a Drug Free Workplace Program will be given preference. To be considered for the preference, this document must be completed and uploaded to DemandStar.com with your Submittal.*

## BIDDER VERIFICATION FORM

### LOCAL PREFERENCE (Check one)

Local Preference requested:  YES  NO

A copy of the following documents must be included in your submission if you are requesting Local Preference:

- Business Tax Receipt
- Zoning Compliance Permit

### QUALIFIED SMALL BUSINESS AND/OR SERVICE DISABLED VETERAN BUSINESS STATUS (Check one)

Is your business qualified, in accordance with the City of Gainesville's Small Business Procurement Program, as a local Small Business?  YES  NO

Is your business qualified, in accordance with the City of Gainesville's Small Business Procurement Program, as a local Service-Disabled Veteran Business?  YES  NO

### LIVING WAGE COMPLIANCE

See Living Wage Decision Tree:

(Check one)

- Living Wage Ordinance does not apply (check all that apply)
- Not a covered service
  - Contract does not exceed \$100,000
  - Not a for-profit individual, business entity, corporation, partnership, limited liability company, joint venture, or similar business, who or which employees 50 or more persons, but not including employees of any subsidiaries, affiliates or parent businesses.
  - Located within the City of Gainesville enterprise zone.
- Living Wage Ordinance applies and the completed Certification of Compliance with Living Wage is included with this bid.

**NOTE: If Contractor has stated Living Wage Ordinance does not apply and it is later determined Living Wage Ordinance does apply, Contractor will be required to comply with the provision of the City of Gainesville's living wage requirements, as applicable, without any adjustment to the bid price.**

### REGISTERED TO DO BUSINESS IN THE STATE OF FLORIDA

Is Bidder registered with Florida Department of State's, Division of Corporations, to do business in the State of Florida?

YES  NO (refer to Part 1, 1.6, last paragraph)

If the answer is "YES", provide a copy of SunBiz registration or SunBiz Document Number (#**P05000157601**)

If the answer is "NO", please state reason why: \_\_\_\_\_

### DIVERSITY AND INCLUSION (Applies to solicitations above \$50,000)

Does your company have a policy on diversity and inclusion? **YES** NO

If yes, please attach a copy of the policy to your submittal.

*This page must be completed and uploaded to DemandStar.com with your Submittal.*

*Note: Possessing a diversity and inclusion policy will have no effect on the City's consideration of your submittal, but is simply being requested for information gathering purposes.*

**Contractors Enterprises, Inc.**

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Bidder's Name

**Nicoliss Johnson, President**

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Printed Name/Title of Authorized Representative

*Nicoliss Johnson*

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Signature of Authorized Representative

Date **02/01/21**



# REFERENCE FORM

Name of Bidder: **Contractors Enterprises, Inc.**

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Provide information for three references of similar scope performed within the past three years. You may include photos or other pertinent information.

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**#1** Year(s) services provided (i.e. 1/2015 to 12/2018): **11/2013 to Present**

Company Name: **Orange County Public Schools**  
Address: **6501 Magic Way**  
City, State Zip: **Orlando, FL, 32809**  
Contact Name: **Tim Kane, Trades Tech II**  
Phone Number: **(407) 317-3700 Ext. 2025008** Fax Number: \_\_\_\_\_  
Email Address (if available): **timothy.kane@ocps.net**

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**#2** Year(s) services provided (i.e. 1/2015 to 12/2018): **09/2010 to 11/2019**

Company Name: **Grifols Biomat USA Plasma Center, Tallahassee**  
Address: **1950 W. Tennessee Street**  
City, State Zip: **Tallahassee, FL**  
Contact Name: **Brenda Clary, Center Manager**  
Phone Number: **(850) 860-8352** Fax Number: \_\_\_\_\_  
Email Address (if available): **brenda.clary@grifols.com**

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**#3** Year(s) services provided (i.e. 1/2015 to 12/2018): **2012- Present**

Company Name: **Community Realty**  
Address: **3610-5 Shamrock West**  
City, State Zip: **Tallahassee, FL 32309**  
Contact Name: **Bob Teel, President**  
Phone Number: **(850) 545-6010** Fax Number: \_\_\_\_\_  
Email Address (if available): **bteel54@aol.com**

