

## BID PROPOSAL CHECKLIST

**Note: Please submit your bid in this order**

YES ☒ NO ☐ 1. Bid submittal – one (1) original and one (1) PDF (CD) copy

YES ☒ NO ☐ 2. Bid Acknowledgment Cover Sheet

YES ☒ NO ☐ 3. Acknowledgment of addendums (if any)

YES ☒ NO ☐ 4. Bid Submittal

YES ☒ NO ☐ 5. Schedule of Value

YES ☒ NO ☐ 6. Questionnaire

YES ☒ NO ☐ 7. Drug Free Workplace

YES ☒ NO ☐ 8. Sworn Statement under Section 287.133(3) (a)

YES ☒ NO ☐ 9. Wellington Local Preference Form

YES ☒ NO ☐ 10. Conflict of Interest

YES ☒ NO ☐ 11. Insurance Certificates

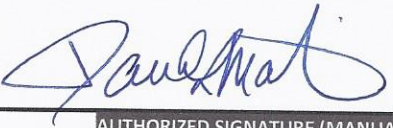
YES ☒ NO ☐ 12. Copy of Appropriate Licenses

# BID ACKNOWLEDGEMENT COVER PAGE

<b>SUBMIT BIDS TO:</b> Wellington Attn: Clerk's Office 12300 Forest Hill Blvd Wellington, FL 33414		<b>REFER ALL INQUIRIES TO PRIMARY CONTACT:</b> Purchasing Division 12300 Forest Hill Blvd Wellington, FL 33414 Phone: (561) 753-2549 / Fax: (561) 904-5817		<b>Wellington</b> <h1>INVITATION TO BID</h1> <b>COMMODITY/SERVICE</b>	
<b>BID TITLE:</b> RESURFACING OF SKATE PARK RAMPS				<b>BID NO:</b> ITB 035-13/JWV	

<b>NAME OF FIRM, ENTITY, or ORGANIZATION:</b> REGAL CONTRACTORS INC						
<b>NAME OF CONTACT PERSON:</b> PAUL MARTIN		<b>VENDOR MAILING ADDRESS:</b> P.O. BOX 20075		<b>CITY:</b> WEST PALM BEACH	<b>ZIP:</b> 33416	<b>STATE:</b> FL
<b>TITLE:</b> PRESIDENT		<b>VENDOR HEADQUARTERS ADDRESS (IF DIFFERENT):</b> 1220 S.W. SQUIRE JOHNS LANE		<b>CITY:</b> PALM CITY	<b>ZIP:</b> 34990	<b>STATE:</b> FL
<b>PHONE NUMBER:</b> 561-906-7321			<b>FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN):</b> 65-0294151			
<b>EMAIL ADDRESS:</b> martin5@comcast.net			<b>STATE OF FLORIDA BUSINESS LICENSE NUMBER (IF APPLICABLE):</b> CGCA15079			
<b>FAX NUMBER:</b> 772-597-0415						
<b>ORGANIZATIONAL STRUCTURE (Please Check One):</b> Corporation <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other <input type="checkbox"/>						
If Corporation, please provide the following:						
(A) Date of Incorporation: 11 / 4 / 1991 <small>Month / Day / Year</small>			(B) State or Country of Incorporation: FLORIDA			

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all terms and conditions of this bid and certify that I am authorized to sign this bid for the bidder and that the bidder is in compliance with all requirements of the Invitation to Bid, including but not limited to, certification requirements.

	, PAUL L. MARTIN	, PRESIDENT
<b>AUTHORIZED SIGNATURE (MANUAL)</b>	<b>AUTHORIZED SIGNATURE (PRINT OR TYPED)</b>	<b>TITLE (PRINT OR TYPED)</b>

**BID SUBMITTAL**

To:

Village of Wellington

12300 Forest Hill Blvd.

Wellington, Florida 33414

REGAL CONTRACTORS INC

(Vendor)

agrees to provide material for the \_Resurfacing of Skate Park Ramps\_ in accordance with the requirements and specifications of the Bid Documents for the Village of Wellington as specified according to the prices presented in the SCHEDULE OF VALUES.

