BID FORM

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Date: Nov. 13, 2019

PROJECT: Water Treatment Facility Train No. 7 Buildout

	-
BID	DDER: Aerex Industries, Inc.
TH	IS BID IS SUBMITTED TO:
Clei 123	llington k's Office 00 Forest Hill Boulevard lington, FL 33414
1.	The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into an Agreement with OWNER in the form included in the Contract Documents to perform and furnish all Work as specified or indicated in the Contract Documents for the Contract Price and within the Contract Time indicated in this Bid and in accordance with the other terms and conditions of the Contract Documents.
2.	BIDDER accepts all of the terms and conditions of the Advertisement or Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. This Bid will remain subject to acceptance for 180 days after the posting of the recommended award. BIDDER will sign and submit the Agreement with the Bonds and other documents required by the Bidding Requirements within 15 days after the date of OWNER'S Notice of Award.
3.	In submitting this Bid, BIDDER represents, as more fully set forth in the Agreement, that:
	(a) BIDDER has examined copies of all the Bidding Documents and of the following Addenda (receipt of all which is hereby acknowledged):
	Date N/A Date Addenda Number N/A Addenda Number Date Addenda Number
	(b) BIDDER has familiarized itself with the nature and extent of the Contract Documents, Work, Site, locality, and all local conditions, Laws, and Regulations that in any manner may affect cost, progress, performance, or furnishing of the Work.
	(c) BIDDER has studied carefully all reports and drawings of subsurface conditions and drawings of physical conditions which, if any, are attached to the Contract Documents, and accepts the determination as set forth in the Bidding Documents of the extent of the technical data contained in such reports and drawings upon which BIDDER is entitled to rely.

- (d) BIDDER has obtained and carefully studied (or assumes responsibility for obtaining and carefully studying) all such examinations, investigations, explorations, tests and studies (in addition to or to supplement those referred to in (c) above) which pertain to the subsurface or physical conditions at the site or otherwise may affect the cost, progress, performance or furnishing of the Work as BIDDER considers necessary for the performance or furnishing of the Work at the Contract Price, within the Contract Time and in accordance with the other terms and conditions of the Contract Documents, and no additional examinations, investigations, explorations, tests, reports or similar information or data are or will be required by BIDDER for such purposes.
- (e) BIDDER has reviewed and checked all information and data shown or indicated on the Contract Documents with respect to existing Underground Facilities at or contiguous to the site and assumes responsibility for the accurate location of said Underground Facilities. No additional examinations, investigations, explorations, tests, reports or similar information or data in respect of said Underground Facilities are or will be required by BIDDER in order to perform and furnish the Work at the Contract price, within the Contract Time and in accordance with the other terms and conditions of the Contract Documents.
- (f) BIDDER has correlated the results of all such observations, examinations, investigations, explorations, tests, reports, and studies with the terms and conditions of the Contract Documents.

- (g) BIDDER has given OWNER written notice of all conflicts, errors or discrepancies that it has discovered in the Contract Documents and the written resolution thereof by ENGINEER is acceptable to BIDDER.
- (h) This Bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm, or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; BIDDER has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; BIDDER has not solicited or induced any person, firm or corporation to refrain from bidding; and BIDDER has not sought by collusion to obtain for itself any advantage over any other Bidder or over OWNER.
- 4. BIDDER agrees to perform all the Work described in Contract Documents, subject to adjustments as provided therein, for the Prices BIDDER provides on the Schedule of Values.
- 5. BIDDER declares it understands that the unit quantities shown on the Bid Form Unit Price Schedule are approximate only and not guaranteed and are subject to either increase or decrease; and that should the quantities of any of the items of Work be increased, the BIDDER agrees to do the additional Work at the unit prices set out herein, and should the quantities be decreased, BIDDER also understands that final payment shall be made on actual quantities completed at the unit prices, and shall make no claims for anticipated profits for any decrease in the quantities.
- 6. The BIDDER further declares its understands the OWNER may elect to construct only a portion of the Work covered by these Documents and BIDDER agrees to perform that portion of the Work for which BIDDER is awarded a Contract at the unit prices quoted herein.
- 7. BIDDER agrees that the Work:

Water Treatment Facility Train No. 7 Buildout shall be Substantially Complete within 180 days of Notice to Proceed and Finally Complete within 210 days of Notice to Proceed. Work hours Monday – Friday 7am – 5pm, excluding holidays.

BIDDER accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work on time.