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*This page must be completed and uploaded to DemandStar.com with your Submittal.*

## CERTIFICATION OF COMPLIANCE WITH LIVING WAGE

The undersigned hereby agrees to comply with the terms of the Living Wage Ordinance and to pay all covered employees, as defined by City of Gainesville Ordinance 020663 as amended at 030168 (Living Wage Ordinance), during the time they are directly involved in providing covered services under the contract with the City of Gainesville for **#RECP-210008-DM - Open/ Close And Cleaning Restroom For City Parks And Facilities** a living wage of \$ **12.50** per hour to covered employees who receive Health Benefits from the undersigned employer and \$ **13.45** per hour to covered employees not offered health care benefits by the undersigned employer.

Name of Service Contractor/Subcontractor: **Contractors Enterprises, Inc.**

Address: **616 Crane Drive Kissimmee, FL 34759**

Phone Number: **(850) 597-5852, (850) 251-0677**

Name of Local Contact Person: **Evelyn Bell**

Address: **616 Crane Drive Kissimmee, FL 34759**

Phone Number: **(850) 597-5852**

**\$ 93,549.48**

(Amount of Contract)

**Nicoliss Johnson, President, Owner**

Printed Name/Title of Authorized Representative

*Nicoliss Johnson*

Signature of Authorized Representative

Date **02/01/21**

*This page must be completed and uploaded to DemandStar.com with your Submittal, if the Living Wage Ordinance applies to bidder.*

## Attachment #2

### Opening/Closing and Cleaning Restrooms in City Parks and Facilities Technical Expertise and Experience Form

**BIDDER:** Contractors Enterprises, Inc.

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*THIS FORM MUST BE COMPLETED AND RETURNED WITH BID PROPOSAL. BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD WITHOUT COMPLETED FORM.*

Please describe your company experience providing janitorial services.

**Contractor Enterprises, Inc., is minority-owned small business that is fully insured. Contractor Enterprises, Inc., provide a wide scope of services throughout the state of Florida and the greater Southeast region, which includes full janitorial cleaning services, commercial and residential property preservation and pressure washing. In providing these scope of services, over the years, Contractor Enterprises, Inc. has become very familiar in providing deep cleaning and disinfecting services for the prevention of blood-borne illnesses, as our current and past clients can attest to within both the public and private sector. Some of our current and past clients have included the Orange County Public Schools, the City of Gainesville, Orange County, Seminole County Public Schools, Alachua County, Grifols Biomat USA Plasma Center, Hillsborough Transit Authority (HART), Starbucks, Dollar General and Save-A-Lot.**

**Nicoliss Johnson and Evelyn Bell, both have over twenty years of combined custodial, janitorial, property preservation, pressure washing, and management experience. Both Mr. Johnson and Ms. Bell have attended and completed Coverall Health-Based Cleaning System training classes to ensure a sanitary and environment friendly practices, products, and workplace. We are OSHA certified. We maintain certification with the International Janitorial Cleaning Services Association (IJCSA) and maintain continual education within our industry with proper cleaning procedures and protocols.**

### Attachment #3

## Opening/Closing and Cleaning Restrooms in City Parks and Facilities

### REFERENCE FORM

Bidder Name: Contractors Enterprises, Inc.

THIS FORM MUST BE COMPLETED AND RETURNED WITH BID OR THE BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD.

Number of years your company has been doing this type of work: 15 years

List at least five (5) references of similar jobs you have performed over the past two years. You may use additional pages.

- 1) Job location: Orange County, FL Date work performed: 11/2013 to Present  
Business Name: Orange County Public Schools  
Contact Name: Tim Kane, Trades Tech II  
Phone Number: (407) 317-3700 Ext. 2025008 Contact Email: timothy.kane@ocps.net
  
- 2) Job location: Hillsborough County, FL Date work performed: 02/2017 to 03/2020  
Business Name: Hillsborough Transit Authority (HART)  
Contact Name: Cathy Zickefoose, CPPB  
Phone Number: (813) 384-6383 Contact Email: ZickefooseC@goHART.org
  
- 3) Job location: 1950 W. Tennessee St Tallahassee Date work performed: 09/2010 to 11/2019  
Business Name: Grifols Biomat USA Plasma Center, Tallahassee  
Contact Name: Brenda Clary, Center Manager  
Phone Number: (850) 860-8352 Contact Email: brenda.clary@grifols.com
  
