

BID COVER PAGE

City of
Gainesville

Procurement Division

(352) 334-5021(main)
Issue Date: 05/26/2023

INVITATION TO BID: # PWDA-230053-WB
SW 43rd Street Rehabilitation

PRE-BID MEETING: ☐ Non-Mandatory ☐ Mandatory ☒ N/A ☐ Includes Site Visit
DATE: _____ TIME: _____
LOCATION: _____

QUESTION SUBMITTAL DUE DATE: 6/21/23

All meetings and submittal deadlines are Eastern Time (ET).

DUE DATE FOR UPLOADING BID RESPONSE: 6/30/23 @ 3:00PM

SUMMARY OF SCOPE OF WORK: Roadway milling, resurfacing and widening with sidewalk and bus stop improvements and related incidental work on SW 43rd Street in Gainesville, Florida.

For questions relating to this bid, contact: Wendy Byrne byrnewm@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 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) # 1 Dated 06.22.2023

Legal Name of Bidder: Watson Construction Company, LLC

DBA: _____

Authorized Representative Name/Title: Douglas Dabney -Owner

E-mail Address: Doug.dabney@watsonconstruct.com

FEIN: 80-0219140

Street Address: 940 NWE 247th Drive

Mailing Address (if different): _____

Telephone: (352) 472-9157

Fax: (352) 472-2520

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,

☒ Bid is in full compliance with the Specifications.

☒ Bid is in full compliance with specifications except as specifically stated and attached hereto.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: _____

SIGNER'S PRINTED NAME: Douglas Dabney

DATE: 06/29/2023

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



ADDENDUM NO. 1

Date: June 22, 2023

Bid Date: June 30, 2023
at 3:00 P.M. (Local Time)

Bid Name: SW 43rd Street Rehabilitation
Bid No.: PWDA-230053-WB

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:

1. Please find attached:
 - a) Questions submitted by potential bidders via email prior to the deadline of June 21, 2023.
 - b) Copy of the Cone of Silence information (Financial Procedures Manual Section 41-524 Prohibition of Lobbying in Procurement Matters).

ADDENDUM #1 – Questions and Answers

Question1: Will a CEI be inspecting the work? If so, which firm will conduct the inspection?

Answer1: This has not yet been determined. If a CEI is utilized, it is anticipated that the firm will be Kisinger Campo & Associates Corp.

Question2: Is it acceptable to bid removing 6" of material and replacing with 6" of limerock in lieu the 12" type B stabilization LBR 40 for the widening?

Answer2: Yes, this 6" limerock in lieu of Type B stabilization is acceptable per FDOT specifications.

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

PART 4 – BID FORM

PWDA-230053-WB - SW 43rd Street Rehabilitation

Date: 06/29/2023

The bidder hereby declares that he has examined the site of the work and informed himself fully in regard to all conditions pertaining to the place where the work is to be done, and that he has examined the plans, specifications, agreement and all documents related to the above referenced solicitation for the work and comments hereto attached. The Bidder further declares that the only persons, company or parties interested in this Bid or the Agreement to be entered into, as principals, are named herein; that this Bid is made without connection with any other person, company or parties making a Bid; and it is in all respects fair and in good faith and without collusion or fraud.

The Bidder proposes and agrees, if this Bid is accepted, to contract with City of Gainesville, Florida, through the City Commission, in the form of Agreement specified, to furnish all necessary materials, equipment, machinery, tools, apparatus, means of transportation, labor and service necessary to complete the work covered by the Bid Solicitation for: SW 43rd Street Rehabilitation, Bid No. **PWDA-230053-WB** to furnish the prescribed Performance and Payment Bond for not less than one hundred percent (100%) of the bid price; and to furnish the required evidence of the specified insurance.

The undersigned agrees to commence work as set forth in the Notice to Proceed and to reach substantial completion within seventy (70) Working Days from the date on which work commences with final completion within sixty (60) calendar days thereafter. If the Contractor fails to complete the work within the specified time, the Contractor agrees to pay the City liquidated damages in the amounts specified in the Agreement.