- 8. The following documents are attached to and made a condition of this Bid:
 - (a) Required Bid security in the form of Bid Bond.
 - (b) Schedule of Values.
 - (c) List other documents as pertinent.
- 9. Communications concerning this Bid shall be telephoned or addressed to:

	Name:	Montroe Hopkins		
	Address:	3504 Industrial 27th St., Fort Pi	erce, FL 34946	
	Phone No.: _	772-448-5818	Fax: <u>772-467-2608</u>	
10.	BIDDER'S F	Florida Contractor's License No	CGC1507464	
11.	BIDDER covenants that it is qualified to do business in the State of Florida and has attached evidence of BIDDER'S qualification to do business in the State of Florida, or if not attached, BIDDER covenants to obtain such evidence within five days of request by OWNER to provide evidence.			
If B	IDDER is			
<u>An I</u>	ndividual			
	NameN/A			(SEAL)
	Signature:			
	Doing busine	ess as		
	Business Add	dress:		

Phone Number:	Fax Number	***************************************
A Partnership		
Firm's Name N/A	(SEA	AL)
General Partner Signature:		
Business Address:		and the same of th
Phone Number:	Fax Number	
A Corporation		
Corporation's Name Aerex Industries, Inc.	(SEA	AL)
State of Incorporation Florida		
Authorized Person: Thomas A. Donnick, Jr.		
Title: President		
Signature:		
Attest: Frederick MeTaggart	(Secreta	iry)
Signature:		
Business Address: 3504 Industrial 27th St., Fort I	Pierce, FL 34946	
Phone Number: 772-448-5800	Fax Number 772-467-2608	=

BID BOND/SECURITY

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

KNOW ALL MEN BY THESE PRESENTS, that we	Aerex Industries, Inc.
as Principal, hereinafter called the Principal, and	Travelers Casualty and Surety Company of America
a corporation duly organized under the laws of the Sheld and firmly bound unto Wellington, Purchasing I	State of <u>Connecticut</u> as Surety, hereinafter called the Surety, are Dept., 12300 Forest Hill Boulevard, Wellington, FL 33414
	am of Ten Percent (10%) of amount bid for the payment of which sum well and rety, bind ourselves, our heirs, executors, administrators, successors and assigns,
WHEREAS, the said Principal has submitted a bid for	or Water Treatment Facility Train No. 7 Buildout.
in accordance with the terms of such bid, and give su good and sufficient surety for the faithful performant the prosecution thereof, or in the event of the failu Principal shall pay to the Obligee the difference not	bid of the Principal and the Principal shall enter into a Contract with the Obligee such bond or bonds as may be specified in the bidding or Contract Documents with ce of such Contract and for the prompt payment of labor and material furnished in are of the Principal to enter such Contract and give such bond or bonds, if the to exceed the penalty hereof between the amount specified in said bid and such ith contract with another party to perform the Work covered by said bid, then this in in full force and effect.
Signed and sealed November 13, 2019	
Witnesses:	Aerex Industries, Inc. Seal
Donna R. Summerield	By:
	Travelers Casualty and Surety Company of America Seal
Jacki Mainous, Witness	By: Jorge L. Bracamonte, Attorney-In-Fact & Florida Licensed Resident Agent

Inquiries: (321) 800-6594



Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company St. Paul Fire and Marine Insurance Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint JORGE BRACAMONTE of ORLANDO

, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 17th day of January, 2019.







State of Connecticut

City of Hartford ss.

On this the 17th day of January, 2019, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF. I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021

Raney Senior Vice President

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

PURLIC

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.







SCHEDULE OF VALUES

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Item No.	Description	Estimated Quantity	Unit of Measure	Unit Price	Total for Item
1	Water Treatment Facility Train No 7 Buildout (per bid documents and plans)	1	LS	\$69,900.00	\$69,900.00
	TOTAL CONTRACT PRICE				\$69,900.00

Sixty-Nine Thousand, Nine Hundred and 00/100

BIDDER/CONTRACTOR understands and agrees that this is a Lump Sum Contract and that successful contractor shall prepare and submit a detailed Schedule of Values to Wellington for approval prior to first payment application.

SCHEDULE OF SUBCONTRACTORS

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Discipline	Subcontractor	Address City, ST, Zip	License Number
None			

Address of Subcontractor may be considered in accordance with Wellington's Local Preference Policy

SCHEDULE OF EQUIPMENT AND MATERIALS

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Item	Manufacturer	Description
Couplings	Piedmont	Style D
PVC Piping	Harrington Plastics	Permeate Piping
Stainless Steel Piping	Aerex	Con. & Inter-Stage Piping
		·

SWORN STATEMENT UNDER SECTION 287.133(3)(a), FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1.	This sworn statement is submitted to Village of Wellington [print name of the public entity]
	by Thomas A. Donnick, Jr., President [print individual's name and title] for Aerex Industries, Inc.
	[print name of entity submitting sworn statement]
	whose business address is 3504 Industrial 27th St., Fort Pierce, FL 34946
	and (if applicable) its Federal Employer Identification Number (FEIN) is 65-0258708
	(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:)
2.	I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services or any contract for the construction or repair of a public building or public work, to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3.	I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), <u>Florida Statutes</u> , means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4.	I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
	 A predecessor or successor of a person convicted of a public entity crime; or An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
5.	I understand that a "person" as defined in Paragraph 287.133(1)(c), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
6.	Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. [Please indicate which statement applies.]
	$\frac{X}{\text{employees}}$. Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.
	The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.
	The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer

determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list.