- 4) Job location: Tallahassee, FL Date work performed: 2012- Present  
Business Name: Community Realty  
Contact Name: Bob Teel, President  
Phone Number: (850) 545-6010 Contact Email: bteel54@aol.com
  
- 5) Job location: Alachua County Date work performed: 01/2020-Present  
Business Name: Alachua County Parks and Open Space  
Contact Name: John Morris, Operations Manager, Parks and Open Space

Phone Number: (352) 548-1219

Contact Email: [jmorris@alachuacounty.us](mailto:jmorris@alachuacounty.us)

**Attachment #4**

**Opening/Closing and Cleaning Restrooms in City Parks and Facilities**

**Resource Form**

List all supervisors and/or key personnel who will be instrumental in overseeing janitorial services at City parks and facilities.

*THIS FORM MUST BE COMPLETED AND RETURNED WITH BID PROPOSAL. BID WILL NOT BE CONSIDERED FOR EVALUATION AND POSSIBLE AWARD WITHOUT COMPLETED FORM.*

*Use additional pages if necessary*

**BIDDER:** Contractors Enterprises, Inc.

---

**PERSONNEL**

- |                                  |                            |                             |
|----------------------------------|----------------------------|-----------------------------|
| 1) Name: <u>Nicoliss Johnson</u> | Years with firm: <u>13</u> | Years experience: <u>28</u> |
| 2) Name: <u>Evelyn Bell</u>      | Years with firm: <u>13</u> | Years experience: <u>20</u> |
| 3) Name: <u>Krystal Vester</u>   | Years with firm: <u>12</u> | Years experience: <u>7</u>  |
| 4) Name: <u>Mark Bell</u>        | Years with firm: <u>11</u> | Years experience: <u>11</u> |
| 5) Name: <u>Diana Franklin</u>   | Years with firm: <u>10</u> | Years experience: <u>10</u> |
| 6) Name: <u>Moranda Bethley</u>  | Years with firm: <u>2</u>  | Years experience: <u>6</u>  |
| 7) Name: <u>Corey Bryant</u>     | Years with firm: <u>3</u>  | Years experience: <u>6</u>  |

How will you allocate staff (supervisor and field staff) for the locations on which you are bidding?

*For example, if you are responsible for 1 site, you choose to have one staff person reporting to your main office. If you have 5 sites, 10 sites, or more, how would you allocate staff people so that no sites are missed if main staff takes a day off or leaves your employment?*

**We assign staff by delineating the parks into routes and assign workloads to those able to handle the workload in proportion to their experience. On days, where an employee ask for time off, the additional workload is divided up on the other crew members. When a crew member needs an unspecified amount of time off, the supervisors such as Mark Bell and Evelyn Bell are added in as back-up as needed. For more information, see the attached workload table.**

**WORKLOAD ALLOCATION**

Assigned Staff Employee	Corey Bryant	Moranda Bethley	Diana Franklin	Mark Bell	General Cleaner	Evelyn Bell
Route	Route A	Route B	Route C	Route Backup	Backup	Backup
	Loblolly Nature Park	Morningside Nature Center	Greentree Park	As-Needed	As-Needed	As-Requested
	Cofrin Nature Park	Fred Cone Park	Kiwanis Challenge Playground			
	San Felasco Park	Bivens Arm Nature Park	Ironwood Golf Course			
	Possum Creek Park	NE Complex	Sweetwater Wetlands Park			
	Hogtown Creek Headwaters Park	Boulware Springs Park	Forest Park			
	Northside Park	TB McPherson Park	Loblolly Nature Park			
	Albert Ray Massey "Westside" Park	Lincoln Park	Cofrin Nature Park			
	Alfred A. Ring Park	Smokey Bear Park	San Felasco Park			
		Tom Petty Park	Possum Creek Park			
			Hogtown Creek Headwaters Park			
			Alfred A. Ring Park			
			Bo Diddley Plaza			

Note: Oakview Park is not a park that we currently service. It will be assigned a staff member a later time.