Attached is a list of similar projects and a list of Subcontractors as covered in the Instructions to Bidders.

The Bidder agrees to accept in full compensation for each item the prices named in the schedule incorporated herein and attached as "Bid Schedule". The Bidder understands that the quantities shown on the "Bid Schedule" are approximate only and subject to increase or decrease. Should they be increased or decreased, work will be performed at the unit price bid herein. Actual quantities will be determined upon completion of the work.

This page must be completed and uploaded with your Submittal.

PWDA-230053-WB - SW 43rd Street Rehabilitation**4.1 BID FORM/PAY ITEM LIST**

ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
1	MOBILIZATION	1	LS	174,766.00	174,766.00
2	MAINTENANCE OF TRAFFIC	1	LS	74,787.00	74,787.00
3	PREVENTION, CONTROL & ABATEMENT OF EROSION & WATER POLLUTION	1	LS	14,160.00	14,160.00
4	SEDIMENT BARRIER	1,917	LF	2.50	4,792.50
5	LITTER REMOVAL	7.9	AC	100.00	790.00
6	MOWING	7.9	AC	100.00	790.00
7	CLEARING AND GRUBBING	1	LS	22,050.00	22,050.00
8	REMOVAL OF EXISTING CONCRETE	358	SY	45.00	16,110.00
9	GRADING	1	LS	59,892.00	59,892.00
10	BORROW	360	CY	29.00	10,440.00
11	SUBOIL EXCAVATION	300	CY	35.00	10,500.00
12	FLOWABLE FILL	49.3	CY	500.00	24,650.00
13	TYPE B STABILIZATION	1,249	SY	24.14	30,150.86
14	OPTIONAL BASE GROUP 6	911	SY	37.00	33,707.00
15	MILLING EXISTING ASPHALT PAVEMENT, 3" AVG DEPTH	4,690	SY	6.15	28,843.50

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
16	MILLING EXISTING ASPHALT PAVEMENT, 1 1/2" AVG DEPTH	404	SY	13.62	5,502.48
17	SUPERPAVE ASPHALTIC CONCRETE, TRAFFIC B	605.6	TN	178.75	108,251.00
18	ASPHALT CONCRETE FRICTION COURSE, TRAFFIC B, FC 12.5, PG 76-22	324.8	TN	180.00	58,464.00
19	CONCRETE CLASS NS, GRAVITY WALL	21.5	CY	1,150.00	24,725.00
20	INLETS, DT BOT, TYPE C, < 10'	3	EA	5,063.00	15,189.00
21	INLETS, DT BOT, TYPE C, MODIFY	1	EA	4,313.00	4,313.00
22	PIPE CULVERT, ROUND, 15" RCP OR PPP, S/CD	205	LF	132.23	27,107.15
23	PIPE CULVERT, OTHER SHAPE, 15" ERCP. S/CD	127	LF	121.00	15,367.00
24	PIPE CULVERT, OTHER SHAPE, 18" ERCP. S/CD	349	LF	151.57	52,897.93
25	FLARED END SECTION, CONCRETE, 15"	2	EA	2,773.00	5,546.00
26	MITERED END SECTION, OPTIONAL ROUND, 15" SD	1	EA	2,725.00	2,725.00
27	MANHOLES, ADJUST	5	EA	1,998.00	9,990.00
28	WATER VALVES, ADJUST	5	EA	1,250.00	6,250.00
29	PEDESTRIAN/BICYCLE RAILING, ALUMINUM ONLY, 42" TYPE 1	245	LF	156.00	38,220.00
30	CONCRETE CURB & GUTTER, TYPE F	442	LF	48.00	21,216.00

