

# BID 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: 561-791-4154	<b>Wellington</b> <h1>INVITATION TO BID</h1> <b>COMMODITY/SERVICE</b>
<b>BID TITLE:</b> Purchase and Delivery of Rapid Flashing Beacons		<b>BID NO:</b> 202515	

<b>NAME OF FIRM, ENTITY, or ORGANIZATION:</b>				
K&K Systems, Inc.				
<b>NAME OF CONTACT PERSON</b>		<b>VENDOR MAILING ADDRESS:</b>		<b>CITY:</b>
Wayne Kasal		687 Palmetto Road		Tupelo
<b>TITLE</b>		<b>VENDOR HEADQUARTERS ADDRESS (IF DIFFERENT):</b>		<b>ZIP:</b>
Account Manger				38801
				<b>STATE:</b>
				MS
<b>PHONE NUMBER:</b>		<b>FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN):</b>		
888-414-3003 / Cell: 662-372-0164		72-1370925		
<b>EMAIL ADDRESS:</b>		<b>STATE OF FLORIDA BUSINESS LICENSE NUMBER (IF APPLICABLE)</b>		
wkasal@k-ksystems.com		N/A; K&K Systems is located in Tupelo, MS.		
<b>FAX NUMBER:</b>				
662-566-7123				
<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"/>				
<i>If Corporation, please provide the following:</i>				
(A) Date of Incorporation: <u>4</u> / <u>7</u> / <u>1997</u> (B) State or Country of Incorporation:				
Month / Day / Year				

## SPECIFICATIONS

### Push Button Assembly/Separate Pole Assembly

- Complete 10' (bring in info from RRFB Spec) (Also drive base info)
- Assembly to have 2 separate pushbuttons. (height 40" and 70") with PB signs inserted
- **Drive Base**
  - 50' wiring harness to run to main pole

### MODEL ECO-RRFB SPECIFICATIONS

#### Rectangular Rapid Flashing Beacon Push Button/Crosswalk (Meets MUTCD & ITE Standards)

##### Solar Panel

- Maximum Power (P max) 40 W
- Voltage at Pmax (V mp) 19.44 V
- Current at Pmax (IMP) 2.06 A
- Short-Circuit Current (Isc) 2.18 A
- Open-Circuit Voltage (Voc) 23.33 V

##### Solid State Regulator (built-in flasher, dimmer and radio)

Crosstalk/Crosswalk 4 is a compact all-in-one solar controller with maximum power point tracking, flasher, and auto-dimmer. Compatible with all 24-7 solar stop beacons, hazard beacons, and has a dry contact for sensor activated beacons. High water level sensor, motion sensor, push button sensor, moisture sensor, or radar sensor.

Adjustable mode duty cycle from 90/10 to 50/50 and change the flashers to activate for 24-7, 3 minutes, 1minute or 1 second. 700 ft. line of sight radio. Antenna included.

#### Rectangular Rapid flashing Beacon

##### Aluminum Housing

##### Control Cabinet/Battery

- Cabinet is 24" High x 16" Wide x 9" Deep, .063, aluminum, located 5' to 6' High from Base Bottom.
- Included battery shall be (1) 55 amp Battery 10" High x 10" Wide x 6" Deep.
- (2) Brackets included with U Bolts or Banded Clamps.

##### Additional Items:

- 40 watt solar panel
- RRFB with mounting hardware
- Signage Z-Brackets (2 @ 16", 2 @ 3" and 1 @ 22".

**Complete 17' SPUN Pole Kit:** to include all mounting hardware, 17' crash tested 4" round pole aluminum spun pole with pedestal base, top cap, signal mount and control box, and pole collar.