Gentlemen:

The undersigned Bidder has carefully examined the Specification requirements, Bid/Contract Documents and is familiar with the nature and extent of the Work and any local conditions that may in any manner affect the Work to be done.

The undersigned agrees to provide the service called for by the Specifications and Bid Documents, in the manner prescribed therein and to the standards of quality and performance established by the Wellington for the Bid price stated in the spaces herein provided.

The undersigned agrees to the right of the Wellington to hold all Bids and Bid guarantees for a period not to exceed ninety (90) days after the date of Bid opening stated in the Invitation to Bid.

The undersigned accepts the invoicing and payment policies specified in the Bid.



Contractor's Signature

Dated this 1 day of OCTOBER, 2013  
(Month) (Year)

## SCHEDULE OF VALUES

The Bidder proposes to complete all work set forth in these documents for the unit price amounts set forth below. Bids will be evaluated based upon the Total Contract Price.

The Bidders declare they have carefully examined the specifications and are thoroughly familiar with the provisions and with the quality, type and grade of service requested herein. The proposers declare to deliver the product/service in accordance with the bid specifications.

DESCRIPTION	TOTAL CONTRACT PRICE
Supply and Install New Skatelite Pro Surface Materials	FORTY FOUR THOUSAND EIGHT HUNDRED TWENTY ONE \$ 44821.00

Successful bidder(s) will supply all labor, materials, machinery, equipment and technical supervision necessary to provide, deliver and install materials to Wellington. All pricing shall include labor, materials, equipment, fuel, shipping, delivery, installation and all other necessary items.

NO ADDENDUMS

## QUESTIONNAIRE

The following Questionnaire shall be completed and submitted in with the Bid. By submission of this Bid, Bidder guarantees the truth and accuracy of all statements and answers herein contained.

1. How many years has your organization been in business? 22 YEARS
2. What is the last project of this nature that you have completed?  
WEST BOYNTON PARK — RESURFACE RAMPS
3. Have you ever failed to complete work awarded to you? If so, where and why? NEVER

4. Name three individuals or corporations for which you have performed work and to which you refer:

<u>SCHOOL DISTRICT OF PALM BEACH CO.</u>	<u>248-0717</u>	<u>FRED CAHILL</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>
<u>CITY OF WEST PALM BEACH</u>	<u>804-4900</u>	<u>LEAH ROCKWELL</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>
<u>REP SERVICES INC</u>	<u>800-992-5357</u>	<u>J.T. ALMON III</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>

5. List the following information concerning all contracts in progress as of the date of submission of this bid. (In case of co-venture, list the information for all co-venturers.)

Name of Project	Owner	Total Contract Value	Contracted Date of Completion	% of Completion to Date
MCCLURE VILLAGE NSP3	LUTZ BUILDERS	18000	OCT. 2013	20
RAMBLEWOOD PARK	GREENACRES	3600	OCT. 2013	0
PIONEER PARK ELEM. PLAYGROUND	SCH. DIST. OF P.B	31000	OCT. 2013	20

6. Has the bidder or his or her representative inspected the proposed project and does the Bidder have a complete plan for its performance? YES
7. 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
<u>NONE</u>	

8. What equipment do you own that is available for the work? \_\_\_\_\_

Equipment Type	Equipment Type
<u>POWER TOOLS, GENERATOR, HAND TOOLS, BOBCAT</u>	

9. What equipment will you purchase for the proposed work? NONE

10. What equipment will you rent for the proposed work? NONE
11. State the name of your proposed project manager and give details of his or her qualifications and experience in managing similar jobs.  
PAUL MARTIN; CPSI, GENERAL CONTRACTORS, 34 YEARS EXP.
12. The address of principal place of business is 1220 S.W. SQUIRE JOHNS LANE  
PALM CITY, FL 34990
13. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows: PAUL L. MARTIN
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 or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition. NONE
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

## DRUG FREE WORKPLACE

Preference shall 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 shall 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

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

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 REGAL CONTRACTORS INC for PAUL L. MARTIN, PRESIDENT  
[print name of entity submitting sworn statement] [print individual's name and title]

whose business address is MARTIN COUNTY, FLORIDA and (if applicable) its Federal Employer Identification  
Number (FEIN) is 650294151 (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 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), Florida Statutes, 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. A predecessor or successor of a person convicted of a public entity crime; or  
b. 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.