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ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
31	TRAFFIC SEPARATOR CONCRETE-TYPE IV, 4' WIDE	47	LF	98.00	4,606.00
32	TRAFFIC SEPARATOR CONCRETE-TYPE IV, 8.5' WIDE	275	LF	155.00	42,625.00
33	CONCRETE SIDEWALK AND DRIVEWAYS, 4" THICK	583	SY	90.00	52,470.00
34	CONCRETE SIDEWALK AND DRIVEWAYS, 6" THICK	118	SY	126.00	14,868.00
35	DETECTABLE WARNINGS (CITY STANDARD BRICK)	192	SF	59.00	11,328.00
36	PERFORMANCE TURF	2,129	SY	7.00	14,903.00
37	PERFORMANCE TURF, SOD	505	SY	9.00	4,545.00
38	SINGLE POST SIGN, F&I GROUND MOUNT, UP TO 12 SF	5	AS	460.00	2,300.00
39	SINGLE POST SIGN, RELOCATE	2	AS	287.50	575.00
40	SIGN PANEL, INSTALL, UP TO 12 SF	1	EA	322.00	322.00
41	RAISED PAVEMENT MARKER, TYPE B	154	EA	11.50	1,771.00
42	PAINTED PAVEMENT MARKINGS, FINAL SURFACE	1	LS	7,050.00	7,050.00
43	THERMOPLASTIC, STANDARD, WHITE, SOLID, 12"	420	LF	5.52	2,318.40
44	THERMOPLASTIC, STANDARD, WHITE, SOLID, 24" FOR STOP LINE	27	LF	11.04	298.08
45	THERMOPLASTIC, STANDARD, WHITE, 2-4 SKIP, 6"	0.204	GM	8,750.00	1,785.00

This page must be completed and uploaded with your Submittal.

ITEM NO.	DESCRIPTION	EST QUANTITY	UNIT	UNIT PRICE	AMOUNT BID (EXT TOTAL)
46	THERMOPLASTIC, STANDARD, WHITE, MESSAGE OR SYMBOL	6	EA	402.50	2,415.00
47	THERMOPLASTIC, STANDARD, WHITE, ARROW	13	EA	201.25	2,616.25
48	THERMOPLASTIC, STANDARD, YELLOW, SOLID, 18" FOR DIAGONAL OR CHEVRON	65	LF	8.74	568.10
49	THERMOPLASTIC, STANDARD-OTHER SURFACES, WHITE, SOLID, 6"	0.428	GM	8,750.00	3,745.00
50	THERMOPLASTIC, STANDARD-OTHER SURFACES, YELLOW, SOLID, 6"	0.467	GM	8,750.00	4,086.25
51	BICYCLE RACK, RELOCATE, 1-2 BICYCLES	2	EA	1,200.00	2,400.00
TOTAL BID AMOUNT				\$ 1,079,787.50	

List of Unit Abbreviations:

SY Square Yards	GL Gallons	SD Side Drain
LS Lump Sum	MG Thousand Gallons	ED Each Day
CY Cubic Yards	GM Gross Miles	CD Cross Drain
EA Each	LF Linear Feet	AC Acre
TN Tons	NM Net Miles	RCP Reinforced Concrete Pipe
HR Hour	AS Assembly	PI Per Intersection

Note: THE CITY RESERVES THE RIGHT TO AWARD THIS BID ON THE BASIS OF EACH LINE INDIVIDUALLY, ANY COMBINATION OF LINE ITEMS OR ALL LINE ITEMS COMBINED AS IT DETERMINES TO BE IN ITS BEST INTEREST. THE CITY RESERVES THE RIGHT TO NOT AWARD ANY LINE ITEM AS IT DETERMINES TO BE IN ITS BEST INTEREST.

Note: THE CITY RESERVES THE RIGHT TO ADD OR DELETE LOCATIONS, SERVICES, ITEMS, OR MATERIALS FROM THIS CONTRACT SHOULD IT BE IN THE BEST INTEREST OF THE CITY. THE CONTRACT PRICE MAY BE ADJUSTED UPON AGREEMENT OF THE CONTRACTOR AND THE CITY'S REPRESENTATIVE AND BASED UPON BID PRICES.

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This page must be completed and uploaded with your Submittal.