[attach a copy of the final order]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM. [signature] November 13, 2019 [date] STATE OF Florida COUNTY OF St. Lucie Subscribed and Sworn to (or affirmed) before me on November 13, 2019 [date] Thomas A. Donnick, Jr. . He/she is personally known to me or has presented [name] as identification. [type of identification] Donna L. Summerfield GG079581 Print Notary Name and Commission No.

> DONNA L. SUMMERFIELD Notary Public – State of Florida Commission # GG 079581 My Comm. Expires May 18, 2021 Bonded through National Notary Assn.

DRUG FREE WORKPLACE

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Preference may be given to businesses with drug-free workplace programs. Whenever two or more Bids which are equal with respect to price, quality, and service are received by the Owner for the procurement of commodities or contractual services, a Bid received from a business that certifies that it has implemented a drug-free workplace program may be given preference in the award process. Established procedures for processing tie Bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business must attest to the following:

- 1. We 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. We inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3. We 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. We, 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. We 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. We 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 firm complies fully with the above requirements.

Contractor's Signature

TRENCH SAFETY AFFIDAVIT

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Trench Safety Sta	andards ident 0 Subpart P	ified in the Occupational Safety will be adhered to during trench	hereby provides written assurance that and Health Administration's Excavate excavation in accordance with Florid	tion Safety Standards, (O	SHA) 29
The undersigned complying with the	acknowledg ne Florida "T	es that included in the various rench Safety Act" as summarize	s items of the proposal and in the ed below: (Attach additional sheets a	Total Proposal Price are s necessary).	e costs for
I	chedule Item	Trench Safety Measu	re (Slope, Trench Shield, etc.)	Cost	
		N/A			
		C.L.I			
		Total	,		
		201/	November 13, 2019		
STATE OFFlor	(Signature)		(Date)		
COUNTY OF St					
Subscrib	ed and Swor	n to (or affirmed) before me on_	November 13, 2019		by
Thomas	s A. Donnick	, Jr.	. He/she is personally kno	wn to me or has presente	d
	N/A	(type	of i.d.) as identification.		
Notary Public Sig	nature and S DONNAL.SUIC- Commission 4 My Comm. Expire Bonded through Na	MMERFIELD State of Florida GG 079581 Pas May 18, 2021	Donna L. Summerfield GG07958 Print Notary Name and Commission		

QUESTIONNAIRE

The following Questionnaire shall be completed and submitted in Envelope with the Bid. By submission of this Bid, Bidder guarantees the truth and accuracy of all statements and answers herein contained. How many years has your organization been in business? 28 years Have you ever failed to complete work awarded to you? If so, where and why? Has the bidder or his or her representative inspected the proposed project and does the Bidder have a complete plan for its performance? Will you subcontract any part of this work? If so, give details including a list of each subcontractor(s) that will perform work in excess of the percent (10%) of the contract amount and the work that will be performed by each subcontractor(s). Subcontractor Work to be Performed None What equipment do you own that is available for the work? <u>Ladders & Scaffolding</u> What equipment will you purchase for the proposed work? None None 7. What equipment will you rent for the proposed work? ___ State the name of your proposed project manager and give details of his or her qualifications and experience in managing similar jobs. Montroe Hopkins has 31 years of experience in managing similar projects. 9. State the true, exact, correct and complete name of the partnership, corporation, or trade name under which you do business and the address of the place of business. (If a corporation, state the name of the president and secretary. If a partnership, state the names of all partners. If a trade name, state the names of the individuals who do businesses under the trade name. 10. The correct name of the Bidder is <u>Aerex Industries, Inc.</u>