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Nicoliss Johnson</b>		
	2 Business name/disregarded entity name, if different from above <b>Contractors Enterprises</b>		
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input checked="" type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate
	<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.		Exempt payee code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____	Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. <b>616 Crane Drive</b>		Requester's name and address (optional)	
6 City, state, and ZIP code <b>Kissimmee Fl. 34759</b>			
7 List account number(s) here (optional)			

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									
7	2		-	1	4	9	4	2	9

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>nicoliss johnson</i>	Date ▶ <i>1-4-21</i>
------------------	--	----------------------

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/7/2021

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 have **ADDITIONAL INSURED** provisions or 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> Earl Bacon Agency, Inc. Post Office Box 12039 Tallahassee, FL 32317	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(850) 878-2121</b>	<b>FAX (A/C, No):</b> <b>(850) 878-2128</b>
	<b>E-MAIL ADDRESS:</b>	
<b>INSURED</b>  Contractor Enterprises, Inc. 1903 High Rd Tallahassee, FL 32303	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> <b>Westfield Insurance Company</b>	<b>NAIC #</b> <b>24112</b>
	<b>INSURER B:</b>	
	<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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
<b>A</b>	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			<b>CWP3281258</b>	<b>1/7/2021</b>	<b>1/7/2022</b>	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>150,000</b> MED EXP (Any one person) \$ <b>1,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b> \$
<b>A</b>	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			<b>CWP3281258</b>	<b>1/7/2021</b>	<b>1/7/2022</b>	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <input type="checkbox"/> Y <input type="checkbox"/> N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

<b>CERTIFICATE HOLDER</b>  For Proposal Purposes Only	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> 



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/18/2020

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 have ADDITIONAL INSURED provisions or 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).

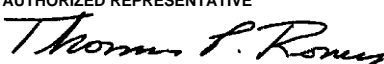
<b>PRODUCER</b> <b>The Roney Group</b> <b>13920 N. Dale Mabry Highway #3</b> <b>Tampa, FL 33618</b> <b>Thomas Roney</b>		<b>813-935-0306</b> <b>CONTACT NAME: Thomas Roney</b> <b>PHONE (A/C, No, Ext): 813-935-0306</b> <b>E-MAIL ADDRESS: Tom@roneyinsurance.com</b> <b>FAX (A/C, No):</b>
<b>INSURED</b> <b>Contractors Enterprises Inc.</b> <b>Evelyn Bell</b> <b>1903 High Road</b> <b>Tallahassee, FL 32303</b>		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A : Florida Citrus, Business &amp; Ind</b> <b>INSURER B :</b> <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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE	\$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$
							GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OP AGG	\$
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N <input checked="" type="checkbox"/> N / A If yes, describe under DESCRIPTION OF OPERATIONS below			<b>10660390-2020</b>	<b>07/16/2020</b>	<b>07/16/2021</b>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 \$ <b>1,000,000</b> \$ <b>1,000,000</b> \$ <b>1,000,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**Janitorial**

<b>CERTIFICATE HOLDER</b>  <b>ORANCPS</b>  <b>Orange County Public Schools</b> <b>Facilities &amp; Construction</b> <b>6501 Magic Way Bldg 100B</b> <b>Orlando, FL 32809</b>	<b>CANCELLATION</b>  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 
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City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

## EXPERIENCE

President and Owner: (Nicoliss Johnson)

Vice President and Supervisor: (Evelyn Bell)

**Contractor Enterprises, Inc.**, is minority-owned small business that is fully insured. **Contractor Enterprises, Inc.**, provide a wide scope of services throughout the state of Florida and the greater Southeast region, which includes full janitorial cleaning services, commercial and residential property preservation and pressure washing. In providing these scope of services, over the years, **Contractor Enterprises, Inc.** has become very familiar in providing deep cleaning and disinfecting services for the prevention of blood-borne illnesses, as our current and past clients can attest to within both the public and private sector. Some of our current and past clients have included the Orange County Public Schools, the City of Gainesville, Orange County, Seminole County Public Schools, Alachua County, Grifols Biomat USA Plasma Center, Hillsborough Transit Authority (HART), Starbucks, Dollar General and Save-A-Lot. We currently hold the existing contract with the City of Gainesville to provide janitorial services for the City of Gainesville Parks, as such, we are very familiar with providing services that meets the needs of the City of Gainesville.