DRUG-FREE WORKPLACE FORM

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

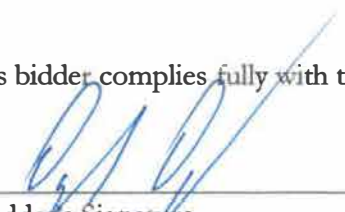
Watson Construction Company LLC

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.


Bidder's Signature

06/29/2023

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

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, 1.5, last paragraph)

If the answer is "YES", provide a copy of SunBiz registration or SunBiz Document Number (# L08000014232)

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.

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.

Watson Construction Company LLC

Bidder's Name

Douglas Dabney-Owner

Printed Name/Title of Authorized Representative

06/29/2023

[Signature]
Signature of Authorized Representative

Date

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

CUSTOMER HISTORY

Name of Bidder: Watson Construction Company LLC

Provide a list of prior customers for similar services that your bidder has provided within the last five (5) years. Copy form as necessary.

Customer Name: Alachua County	
Address:	
City, State, Zip:	
Point of Contact: David Owen	Phone Number: 352-548-1286
E-mail:	

Customer Name: Santa Fe RV Park Turn Lane	
Address:	
City, State, Zip:	
Point of Contact: Paul Hirneise	Phone Number: 352-318-8899
E-mail:	

Customer Name: Celebration Pointe	
Address:	
City, State, Zip:	
Point of Contact: Troy Eli	Phone Number: 352-317-1855
E-mail:	

Customer Name: City of Gainesville	
Address:	
City, State, Zip:	
Point of Contact: Matt Williams	Phone Number: 352-316-6402
E-mail:	

Customer Name: FDOT	
Address:	
City, State, Zip:	
Point of Contact: Dale Hunter	Phone Number: 352-317-1170
E-mail:	

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

Request for Taxpayer Identification Number and Certification

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

► Go to 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.

Watson Construction Company, LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: 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 **not** 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.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

940 NW 247th Drive

6 City, state, and ZIP code

Newberry, FL 32669

7 List account number(s) here (optional)

Requester's name and address (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.

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.

Social security number

____ - ____ - _____

or

Employer identification number

8 0 - 0 2 1 9 1 4 0

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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.

Sign
Here

Signature of
U.S. person ►

Joni L Durden

Digitally signed by Joni L
Durden
Date: 2023.02.10 09:23:00
+05'00'

Date ►

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.

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)

12/27/2022

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).

PRODUCER
Arthur J. Gallagher Risk Management Services, Inc.
4350 W Cypress St Suite 300
Tampa FL 33607

CONTACT NAME: Jacquie Monroe

PHONE (A/C, Hn, Ext): 727-797-6250

FAX (A/C No):

E-MAIL: CertRequests@ajg.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Zenith Insurance Company

13289

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED
Watson Construction Company, LLC
940 NW 247th Drive
Newberry FL 32669

WATSON-01

COVERAGES

CERTIFICATE NUMBER: 1695788367

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR (INSR, WVR)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: 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 - COM/PROP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A	2133881307	1/1/2023	1/1/2024	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Excluded officer-Douglas H. Dabney (managing member), Tammy Dabney (managing member)

CERTIFICATE HOLDER**CANCELLATION**

City of Gainesville, Florida, a Municipal Corporation

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

Matt Doyle

© 1988-2015 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/1/2023

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.

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PRODUCER
McGriff-Williams Insurance
3501-A W. University Ave
Gainesville FL 32607

CONTACT NAME:
PHONE
(A/C, No, Ext): 352-371-7977 **FAX**
(A/C, No): 352-505-2069
E-MAIL ADDRESS: karen@mcgriffwilliams.com

INSURED
Watson Construction Company LLC
940 NW 247th Dr
Newberry FL 32669-2545

WATSCON-01

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Bitco National Insurance Company	20109
INSURER B: Bitco General Insurance Company	20095
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** 1251979064**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	ADDITIONAL SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	CLP 3 726 460	2/20/2023	2/20/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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	Y	CAP 3 726 462	2/20/2023	2/20/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		CUP 2 821 636	2/20/2023	2/20/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> 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)

RE: SW 62 Blvd Connector (LAP 211365-6-58-01). The City of Gainesville, Florida, a Municipal Corporation, its officials, employees and volunteers are Additional Insureds with respects to General Liability and Automobile Liability on Primary and Noncontributory basis as per written contract. 30 Days Notice of cancellation applies.