4. 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.]

☒ 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.

STATE OF FLORIDA

COUNTY OF MARTIN

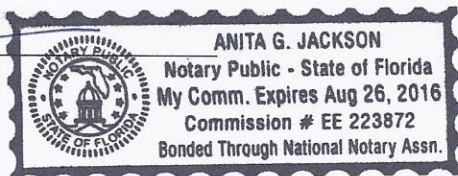
Paul L. Martin  
[signature]  
SEPTEMBER 20, 2013  
[date]

Subscribed and Sworn to (or affirmed) before me on SEPT. 20, 2013 by PAUL L. MARTIN  
[date] [name]

He/she is personally known to me or has presented FLORIDA DRIVERS LICENSE as identification.  
[type of identification]

[Notary's Signature and Seal]

20 |



Anita G. Jackson # KE223872  
Print Notary Name and Commission No.

**APPLICATION TO BE CONSIDERED A LOCAL BUSINESS IN ACCORDANCE WITH WELLINGTON OF WELLINGTON FLORIDA'S LOCAL PREFERENCE POLICY (SECTION 2.12.F OF WELLINGTON'S PURCHASING AND PROCEDURE MANUAL)**

Wellington gives preference to local businesses in certain purchasing situations as set forth in Chapter 9, Section 7 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, Section 7 of Wellington's Purchasing and Procurement Manual:

**Chapter 9, Section 7 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 as depicted in Exhibit "A" hereto. 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: N/A

☐ Western Communities Local Business

☐ Palm Beach County Local Business

☐ Subcontractor Utilization

1. The name of the business is: REGAL CONTRACTORS INC.
2. The address of the business is: 1220 S.W. SQUIRE JOHNS LANE PALM CITY, FL 34990
3. How long has the business been located at its current address: 2 YEARS
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: \_\_\_\_\_
6. The previous address of the business is: \_\_\_\_\_

7. How long was this business at the previous location: \_\_\_\_\_

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.

9. The business as a local business tax receipt from: (1) Palm Beach County ☐ (2) the following municipality: \_\_\_\_\_ (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.

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.

13. Please provide a letter from the either the Palm Beach County if located in unincorporated Palm Beach County or the municipality if located within the municipality evidencing that the headquarters for the business is properly zoned for the business.

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 - 65-0294151 Applicants Business Address 1220 S.W. SQUIRE JOHNS LANE  
PAUM CITY, FL. 34990

## 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.

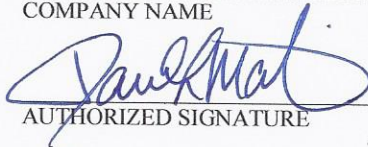
- ☒ To the best of our knowledge, the undersigned business has no potential conflict of interest for this Agreement due to any other clients, contracts, or property interests.
- ☒ To the best of our knowledge, the undersigned business has no employment or other contractual relationship with any WELLINGTON employee, elected official or appointed official.
- ☒ 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.
- ☒ 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.
- ☒ 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.

☐ 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. **NONE**

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.

**REGAL CONTRACTORS INC**

COMPANY NAME



AUTHORIZED SIGNATURE

**PAUL L. MARTIN**

NAME (PRINT OR TYPE)

**PRESIDENT**

TITLE

School District of Palm Beach County

Mr. Fred Cahill

561-248-0717

See the attached list of over 50 different schools that represent more than 150 playgrounds. Verde Elementary, H.L. Johnson Elementary, Old Atlantic High School, Hammock Point Elementary, and Timber Trace Elementary

These schools represent some of the surfacing repairs, relocation of playgrounds, relocation of shades, shade fabric replacement, and changes in the safety surfacing materials.