Nicoliss Johnson and Evelyn Bell, both have over twenty years of combined custodial, janitorial, property preservation, pressure washing, and management experience.

Both Mr. Johnson and Ms. Bell have attended and completed Coverall Health-Based Cleaning System training classes to ensure a sanitary and environment friendly practices, products, and workplace. We are OSHA certified. We maintain certification with the International Janitorial Cleaning Services Association (IJCSA) and maintain continual education within our industry with proper cleaning procedures and protocols.

At **Contractor Enterprises, Inc.**, our goal will be to be thorough from start to finish. Every project is different and brings various challenges. Rest assured, we have the experience, knowledge and manpower to meet these challenges. What sets us apart from other companies is our customer service. We are available 24-hours a day, seven days a week to discuss and schedule any project in critical need of services to be provided. We are very flexible to accommodate any change in schedule or scope of the job. And our prices are always negotiable to include additional services not established in the original scope of work. Services to include all necessary labor, materials and equipment required to assure performance.

We appreciate your business and look forward to doing a great job for you in maintaining a safe, healthy and vibrant community.

Regards

Evelyn Bell, Vice President

**Contractors Enterprises, Inc.**

616 Crane Drive Kissimmee, FL 34759

**STAFFING ORGANIZATION**

Name	Title/Position	Years with Firm	Years Experience	Status
Nicoliss Johnson	President	13	28	Full
Evelyn Bell	Vice President	13	20	Full
Krystal Vester	Project Administrator	12	7	Full
Mark Bell	Floor Tech Supervisor	11	11	Full
Shelia Thomas	Treasurer/ Project Administrator	10	10	Full
Diana Franklin	Supervisor	10	10	Full
Moranda Bethley	General Cleaner	2	6	Part
Corey Bryant	General Cleaner	3	6	Part
General Cleaner	General Cleaner	1	1	Part

Evelyn Bell (850) 597-5852

Nicoliss Johnson (850) 251-0677

Additional staff will be employed as warranted to maintain the sites properly.

# Contractors Enterprises, Inc.

## Diversity and Inclusion Policy

It is not always specifically spoken, but once you become an employee of the company, it is understood. Contractors Enterprises is an equal opportunity employer.

Let us elaborate. As a minority small business, we understand the importance of making sure that everyone that works for us feels they are part of the team. Our work may be hard and very labor intensive on a daily basis, but everyone deserves respect and to be treated with respect. We are inclusive. We highlight everyone in how they are integral to our success. We listen to multiple approaches and points of view from our employees. We embrace each of our employees and encourage and foster growth in them. We listen to each employee when they have concerns, consult them, and take them into consideration when assigning workload. In addition, longtime full-time employees have the opportunity to ask for an advancement of their pay for the current pay period when they become into a financial bind. And those that does outstanding work on an ongoing basis are eligible for a special bonus at the year end.