11. The partnership is a Sole Proprietorship, Partnership, or X Corporation or Other Type of Entity ______ (Fill In).

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12. The address of principal place of business is 3504 Industrial 27th St., Fort Pierce, FL 34946
13. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows:
Thomas A. Donnick, Jr. Frederick W. McTaggart, David W. Sasnett and Jason P. Carlson
14. List all organizations which were predecessors to Bidder or in which the principals or officers of the Bidder were principals or officers.
None
15. List and describe all bankruptcy petitions (Voluntary or Involuntary) which have been filed by or against the Bidder, its parent or subsidiaries of predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.
Not Applicable
16. List and describe all successful Performance or Payment Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Bidder and its predecessor organization(s).
None
17. List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Bidder or its predecessor organization(s) during the last five (5) years. The list shall include all case names; case, arbitration, or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.
None
18. List and describe all criminal proceedings or hearings concerning business related offenses in which the Bidder, its principals or officers or predecessor organization (s) were defendants.
None
19. Has the Bidder, its principals, officers, or predecessor organization(s) been debarred or suspended from bidding by any government during the last five (5) years? If yes, provide details.
No
20. List and disclose any and all business relations with any members of Wellington Council.
None



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/8/2019

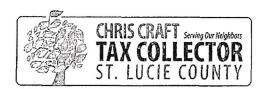
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN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

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).					
PRODUCER	CONTACT NAME: Marie Daniels	***************************************			
Vero Insurance Inc. A Marsh & McLennan Agency LLC Company	PHONE (A/C, No, Ext): 722-321-2022 (A/C, No):				
3339 Cardinal Dr	E-MAIL ADDRESS: Marie@veroinsurance.com				
Vero Beach FL 32963	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A : Admiral Insurance Company	24856			
NSURED AEREXINDUS Aerex Industries, Inc	INSURER B: Travelers Casualty Ins Co of America 19046				
3504 Industrial 27th Street	INSURER C:				
Fort Pierce FL 34946	INSURER D:				
	INSURER E :				
	INSURER F:				
COVERAGES CERTIFICATE NUMBER: 1430348463	REVISION NUMBER:				
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HA	VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POL	ICY PERIOD			
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD	ED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL T	WHICH THIS			
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE	BEEN REDUCED BY PAID CLAIMS.	The Fertimo,			
INSR LTR TYPE OF INSURANCE ADDL SUBR INSD WVD POLICY NUMBER	POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS				

X COMMERCIAL GENERAL LIABILITY CA00003088302 5/28/2019 5/28/2020 EACH OCCURRENCE DAMAGE TO RENTED \$1,000,000 X CLAIMS-MADE OCCUR \$300,000 PREMISES (Ea occurrence) X 5,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$2,000,000 POLICY X PRO-PRODUCTS - COMP/OP AGG \$2,000,000 OTHER **AUTOMOBILE LIABILITY** COMBINED SINGLE LIMIT BA0N5567351942 5/28/2019 5/28/2020 \$1,000,000 (Ea accident) X ANY AUTO BODILY INJURY (Per person) \$ OWNED SCHEDULED BODILY INJURY (Per accident) \$ AUTOS ONLY HIRED AUTOS ONLY AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) \$ AUTOS ONLY **UMBRELLA LIAB** X OCCUR GX00000137702 5/28/2019 5/28/2020 EACH OCCURRENCE \$5,000,000 Χ **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$5,000,000 DED X RETENTION \$ 0 \$ WORKERS COMPENSATION OTH-ER PER STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	RTIFICATE HOLDER CANCELLATION	
Village of Wellington Clerk's Office	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
12300 Forest Hill Blvd. Wellington FL 33414	AUTHORIZED REPRESENTATIVE Authorized Representative	



2019 - 2020

St. Lucie County Local Business Tax Receipt

Facilities or machines #

Rooms #

Seats #

Employees #20

Receipt #3300-00910009

Type of business 3300 RECYCLING/MISC/MFG (STEEL

Expires SEPTEMBER 30, 2020

FABRICATING)

DBA name

Business Aerex Industries, Inc.

Mailing address: Aerex Industries, Inc.

3504 Industral 27th St Fort Pierce, FL 34946 Business location: 3504 Industral 27th St

Fort Pierce, FL 34946

RENEWAL

Original tax:

St Lucie County

Total:

\$27.55

Penalty:

Collection cost:

\$27.55

Paid 09/05/2019 27.55

0000-20190905-111833

Law requires this Local Business Tax Receipt to be displayed conspicuously at the place of business in such a manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the county. Upon failure to do so, the local business taxpayer shall be subject to the payment of another Local Business Tax for the same business, profession or occupation.

Pursuant to Florida law, all Local Business Tax Receipts shall be sold by the Tax Collector beginning July 1 of each year and shall expire on September 30 of the succeeding year. Those Local Business Tax Receipts renewed beginning October 1 shall be delinquent and subject to a delinquency penalty of 10 percent for the month of October. An additional 5 percent penalty for each month of delinquency is added until paid, provided that the total delinquency penalty shall not exceed 25 percent of the Local Business Tax for the delinquent establishment.