On the term contract since 2004 for playground installs, safety surfacing, shade structure installs, site preparation, concrete, relocating playground, repairs, warranty replacement parts install, playground grass, PIP Rubber, curbs

Village of Wellington

Mr. Lonnie Brevik

561-389-5606

Village Park, Berkshire Park, Block Island Park, Brampton Cove Park

Remove existing playground and safety surfacing, install new, remove damaged parts, decks, panels, slides, and install new, PIP Rubber safety surface

Palm Beach County Parks

Mr. Dal Major

561-385-0627

Afron Park, Center Drive Playground at John Prince, Pinewoods Park, West Boynton Skate Park, Lake Ida Playgrounds, Lake Ida Dog Park, Okeeheelee Dog Park, South County Regional Park Playground, Loggerhead Park, Glades Pioneer Park, Westgate Park

Site furnishings, playground install, Playground Grass, PIP Rubber surface, Basketball Court Goals, ADA Engineered Wood Mulch, Plastic Curbs, Site Preparation, removal of old equipment, Fitness equipment install

City of West Palm Beach

Ms. Leah Rockwell

561-804-4900

Sullivan Park, South Olive Park, Phipps Park, Nathaniel Adams Park, Gaines Park

Shade Structures over bleachers, Baseball fields, replacement swing sets, Fitness Equipment, playground repairs, ADA Engineered Wood Fiber Mulch, Water Feature Playground equipment,

City of Boca Raton

Mr. Dallas Mitchell

561-239-0232

561-416-3365

Boca Tierra Park, Hughes Park,

School District of Martin County

Mr. Mike Cosentino

772-223-3105

Apollo SunGuard Shade Solutions

Mr. Jeff Durgan

561-374-1854

All of the above references are recent clients of Regal Contractors Inc. They represent a small portion of satisfied customers that we have performed playground equipment, shade, and surfacing installations for in the past 21 years. They can attest to the hundreds of successful playground and shade installs and repairs that Regal Contractors Inc. has completed for them.

Regal Contractors Inc. can also offer the service of "relocating" playgrounds and shades if the need arises.

**STATE OF FLORIDA****DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION****CONSTRUCTION INDUSTRY LICENSING BOARD  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783****(850) 487-1395****MARTIN, PAUL LOUIS  
REGAL CONTRACTORS INC  
1220 SW SQUIRE JOHNS LANE  
PALM CITY FL 34990**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbecue restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto [www.myfloridalicense.com](http://www.myfloridalicense.com). There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

**STATE OF FLORIDA AC# 6194621  
DEPARTMENT OF BUSINESS AND  
PROFESSIONAL REGULATION****CGCA15079 07/10/12 120012506****CERTIFIED GENERAL CONTRACTOR  
MARTIN, PAUL LOUIS  
REGAL CONTRACTORS INC****IS CERTIFIED under the provisions of Ch.489 FS  
Expiration date: AUG 31, 2014 L12071001126****DETACH HERE****THIS DOCUMENT HAS A COLORED BACKGROUND • MICROPRINTING • LINEMARK™ PATENTED PAPER****AC# 6194621****STATE OF FLORIDA****DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD****SEQ# L12071001126**

DATE	BATCH NUMBER	LICENSE NBR
07/10/2012	120012506	CGCA15079

The GENERAL CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

**MARTIN, PAUL LOUIS  
REGAL CONTRACTORS INC  
1220 SW SQUIRE JOHNS LANE  
PALM CITY FL 34990****RICK SCOTT  
GOVERNOR****KEN LAWSON  
SECRETARY****DISPLAY AS REQUIRED BY LAW**

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Profit Corporation**

REGAL CONTRACTORS, INC.