CERTIFICATE HOLDER**CANCELLATION**

City of Gainesville, Florida, a Municipal Corporation

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 NEWBERRY

25440 W Newberry Rd, Newberry, FL 32669-0369

LOCAL BUSINESS TAX

Issued: September 30, 2022

License # 0250.1

Expires: September 30, 2023

Fee Paid: \$162.00

Business Name/Address

**WATSON CONSTRUCTION COMPANY
OFFICE
940 NW 247TH DR
NEWBERRY FL 32669-2545**

Local Business Tax Issued To:

**WATSON CONSTRUCTION COMPANY
940 NW 247TH DR
NEWBERRY FL 32669-2545**

**Business Type:
CONTRACTORS**

Judy S. Rice

Judy S. Rice (Oct 4, 2022 13:38 EDT)

CITY CLERK

**NOTE: This Local Business Tax is not transferable, POST IN A CONSPICUOUS PLACE.
This Local Business Tax becomes a receipt only when properly dated and signed.**



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Judy S. Rice

Judy S. Rice (Oct 4, 2022 13:38 EDT)

CITY CLERK

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This Local Business Tax becomes a receipt only when properly dated and signed.**

Jimmy Patronis
CHIEF FINANCIAL OFFICER

Julius Halas
DIVISION DIRECTOR



John Gatlin
BUREAU CHIEF

Catherine Thrasher
SAFETY PROGRAM MANAGER

FLORIDA DEPARTMENT OF FINANCIAL SERVICES

DIVISION OF STATE FIRE MARSHAL

200 EAST GAINES STREET - Tallahassee, Florida 32399-0342

Tel. 850-413-3644

CERTIFICATE OF COMPETENCY
OFFICIAL COPY

THIS CERTIFIES THAT:

Douglas H Dabney
940 NW 247th Drive
Newberry FL 32669

BUSINESS ORGANIZATION: Watson Construction Company, LLC

Contractor V means a contractor whose business is limited to the execution of contracts requiring the ability to fabricate, install, inspect, alter, repair and service the underground piping for a fire protection system using water as the extinguishing agent beginning at the point of service as defined in the act and ending no more than 1 foot above the finished floor.

Issue Date: 07/01/2022
Type: 09
Class: 14
County: Alachua
License/Permit #: FPC21-000105
Expiration Date: 06/30/2024



Chief Financial Officer



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

**THE UNDERGROUND UTILITY & EXCAVATION CO HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES**

DABNEY, DOUGLAS HALE

WATSON CONSTRUCTION COMPANY, LLC
940 NW 247TH DRIVE
NEWBERRY FL 32669

LICENSE NUMBER: CUC1225043

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

CONSTRUCTION INDUSTRY LICENSING BOARD

**THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES**

DABNEY, DOUGLAS HALE

**WATSON CONSTRUCTION COMPANY, LLC
940 NW 247TH DRIVE
NEWBERRY FL 32669**

LICENSE NUMBER: CGC1510498

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



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PROPOSED SUBCONTRACTORS FORM

Watson Construction Company LLC

Name of Bidder: _____

This form is for all Subcontractors being utilized on this project.