In addition to the penalty, the Tax Collector is entitled to a collection fee of \$1 to \$5. This fee is based on the amount of Local Business Tax, which will be collected from delinquent taxpayers after September 30 of the business year.

This receipt is a Local Business Tax only. It does not permit the local business taxpayer to violate any existing regulatory or zoning laws of the state, county or city. It also does not exempt the local business taxpayer from any other taxes, licenses or permits that may be required by law.

Pursuant to Florida law, Local Business Taxes are subject to change.

Aerex Industries, Inc. 3504 Industral 27th St Fort Pierce, FL 34946





DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

CONSTRUCTION INDUSTRY LICENSING BOARD

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

CARLSON, JASON PAUL

AEREX INDUSTRIES INC 3504 INDUSTRIAL 27TH STREET FORT PIERCE FL 34946

LICENSE NUMBER: CGC1507464

EXPIRATION DATE: AUGUST 31, 2020

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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/8/2019

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).

tr	is certificate does not confer rights	to the	cert	tificate holder in lieu of si).			
	DUCER				CONTACT NAME:					
Commercial Lines				PHONE (A/C, No, Ext): 888-572-2412 FAX (A/C, No):						
OST INSURANCE SERVICES LLC					E-MAIL ADDRE	corto@	trinet.com			
	1 South Bayshore Drive, Suite 1600					INS	SURER(S) AFFOR	RDING COVERAGE		NAIC#
	conut Grove, FL 33133				INSURE	RA: Indem	nity Insurance	e Company of North Americ	ca	43575
INSU	RED let HR II-A, Inc.				INSURER B:					
					INSURE	RC:				
	Aerex Industries, Inc. Box 241448				INSURE	RD:				
					INSURE	RE:				
	irlotte, NC 28224				INSURER F:					
				NUMBER: 14657999	/F DEE	N IOOUED TO		REVISION NUMBER: Se		
IN CI EX	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY REFITIED OR MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	PERT. POLIC	REME AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDS LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPECT D HEREIN IS SUBJECT TO	T TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	(
	COMMERCIAL GENERAL LIABILITY								S	
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
								MED EXP (Any one person)	S	
								PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY JECT LOC								\$	
	OTHER: AUTOMOBILE LIABILITY							COMPUED ON OUT A MUT	\$	
	ANY AUTO							(Ea accident)	\$	
	OWNED SCHEDULED								\$ S	
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	s \$	
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$ \$	
	UMBRELLA LIAB OCCUR									
	EXCESS LIAB CLAIMS-MADE								\$	
	DED RETENTION\$								\$ \$	
Δ	WORKERS COMPENSATION			WLRC66051031		3/1/2019	3/1/2020	X PER OTH- STATUTE ER)	
^	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE			WEIXC00031031		0/ 1/2010	3/1/2020		s	2,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE		2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below								s S	2,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)										
Workers' Compensation is limited to worksite employees of Aerex Industries, Inc. through a co-employment contract with TriNet HR II-A, Inc.										
CEF	CERTIFICATE HOLDER CANCELLATION									
Vill	age of Wellington				SHO	LII D ANY OF T	HE AROVE D	ESCRIBED POLICIES BE CAI	NCELL	ED BEFORE
Village of Wellington Attn: Clerk's Office				THE	EXPIRATION	DATE THE	REOF, NOTICE WILL BE			
12300 Forest Hill Blvd.				ACCORDANCE WITH THE POLICY PROVISIONS.						
Wellington, FL 33414				AUTHORIZED REPRESENTATIVE						
				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -						
				5: M Come						

WELLINGTON LOCAL PREFERENCE

APPLICATION TO BE CONSIDERED A LOCAL BUSINESS IN ACCORDANCE WITH VILLAGE OF WELLINGTON FLORIDA'S LOCAL PREFERENCE POLICY

Wellington gives preference to local businesses in certain purchasing situations as set forth in Chapter 9 of Wellington's Purchasing and Procurement Manual. In order to be considered a local business, entitled to be given preference, the business must make application with Wellington and meet one of the following criteria as such is more fully set forth in Chapter 9, of Wellington's Purchasing and Procurement Manual:

Chapter 9, LOCAL PREFERENCE

Western Communities Local Business - For the purpose of determining a "Western Communities local business" a vendor must have a principal permanent business location and headquarters within Wellington of Wellington, Florida or west of the Florida Turnpike to the Palm Beach County western boundary line. This applies to all entity formations, including, but not limited to, limited liability companies, partnerships, limited partnerships and the like or sole proprietors. Further, the entity or sole proprietor must provide that it, he or she has been domiciled and headquartered in the jurisdictional boundaries of the Western Communities for at least six months prior to the solicitation. Post Office boxes will not be considered a permanent business location within the Western Communities. Home business offices shall be considered as a business location if it otherwise meets the requirements herein. In order to be eligible for such local preference the vendor shall have a local business tax receipt pursuant to the County's and/or municipalities' Code of Ordinances, having jurisdiction over the location of the business, unless otherwise exempt therefrom. Further, the vendor must be properly licensed and authorized by law to provide the goods, services or professional services to the extent applicable and the location of the business must be properly zoned in order for the vendor to conduct its business.