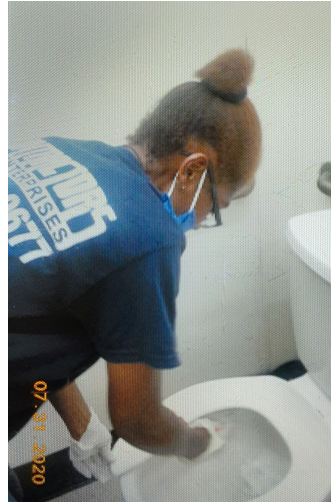
Policy enacted

City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

# Contractors Enterprises, Inc.

Just A Glimpse into Our Work

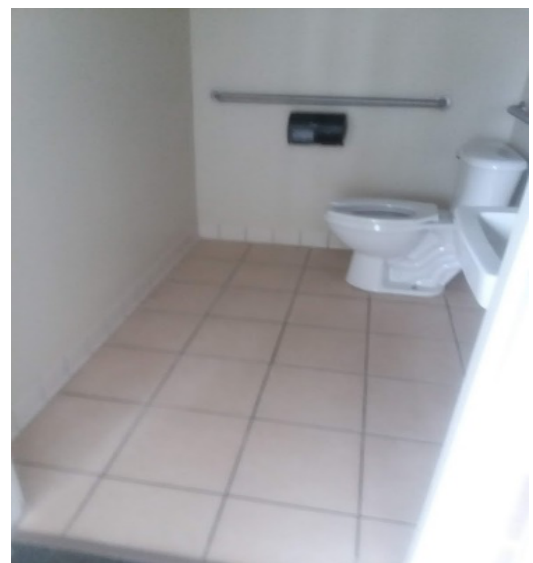
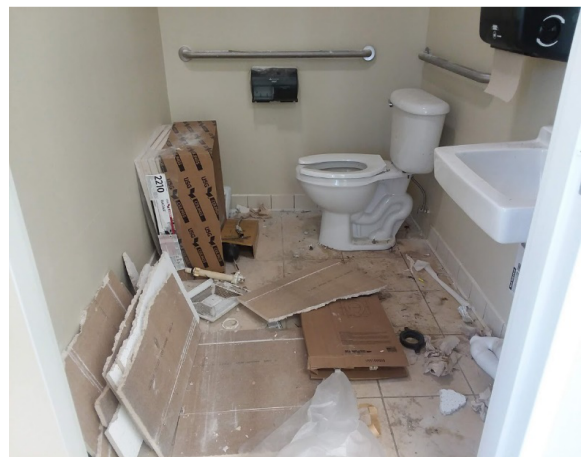


City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

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[Contractors Enterprises, Inc.](#)

City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

# Contractors Enterprises, Inc.

Just A Glimpse into Our Work





City of Gainesville

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Just A Glimpse into Our Work



[Contractors Enterprises, Inc.](http://www.contractorsenterprises.com)

City of Gainesville

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# Contractors Enterprises, Inc.

Just A Glimpse into Our Work



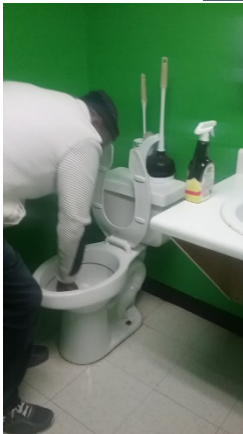
[Contractors Enterprises, Inc.](#)

City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

# Contractors Enterprises, Inc.

Just A Glimpse into Our Work



City of Gainesville

#RECP-210008-DM - Janitorial Services for Open/ Close And Cleaning Restroom For City Parks And Facilities

**EXAMPLE CHEMICALS LIST**

Disinfectants such as BETCO GE Fight BAC RTU (product codes 39012-00, 39005-00)  
Spartan Foamy Q & A (product code 32003),  
Spartan Diffense (product code 102403)  
Spartan Fast & Easy (product code 326003),  
SC Johnson Restroom Disinfectant Cleaner (product code 680070)

Spartan Hard Surface Disinfecting Wipes, Microfiber Cleaning Cloths, Fogger and Electrostatic sprayer.

And in areas of more sensitive nature, the utilization of our uv light sanitizers are more appropriate. Use of our fogger and uv light sanitizers must be specifically requested in advance when providing special deep cleaning services.

## EXAMPLE EQUIPMENT LIST

### Equipment:

Vehicles: 2 Utility Work Vans  
Vehicle: 3 Work Pickup Trucks  
8 Automated Walk Behind Scrubbing Machines  
Nobles Speed Scrub 2001 Scrub Machine  
Viper Fang 20 Scrub Machine  
Tennant 5680 walk behind Scrub Machine  
Clarke focus II L20 Scrub Machine  
6 Electric Buffers  
Clarke Floor burnisher Model 1500  
6 Propane Buffers  
Clean freak floor Buffer CPL – 225FP-20-CF  
National Cougar Floor Polisher 4096-20  
4 Carpet Extractors  
7 Backpack Vacuum Cleaners  
15 Up-Right Vacuum Cleaners  
6 Wet/Dry Vacuums  
Tennant 3540 wet vac  
3 Clothes and Garment Steamers  
1 Trailer Mounted Pressure Washer  
4 Portable Pressure Washers  
30 Maid Carts  
15 Barrels  
Signature Buckeye Floor furnish wax  
Buckeye Ripsaw Floor Stripper  
Microfiber Dust Mops  
Microfiber Cleaning Cloths  
Microfiber Flat Mops  
Abrasive pads  
Putty Knives  
Mop Buckets  
Wet Floor Signs  
Brushes  
Wipe Towels  
Scotch Guard  
Bacterial disinfectant cleaner

Additional equipment will be added as needed and/or at the directive of the City of Gainesville to properly maintain facilities.