Name of Contractor: SNG Pavement Markings

Address: 1104 NW 50th Ave STE A Gainesville FL 32609

Scope of Work to be Performed: Pavement Markings

Total \$ Value: \$ 34,118.00 % of Total BID/RFP: 3.16 %

Name of Contractor: Amazon Metals

Address: 600 Cox Road STE C Cocoa, FL 32926

Scope of Work to be Performed: _____

Total \$ Value: \$ 33,191.28 % of Total BID/RFP: 3.1 %

Name of Contractor: Crown Construction

Address: 11316 NW 120th Terrace Alachua FL 32618

Scope of Work to be Performed: Concrete curbs and sidewalks

Total \$ Value: \$ 74,314.00 % of Total BID/RFP: 6.9 %

Name of Contractor: Scherer Quality Farms

Address: 17791 SE 80th St Morriston, FL 32668

Scope of Work to be Performed: Sod/Grassing

Total \$ Value: \$ 11,100.00 % of Total BID/RFP: 1 %

Name of Contractor: Cal Tech Testing

Address: PO Box 1625 Lake City FL 32056

Scope of Work to be Performed: Testing

Total \$ Value: \$ 28,000.00 % of Total BID/RFP: 2.6 %

If additional space is required for your subcontractor listing, make copies of this form and submit with you bid package.

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

RESPONSIBLE AGENT FORM

Douglas Dabney

RESPONSIBLE AGENT: _____

ADDRESS: 940 NW 247th Drive Newberry, FL 32669 _____

PHONE NO.: 352-472-9157 _____

FAX NO.: 352-472-2520 _____

EMAIL ADDRESS: doug.dabney@watsonconstruct.com _____

ALTERNATE RESPONSIBLE AGENT: Jon Bailey _____

ADDRESS: 940 NW 247th Drive Newberry FL 32669 _____

PHONE NO.: 352-281-6269 _____

FAX NO.: 352-472-2520 _____

EMAIL ADDRESS: j_biley@watsonconstruct.com _____

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

PROJECT MANAGER AND SUPERINTENDENT OR OWNER'S EXPERIENCE

<u>NAME AND TITLE</u>		<u>ROLE IN THIS PROJECT</u>		<u>YEARS EXPERIENCE</u>	
Douglas Dabney-Owner		Owner-Project Manager		TOTAL 25	WITH THIS FIRM 25
<u>RELEVANT PROJECTS</u>					
<u>1. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
SR121 Traffic OPS Improvement FDOT T2768 Gainesville FL					2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm MOT, Storm Drainage, Added and Modified Turn Lanes, Signalization, F Curb, Sidewalk, Traffic Separators, Mill, Resurface and Pavement Markings. Project MGR-Owner \$1.9 Million					
<u>2. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
ACPW 32nd Ave Gainesville, FL					2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm MOT, Storm Drainage, Reconstruct Road Side Ditches, Mill and Resurface, Sod, Pavement Markings and Signs-Project MGR-Owner \$ 1.9 Million					
<u>3. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
Celebration Pointe Gainesville, FL					2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm MOT, Clearing, Storm Drainage, Sanitary Sewer, Water, Fireline, Warthwork Basins, Curbs, Sidewalks, Stabilization of subgrade base, Paving roads and parking lots, Multiple Phases-Project MGR-Owner \$ 37 Million					
<u>4. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
Flintrock Subdivision Gainesville, FL					2022
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm Storm Drainage, Earthwork, basins, Roadside ditches, Stabilize subgrade, Limerock Base, Paving -Project MGR-Owner \$ 4.5 Million					
<u>5. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
VA Gainesville FL					2022
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm MOT, Turn Lane, Decel Lane on 121, Water, Sewer, Storm, Basins, Grading, Parking Lots and Road Construction, Curbs, Sidewalk Project MGR-Owner \$ 6.5 Million					
<u>6. PROJECT TITLE AND LOCATION</u> (city and state)					<u>YEAR COMPLETED</u>
Newberry Park Gainesville, FL					2021
<u>BRIEF DESCRIPTION</u> (Brief scope, size, costs, etc.) and <u>SPECIFIC ROLE</u> <input type="checkbox"/> Check if project completed with current firm Paving, Grading, Drainage, Water, Sanitary, Fire, Basins- Project MGR-Owner \$ 5.6 Million					

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