Palm Beach County local business - For the purpose of determining a "Palm Beach County local business" a vendor must have a principal permanent business location and headquarters within Palm Beach County, Florida. This applies to all entity formations, including, but not limited to, limited liability companies, partnerships, limited partnerships and the like or sole proprietors. Further, the entity or sole proprietor must provide that it, he or she has been headquartered and domiciled in the jurisdictional boundaries of Palm Beach County, Florida for at least six months prior to the solicitation. Post Office boxes will not be considered a permanent business location within Palm Beach County, Florida. Home business offices shall be considered as a business location if it otherwise meets the requirements herein. In order to be eligible for such local preference the vendor shall have a local business tax receipt pursuant to the Palm Beach County Code of Ordinances as amended from time to time, unless otherwise exempt there from. Further, the vendor must be properly licensed and authorized by law to provide the goods, services or professional services to the extent applicable and the location of the business must be properly zoned in order for the vendor to conduct its business.

Subcontractor utilization - In competitive bid situations, a business may also qualify as either a Palm Beach County or Western Community local business if they are utilizing subcontractors to perform the work or materialmen to supply the job and more than fifty (50%) percent of their proposed bid price will be paid to subcontractors and/or materialmen who qualify, under the above standards, as Palm Beach County and/or Western Community local businesses.

Please check the box below indicating which preference category your business is applying for:

Western Communities Local Business			
Palm Beach County Local Business			
Subcontractor Utilization			
1. The name of the business is: N/A			
2. The address of the business is: <u>N/A</u>			
B. How long has the business been located at its current address: N/A			
4. If the business has relocated within the last six months, please provide the answers to questions 1-3 for the previous location:			
5. The previous name of the business is: <u>N/A</u>			
The previous address of the business is: <u>N/A</u>			
7. How long was this business at the previous location: N/A			

8. If the business is attempting to qualify under the subcontractor utilization provision, please provide a breakdown of the subcontractors who would qualify for either the Palm Beach County or Western Community, business classification, the requisite information, provide their responses to the above 1 - 7 questions and for each of the subcontractors, indicate the amount that they are proposed to be compensated at under the bid price. N/A				
9. The business as a local business tax receipt from: (1) Palm Beach County (2) the following municipality: N/A (3) located in unincorporated Palm Beach County:				
10. Please provide a copy of Local Business Tax Receipts from Palm Beach County and the applicable municipality are attached.				
11. Please provide a Certificate of Good Standing indicating the formation or domestication of the entity in and for the State of Florida is attached. N/A				
12. Please provide copies of licenses if applicable from the State of Florida authorizing the business to provide the good services or professional services contemplated in the bid documents. N/A				
By signing below, I hereby certify that under penalty of perjury I believe my business qualifies as a Palm Beach County, Western Community or subcontractor utilization business in accordance with Wellington's Local Preference Policy and that I have submitted current and accurate information and documents relating to my qualifications. I further acknowledge and agree that any fraudulent or duplicitous information submitted in furtherance of this application will be grounds for disqualification from bidding on this project and doing business with Wellington in the future.				
Applicants Federal Tax ID Number - N/A Applicants Business Address				

Signature of Authorized Representative of Corporation, Partnership, or other business entity:
Man II
Print Name: Thomas A. Donnick, Jr.
Title: Florida
Date: November 13, 2019
CITY OF: Florida
COUNTY OF: _St. Lucie
SUBSCRIBED AND SWORN TO (or affirmed) before me on this 13 day of November , 2019, by Thomas A. Donnick, Jr He/She is personally known to me or has presented
N/A as identification. Sunmartuld (Signature of Notary)
DONNA L. SUMMERFIELD Notary Public - State of Florida Commission # GG 079581 My Comm. Expires May 18, 2021 Bonded through National Notary Assn.
Notary Public Florida Notary Seal (State)
Signature of Individual if Sole Proprietor:
N/A
Print Name:
Date:
CITY OF:
COUNTY OF:
SUBSCRIBED AND SWORN TO (or affirmed) before me on this day of, 201, by He/She is personally known to me or has presented
as identification.
(Signature of Notary)
(Print or Stamp Name of Notary)
Notary Public Notary Seal (State)

CONFLICT OF INTEREST STATEMENT

This Proposal/Agreement (whichever is applicable) is subject to the conflict of interest provisions of the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and the Florida Statutes. During the term of this Agreement and any renewals or extensions thereof, the VENDOR shall disclose to WELLINGTON any possible conflicts of interests. The VENDOR's duty to disclose is of a continuing nature and any conflict of interest shall be immediately brought to the attention of WELLINGTON. The terms below shall be defined in accordance with the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and Ch. 112, Part III, Florida Statutes.