**Filing Information**

<b>Document Number</b>	S91630
<b>FEI/EIN Number</b>	650294151
<b>Date Filed</b>	11/04/1991
<b>State</b>	FL
<b>Status</b>	ACTIVE

**Principal Address**1220 S.W. SQUIRE JOHNS LANE  
PALM CITY, FL 34990

Changed: 02/02/2010

**Mailing Address**P O BOX 20075  
WEST PALM BEACH, FL 33416

Changed: 01/19/2012

**Registered Agent Name & Address**MARTIN, PAUL L  
1220 S.W. SQUIRE JOHNS LANE  
PALM CITY, FL 34990

Name Changed: 02/02/2010

Address Changed: 02/02/2010

**Officer/Director Detail****Name & Address**

Title DPVS

MARTIN, PAUL L  
P. O. BOX 20075  
WEST PALM BEACH, FL 33416**Annual Reports**

<b>Report Year</b>	<b>Filed Date</b>
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# CERTIFICATE OF LIABILITY INSURANCE

REGACON-02

DCHARRON

DATE (MM/DD/YYYY)

3/6/2013

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

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Collinsworth, Alter, Lambert, LLC 23 Eganfuskee Street Suite 102 Jupiter, FL 33477	<b>CONTACT NAME:</b> Dianthe Charron	<b>FAX (A/C, No):</b> (561) 427-6730	
	<b>PHONE (A/C, No, Ext):</b> (561) 776-9001	<b>E-MAIL ADDRESS:</b> dcharron@callc.com	
<b>INSURED</b>  Regal Contractors, Inc. 1220 Southwest Squire Johns Lane Palm City, FL 34990	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A : FCCI Commercial Insurance Co</b>		<b>33472</b>
	<b>INSURER B : FCCI Insurance Company</b>		<b>10178</b>
	<b>INSURER C :</b>		
	<b>INSURER D :</b>		
	<b>INSURER E :</b>		
<b>INSURER F :</b>			

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	<b>GENERAL LIABILITY</b>		GL00083635	3/6/2013	3/6/2014	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person)	\$ 5,000	
						PERSONAL & ADV INJURY	\$ 1,000,000	
						GENERAL AGGREGATE	\$ 2,000,000	
						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
							\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC							
	A	<b>AUTOMOBILE LIABILITY</b>					CA00130855	3/6/2013
<input checked="" type="checkbox"/> ANY AUTO			BODILY INJURY (Per person)	\$				
<input type="checkbox"/> ALL OWNED AUTOS		<input type="checkbox"/> SCHEDULED AUTOS	BODILY INJURY (Per accident)	\$				
<input checked="" type="checkbox"/> HIRED AUTOS		<input checked="" type="checkbox"/> NON-OWNED AUTOS	PROPERTY DAMAGE (Per accident)	\$				
				\$				
<b>UMBRELLA LIAB</b>			EACH OCCURRENCE	\$				
<b>EXCESS LIAB</b>			AGGREGATE	\$				
<b>DED</b>				\$				
<b>RETENTION \$</b>								
B		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	<input type="checkbox"/> Y / <input type="checkbox"/> N	001WC13A59458	3/7/2013	3/7/2014		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		E.L. EACH ACCIDENT				\$ 1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below		E.L. DISEASE - EA EMPLOYEE				\$ 1,000,000	
			E.L. DISEASE - POLICY LIMIT				\$ 1,000,000	
B	<b>Rented/Leased Equip</b>		CM00044645	3/6/2013	3/6/2014		50,000	

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

RE: Various Projects

Certificate holder is named as additional insured including products and completed operations for general liability per CGL084, and auto liability when required by written contract. General Liability is primary and non-contributory when required by written contract. Waiver of subrogation applies in favor of the certificate holders for general liability, and workers compensation when required by written contract. Cancellation applies as per policy terms and conditions.

**CERTIFICATE HOLDER****CANCELLATION**

Village of Wellington  
Attn: Business Licensing  
12300 West Forest Hill Blvd.  
Wellington, FL 33414

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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