**Drive Base** (foundation anchor) for pedestal base 4" fins X 48"ht (8" diameter), top plate with mounting bolts.

**\*New RRFB systems MUST be compatible/able to communicate with the Village of Wellington's existing beacon systems to activate the complete system. They must communicate with our existing 132-D12 (Dual Beacons) with Crosstalk Wireless Controller. The additional Rapid Flashing Beacons will provide Advance Warning to the existing system.**

**Council**

Michael J. Napoleone, Mayor  
Tanya Siskind, Vice Mayor  
John T. McGovern, Councilman  
Maria Antuña, Councilwoman  
Amanda Silvestri, Councilwoman

**Manager**

Jim Barnes

**ITB No. 202515**

**Title:** Purchase and Delivery of Rapid Flashing Beacons

**Bid Opening:** July 17, 2025 at 11:00 AM Local Time

**Request for Information Date:** June 25, 2025

**Request for Information #1**

**Question 1:** Could you provide the bid tabulation or award notice from the previous solicitation?

**Response 1:** Attached, please find the previous bid tabulation results from ITB #202118.

Received & Acknowledged. 7/14/2025.  
Wayne Kasal

BID TABULATION						
BID NO: 202118						
PURCHASE AND DELIVERY OF RAPID FLASHING BEACONS AND DUAL BEACONS FLASHERS						
		K & K SYSTEMS, INC.		RED BUD SUPPLY		
Description	Quantity	Unit	Unit Price	Sub Total	Unit Price	Sub Total
ECO Rectangular Rapid Flashing Beacons	8.00	EA	\$ 3,273.19	\$ 26,185.52	\$ 4,091.49	\$ 32,731.92
Dual Beacon Flashers	8.00	EA	\$ 4,834.63	\$ 38,677.04	\$ 6,043.29	\$ 48,346.32
ECO Rectangular Rapid Flashing Beacons	4.00	EA	\$ 3,273.19	\$ 13,092.76	\$ 4,095.00	\$ 16,380.00
Dual Beacon Flashers	4.00	EA	\$ 4,834.63	\$ 19,338.52	\$ 6,050.00	\$ 24,200.00
ECO Rectangular Rapid Flashing Beacons	1.00	EA	\$ 3,348.19	\$ 3,348.19	\$ 4,185.25	\$ 4,185.25
Dual Beacon Flashers	1.00	EA	\$ 4,909.63	\$ 4,909.63	\$ 6,137.24	\$ 6,137.24
	Grand Total			\$ 105,551.66		\$ 131,980.73



## BID SUBMITTAL

To:

Village of Wellington  
12300 Forest Hill Blvd.  
Wellington, Florida 33414

K&K Systems, Inc.

(Vendor)

agrees to provide material for the **Purchase and Delivery of Rapid Flashing Beacons** in accordance with the requirements and specifications of the Bid Documents for the Village of Wellington as specified.

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 one hundred and twenty (120) 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 16 day of July, 2025

(Month)

(Year)

## SCHEDULE OF VALUES

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

Item	Description	Estimated Quantity	Unit of Measure	Unit Price
1	ECO Rectangular Rapid Flashing Beacons	8	EA	\$6,996.35
2	ECO Rectangular Rapid Flashing Beacons without Push Button Pole Assembly	8	EA	\$4,888.95
3	ECO Rectangular Rapid Flashing Beacons	4	EA	\$7,096.35
4	ECO Rectangular Rapid Flashing Beacons without Push Button Pole Assembly	4	EA	\$4,988.95
5	ECO Rectangular Rapid Flashing Beacons	1	EA	\$7,296.35
6	ECO Rectangular Rapid Flashing Beacons without Push Button Pole Assembly	1	EA	\$5,188.95
			<b>Grand Total</b>	\$155,908.90

**BIDDER/CONTRACTOR** declares 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.

**BIDDER/CONTRACTOR** understands and agrees that this is Unit Price Contract and that contractor will be paid based upon items and quantities actually performed and accepted by Owner. Orders will be placed to the successful bidder(s) on an as-needed when-needed basis to meet Wellington's usage requirements per the pricing above. Wellington reserves the right to order as and when required. No order shall be placed without a purchase order issued by Wellington.

**TERM OF CONTRACT:** The term of the contract shall be for one (1) year from date of award, and by mutual agreement between Wellington and the awardee(s), be renewable for three (3) additional one (1) year periods. Wellington reserves the right to exercise the option to renew annually (subject to the appropriation of funds), not to exceed a maximum of three (3) year one (1) year renewals.