CHECK ALL THAT APPLY.

- [X] To the best of our knowledge, the undersigned business has no potential conflict of interest for this Agreement due to any other clients, contracts, or property interests.
- [X] To the best of our knowledge, the undersigned business has no employment or other contractual relationship with any WELLINGTON employee, elected official or appointed official.
- [X] To the best of our knowledge, the undersigned business has no officer, director, partner or proprietor that is a WELLINGTON purchasing agent, other employee, elected official or appointed official. The term "purchasing agent", "elected official" or "appointed official", as used in this paragraph, shall include the respective individual's spouse or child, as defined in Ch. 112, Part III, Florida Statutes.
- [X] To the best of our knowledge, no WELLINGTON employee, elected official or appointed official has a material or ownership interest (5% ownership) in our business. The term "employee", "elected official" and "appointed official", as used in this paragraph, shall include such respective individual's relatives and household members as described and defined in the Palm Beach County Code of Ethics.
- [X] To the best of our knowledge, the undersigned business has no current clients that are presently subject to the jurisdiction of WELLINGTON's Planning, Zoning and Building Department.

CONFLICT:

[] The undersigned business, by attachment to this form, submits information which may be a potential conflict of interest due to any of the above listed reasons or otherwise.

THE UNDERSIGNED UNDERSTANDS AND AGREES THAT THE FAILURE TO CHECK THE APPROPRIATE BLOCKS ABOVE OR TO ATTACH THE DOCUMENTATION OF ANY POSSIBLE CONFLICTS OF INTEREST MAY RESULT IN DISQUALIFICATION OF YOUR BID/PROPOSAL OR IN THE IMMEDIATE CANCELLATION OF YOUR AGREEMENT, WHICHEVER IS APPLICABLE.

TION OF TOCKHOREENBINE, WINCHESTER OF
Aerex Industries, Inc.
COMPANY NAME
Man I
AUTHORIZED SIGNATURE
Thomas A. Donnick, Jr.
NAME (PRINT OR TYPE)
President
TITLE

NON-COLLUSION AFFIDAVIT

State of Florida	
County of St. Lucie	
Being duly sworn deposes and says:	
That he/she is an officer of the parties making the forgoing bid submittal, that or connection with any individual, firm, partnership, corporation or other en supplies or equipment, either directly or indirectly, and is in all respects fair an gratuities are permitted with, prior to, or after any delivery of material or provesult in disqualification, contract cancellation, return of materials or disconting from the vendor Bid lists.	atity submitting a bid for the same materials, services, and without collusion or fraud. No premiums, rebates, or vision of services. Any violation of this provision may
	Aerex Industries, Inc.
	Name of Bidder
	Thomas A. Donnick, Jr. Print name of designated signatory Signature
	_President Title
	. <u>Donnick</u> , <u>Jr.</u> personally known to me to be the person ged that (she/he) signed the name freely and voluntarily ar last written above.
DONNA L. SUMMERFIE Notary Public – State of Fi Commission # GG 799 My Comm. Expires May 18 Bonded through National Notar	lorida 581 3, 2021
(Affix Seal Here)	
	Donna L. Summerfield
	(Name Printed)
	(Name rimed)
	Residing at <u>Indian River County</u>
	My commission expires _05/18/2021

REFERENCES AND PRIOR EXPERIENCE (PRIME CONTRACTOR)

Bidder Company Name:_	Aerex Industries, Inc.		
documents (in scope and project change orders v	d complexity). Include info with associated justification	rience evidencing successful completion of similar project as described in formation on construction methodology, project budget versus completen, project schedule versus actual completion time, and project litigate and telephone numbers of agency references for each project provided.	ed cost,
PROJECT NAME: Orn	nond Beach WTP Membrar	ne Replacement	
Owner/Reference Name:	City of Ormond Beach		
Owner/Reference Contac		Utilities Engineer	
207 777 2220	Name	Title George.Lavatelli@ormondbeach.org	
386-676-3220 Phone		Email Email	
Project Location: Ormo	nd Beach, Florida		
Project Description: Me	embrane replacement on fou	ır 1-MGD trains	
Was the Bidder Prime Co	ntractor or Subcontractor?	Aerex bid as Prime Contractor	
		ifications and element replacement.	
Project Cost:	Initial Contract Value	\$\$507,000.00	
	Change Orders	\$\$0	
	Final Contract Price	\$\$507,000.00	
Explain Reason(s) for Cha	ange Orders: No change	orders	
Project Timeline:	Start Date	April 15, 2019	
	Contract Time Extension	30 Days	
	Completion Date	September 13, 2019	