**International Janitorial  
Cleaning Services  
Association | [www.ijcsa.org](http://www.ijcsa.org)**

**Nicoliss Johnson  
Contractor Enterprises, Inc.**

Certified Professional | Valid Until: 01 Jun 2021

**"The Home Of Professional Cleaning Companies"**

# CERTIFICATE OF TRAINING

THIS IS TO CERTIFY THAT

Nicoliss Johnson

HAS SUCCESSFULLY COMPLETED THE ONLINE TRAINING PROGRAM

**Bloodborne Pathogens Training - General Industry**

TRAINING WAS COMPLETED ON  
November 7, 2017



This certificate is confirmation that the above named student has successfully completed the indicated online training course. National Safety Compliance did not verify the identity of the student. The named student must have answered all online questions correctly (with review) before this certificate was issued. As is true with all online courses, this course did not include hands-on training or workplace specific content. Employers are responsible for these areas of content. Additionally, employers are responsible for verifying the student's understanding and competence to implement this content in the work environment, for enforcement of the safety content and for determining when retraining is necessary or required by OSHA regulations.



# Florida Unified Certification Program

## Disadvantaged Business Enterprise (DBE) Certificate of Eligibility

**CONTRACTORS ENTERPRISE**

*MEETS THE REQUIREMENTS OF 49 CFR, PART 26*

*APPROVED NAICS CODES:*

561720

Samuel Febres

*Samuel (Sammy) Febres  
DBE & Small Business Development Manager  
Florida Department of Transportation*





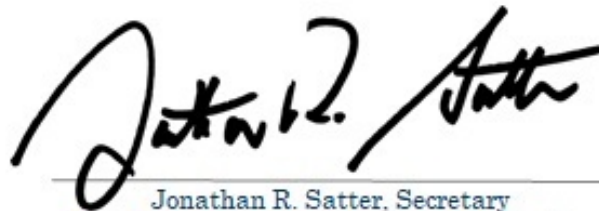
# State of Florida

## Minority Business Certification

### Contractors Enterprises, Inc.

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

08/06/2019 to 08/06/2021



Jonathan R. Satter, Secretary  
Florida Department of Management Services



Office of Supplier Diversity  
4050 Esplanade Way, Suite 380  
Tallahassee, FL 32399  
850-487-0915  
[www.dms.myflorida.com/osd](http://www.dms.myflorida.com/osd)



Small Business Development Center  
at Florida A&M University



This certificate is Awarded to

**Nicoliss Johnson**

---

in recognition  
for completion of a Small Business Training Program  
in

**Small Business Enterprise Procurement/Marketing**

---

*Alexandra R. Christa*

---

**Certified Business Analyst  
Small Business Development Center**

*Paul C. ...*

---

**Executive Director  
Small Business Development Center**

**March 20, 2008**

---

**DATE**

### Company Information

Company Name Contractors Enterprises	Company ID Number 423293	Doing Business As (DBA) Name --
DUNS Number 011963874		

#### Physical Location

Address 1  
1903 High Rd  
--  
Address 2  
--  
City  
Tallahassee  
State  
FL  
Zip Code  
32303  
County  
LEON

#### Mailing Address

Address 1  
--  
Address 2  
--  
City  
--  
State  
--  
Zip Code  
--

#### Additional Information

Employer Identification Number 721494295	Total Number of Employees 5 to 9	Perform Verifications for Your Company's Employees Yes
Parent Organization --		

#### Organization Designation

Employer Category  
None of these categories apply

[View / Edit](#)

NAICS Code  
561 - ADMINISTRATIVE AND SUPPORT  
SERVICES

[View / Edit](#)

Total Hiring Sites  
1

[View / Edit](#)

Total Points of Contact  
2

[View / Edit](#)

[View Original MOU Template](#)

[View MOU](#)



Company ID Number: 423293

**Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:**

Name Evelyn Bell  
Phone Number (850) 597 - 5852  
Fax Number (850) 270 - 9043  
Email Address ebell4242@gmail.com

Name Nicoliss Johnson  
Phone Number (850) 251 - 0677  
Fax Number  
Email Address nicoliss\_johnson62@yahoo.com



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Contractors Enterprises, Inc.