## 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? 28 years
2. What is the last project of this nature that you have completed?  
March 2025, K&K supplied Village of Wellington (2) Crosswalk Systems with separate push button pole assemblies & (2) Rectangular Flashing Beacons to be used as advance warning beacon when triggered by Crosswalk systems.
3. Have you ever failed to complete work awarded to you? If so, where and why? NO
4. Name three individuals or corporations for which you have performed work and to which you refer:

Richard Parker, Acme Barricade	1675 Commerce Blvd Midway, FL 32343	850-408-6322	rparker@acmebarricades.com
Name	Address	Phone	Email
Brandon Judah, Aramsco	1625 Spectrum Dr # 100, Lawrenceville, GA 30043	770.962.2222	bjudah@aramsco.com
Name	Address	Phone	Email
Alex Ross, Emerald Coast Striping	1901 N. East Avenue Panama City, FL 32405	850-215-4875	aross@ecstriping.com
Name	Address	Phone	Email

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
N/A				

6. Has the bidder or his or her representative inspected the proposed project and does the Bidder have a complete plan for its performance? N/A
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
N/A	

8. What equipment do you own that is available for the work? N/A

Equipment Type	Equipment Type
N/A	

9. What equipment will you purchase for the proposed work? N/A



10. What equipment will you rent for the proposed work? N/A
11. State the name of your proposed project manager and give details of his or her qualifications and experience in managing similar jobs.  
N/A
12. The address of principal place of business is 687 Plametto Road Tupelo, MS 38801
13. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows: \_\_\_\_\_  
Troy G. Keith, President. Barbara K. Keith, Secretary. Timothy A. Keith, Vice President.
14. List all organizations which were predecessors to Bidder or in which the principals or officers of the Bidder were principals or officers. \_\_\_\_\_  
N/A
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. \_\_\_\_\_  
N/A
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). \_\_\_\_\_  
ARKANSAS DEPARTMENT OF TRANSPORTATION bid bond for Message Boards (H-25-274W) and Arrow Boards (H-25-267W).
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. None
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. 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 K&K Systems, Inc. for Wayne Kasal, Account Manager  
[print name of entity submitting sworn statement] [print individual's name and title]  
whose business address is 687 Palmetto Road Tupelo, MS 38801 and (if applicable) its Federal Employer Identification Number (FEIN) is 72-1370925 (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: N/A.)
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.]
- X 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 Mississippi

COUNTY OF Lee

Wayne Kasal  
[signature]

7/16/2025  
[date]

Subscribed and Sworn to (or affirmed) before me on 7/16/2025 by Wayne Kasal  
[date] [name]

He/she is STATE OF MISSISSIPPI or has presented Driver's License as identification.  
[type of identification]



Amanda Michelle Robinson  
Print Notary Name and Commission No. 494983

**CERTIFICATION PURSUANT TO FLORIDA STATUTE § 215.4725 and § 287.135**

I, Wayne Kasal, on behalf of K&K Systems, Inc.

certifies

Print Name

Company Name

that K&K Systems, Inc. :

Company Name

1. Is not engaged 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 Iran Terrorism Sectors List; and
5. Has not engaged in business operations in Cuba or Syria.



Signature

Account Manager

Title

7/16/2025

Date



## 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.**

### **NO CONFLICT:**

- ☒ To the best of our knowledge, the work contemplated by this agreement would not create a conflict of interest due to the undersigned's representation of other clients on projects pending before the Village of Wellington.
- ☒ 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.

### **POTENTIAL CONFLICT:**

- ☐ The undersigned business, by attachment to this form, submits a list of current clients and projects for which it is currently seeking Village approval and which may cause a potential conflict of interest due to any of the above listed reasons or otherwise.