Explain Reason(s) for Time Extension: Membrane element delivery delay.					
NOTE: Include additional pages with the same format to list other projects as proof of prior experience. List a minimum of three (3 similar projects.					
FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE					

Bidder Company Name:	Aerex Industries, Inc.		
documents (in scope as project change orders	nd complexity). Include int with associated justification	formation on construction met on, project schedule versus a	ompletion of similar project as described in the bid chodology, project budget versus completed cost, actual completion time, and project litigation if ncy references for each project provided.
PROJECT NAME: Ve	ero Beach WTP Expansion		
Owner/Reference Name	City of Vero Beach		
Owner/Reference Conta	ct:Jeffrey Howard		Plant Manager
	Name		Title
772-978-523		jhoward@covb.org	
Phone		Email	
Project Location: Verd	Beach, FL		
Project Description: Pro	ovide and install two 2-MGI	O membrane trains.	
••••			
Was the Bidder Prime C	ontractor or Subcontractor?_	Aerex was a subcontractor to	Florida Design Contractors.
List project scope similar	rities: Disinfection, membr	ane loading and commissioning	5.
1			
T			
		6974.262.00	
Project Cost:	Initial Contract Value	\$_\$874,262.00	_
	Change Orders	\$ \$76,750.50	_
	Final Contract Price	\$ \$951,012.50	
Evaluin Reason(s) for Cl	hange Orders: Customer re	equested additions to scope	_
Explain Reason(s) for Ci	nange Orders. Customer re	equested additions to scope.	
Project Timeline:	Start Date	February 26, 2016	
rroject rimenne.			
	Contract Time Extension	N/A	
	Completion Date	January 10, 2018	

Explain	Reason(s) for Time Extension:	N/A

NOTE:	Include additional pages with the	e same format to list other projects as proof of prior experience. List a minimum of three (3

similar projects.

FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE

Bidder Company Nan	ne: Aerex Industries, Inc.		
documents (in scope project change order	and complexity). Include infirs with associated justification	formation on construction met on, project schedule versus a	ompletion of similar project as described in the bid thodology, project budget versus completed cost, actual completion time, and project litigation if ency references for each project provided.
PROJECT NAME:_L	Lake Worth Water Treatment P	lant	
Owner/Reference Nar	me: City of Lake Worth		
Owner/Reference Cor	ntact: Tim Sloan	Pla	nt Manager
	Name		Title
561-58	6-1708	tsloan@lake	eworth.org
Pho	one	Email	
Project Location: La	ke Worth, FL		
Project Description:	Provide and install three 2-MC	D membrane trains, cartridge	filter vessels and CIP system.

Was the Bidder Prime	Contractor or Subcontractor?_	Aerex was a subcontractor to	Renolds Contractors.
List project scope sim	ilarities: Disinfection, membra	ane loading and commissioning	g.
1 3			
Project Cost:	Initial Contract Value	\$ \$1,673,600.00	
Project Cost.			_
	Change Orders	\$_\$0	_
	Final Contract Price	\$_\$1,673,600.00	
Explain Reason(s) for	Change Orders: N/A		
	-		
•••••			
Project Timeline:	Start Date	December 15, 2009	-
	Contract Time Extension	N/A	_
	Completion Date	October 15, 2011	

Explain Reason(s) for Time Extension:	N/A
NOTE: Include additional pages with the similar projects.	e same format to list other projects as proof of prior experience. List a minimum of three (3

FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE

CERTIFICATION PURSUANT TO FLORIDA STATUTE § 215.4725

[, <u>Tho</u>	mas A. Donnick, Jr, on behalf of _ Print Name		, certifies
hat <u>A</u>	erex Industries, Inc. Company Name	Company Name does not:	
1.	Participate in a boycott of Israel; and		
2.	Is not on the Scrutinized Companies that Boycott Israel list; and		
3.	Is not on the Scrutinized Companies with Activities	in Sudan List; and	
4.	Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and		
5.	Has not engaged in business operations in Cuba or Syria.		
Signature			
	President Title		
	November 13, 2019		
	Date		