[Events](#) [Name History](#)

### Detail by Entity Name

Florida Profit Corporation  
CONTRACTORS ENTERPRISES INC.

#### Filing Information

**Document Number** P05000157601  
**FEI/EIN Number** 72-1494295  
**Date Filed** 12/01/2005  
**State** FL  
**Status** ACTIVE  
**Last Event** REINSTATEMENT  
**Event Date Filed** 10/17/2019

#### Principal Address

616 Crane Dr  
Kissimmee, FL 34759-4530

Changed: 06/05/2019

#### Mailing Address

616 Crane Dr  
Kissimmee, FL 34759-4530

Changed: 06/05/2019

#### Registered Agent Name & Address

BELL, EVELYN I  
1903 HIGH RD  
TALLAHASSEE, FL 32303

Name Changed: 10/17/2019

Address Changed: 05/01/2012

#### Officer/Director Detail

##### Name & Address

Title D

JOHNSON, NICOLISS L  
405-2 STRONG ROAD  
QUINCY, FL 32351

Title S

BELL, EVELYN  
PO BOX 38577  
TALLAHASSEE, FL 32315-8577

#### Annual Reports

Report Year	Filed Date
2018	04/30/2018
2019	10/17/2019
2020	06/29/2020

#### Document Images

<a href="#">06/29/2020 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">10/17/2019 -- REINSTATEMENT</a>	<a href="#">View image in PDF format</a>
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<a href="#">04/28/2017 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/27/2016 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
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<a href="#">05/01/2012 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
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<a href="#">01/18/2007 -- Name Change</a>	<a href="#">View image in PDF format</a>
<a href="#">05/02/2006 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">12/01/2005 -- Domestic Profit</a>	<a href="#">View image in PDF format</a>

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Contractors Enterprises, Inc.

[Events](#) [Name History](#)



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## Detail by Entity Name

Florida Profit Corporation  
CONTRACTORS ENTERPRISES INC.

### Filing Information

<b>Document Number</b>	P05000157601
<b>FEI/EIN Number</b>	72-1494295
<b>Date Filed</b>	12/01/2005
<b>State</b>	FL
<b>Status</b>	ACTIVE
<b>Last Event</b>	REINSTATEMENT
<b>Event Date Filed</b>	10/17/2019

### Principal Address

616 Crane Dr  
Kissimmee, FL 34759-4530

Changed: 06/05/2019

### Mailing Address

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Changed: 06/05/2019

### Registered Agent Name & Address

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1903 HIGH RD  
TALLAHASSEE, FL 32303

Name Changed: 10/17/2019

Address Changed: 05/01/2012

### Officer/Director Detail

#### **Name & Address**

Title D

JOHNSON, NICOLISS L  
405-2 STRONG ROAD  
QUINCY, FL 32351

Title S

BELL, EVELYN  
PO BOX 38577  
TALLAHASSEE, FL 32315-8577

### Annual Reports

<b>Report Year</b>	<b>Filed Date</b>
2018	04/30/2018
2019	10/17/2019

2020

06/29/2020

**Document Images**

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<a href="#">12/01/2005 -- Domestic Profit</a>	<a href="#">View image in PDF format</a>

Florida Department of State, Division of Corporations

# *State of Florida*

## *Department of State*

I certify from the records of this office that CONTRACTORS ENTERPRISES INC. is a corporation organized under the laws of the State of Florida, filed on December 1, 2005.

The document number of this corporation is P05000157601.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on June 29, 2020, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the First day of February, 2021*



*Ronald R. DeBevoise*  
*Secretary of State*

Tracking Number: 9963218311CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



# *State of Florida*

## *Department of State*

I certify from the records of this office that CONTRACTORS ENTERPRISES INC. is a corporation organized under the laws of the State of Florida, filed on December 1, 2005.

The document number of this corporation is P05000157601.

I further certify that said corporation has paid all fees due this office through December 31, 2018, that its most recent annual report/uniform business report was filed on April 30, 2018, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Eighteenth day of February,  
2019*



*Randy Bee*  
*Secretary of State*

Tracking Number: 5228363837CU

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