THE UNDERSIGNED UNDERSTANDS AND AGREES THAT IT IS INELIGIBLE TO PERFORM WORK ON BEHALF OF THE VILLAGE OF WELLINGTON FOR ANY OF THE CLIENTS OR PROJECTS LISTED IN THE ATTACHEMENT TO THIS FORM. FAILURE TO DISCLOSE A POSSIBLE CONFLICT OF INTEREST MAY RESULT IN DISQUALIFICATION OF YOUR BID/PROPOSAL OR IN THE IMMEDIATE CANCELLATION OF YOUR AGREEMENT, WHICHEVER IS APPLICABLE.

K&K Systems, Inc.

COMPANY NAME



AUTHORIZED SIGNATURE

Wayne Kasal

NAME (PRINT OR TYPE)

Account Manager

TITLE



NON-COLLUSION AFFIDAVIT

State of Mississippi

County of Lee

Being duly sworn deposes and says:

That he/she is an officer of the parties making the forgoing bid submittal, that the bid is made without prior understanding, agreement, or connection with any individual, firm, partnership, corporation or other entity submitting a bid for the same materials, services, supplies or equipment, either directly or indirectly, and is in all respects fair and without collusion or fraud. No premiums, rebates, or gratuities are permitted with, prior to, or after any delivery of material or provision of services. Any violation of this provision may result in disqualification, contract cancellation, return of materials or discontinuation of services, and the possible removal of Bidder from the vendor Bid lists

K&K Systems, Inc.

Name of Bidder

Wayne Kasal

Print name of designated signatory

Wayne Kasal

Signature

Account Manager

Title

On this 16 day of July, 2025, before me appeared Wayne Kasal personally known to me to be the person described in and who executed this ITB#202515 and acknowledged that (she/he) signed the name freely and voluntarily for the uses and purposes therein described.

In witness thereof, I have hereunto set my hand and affixed seal the day and year last written above.



(Affix Seal Here)

Amanda Michelle Robinson

Signature

Notary Public in and for the State of MS

Amanda Michelle Robinson

(Name Printed)

Residing at 459 Palmetto Rd.  
Tupelo MS 38801

My commission expires March 31, 2029

## REQUEST FOR PROOF OF WORKERS COMPENSATION INSURANCE OR EXEMPTION

Dear Provider of Services or Goods:

In order to provide services or goods to Wellington, we require that you provide us either proof of workers compensation coverage or proof of exemption.

Employers conducting work in the State of Florida are required to provide workers' compensation insurance for their employees. Specific employer coverage requirements are based on the type of industry, number of employees and entity organization. To determine coverage requirements for a specific employer, the following information is provided by the Bureau of Compliance.

**Construction Industry** - One (1) or more employees, including the owner of the business who are corporate officers or Limited Liability Company (LLC) members. For a list of the trades considered to be in the construction industry see [69L-6.021 Florida Administrative Code](#).

**Non-Construction Industry** - Four (4) or more employees, including business owners who are corporate officers or Limited Liability Company (LLC) members.

Please note: Non-construction industry Sole Proprietors or partners in a Partnership are not employees unless they want to be included on the business' Workers' Compensation Insurance policy and file a form [DWC 251](#) with the Division of Workers' Compensation.

**Agricultural Industry** - Six (6) regular employees and/or twelve (12) seasonal workers who work more than 30 days during a season but no more than a total of 45 days in a calendar year.

**Out of State Employers** must notify their insurance carrier that they are working in Florida. If there is no insurance, the out of state employer is required to obtain a Florida Workers' Compensation Insurance policy with a Florida [approved insurance carrier](#) which meets the requirements of Florida law and the Florida Insurance Code. This means that "Florida" must be specifically listed in Section 3A of the policy (on the Information Page).

An Extraterritorial Reciprocity clause in [the home state's](#) statute allows some out of state Employers to work in Florida temporarily using their home state's Workers' Compensation insurance policy.

**Contractors** are required to make certain that all sub-contractors have the required Workers' Compensation Insurance **before** they begin work on a project. To see the documentation that is required from a sub-contractor, see [69L-6.032 Florida Administrative Code](#).

If the sub-contractor does not have Workers' Compensation Insurance for its employees, those workers become the employees of the contractor. If an injury occurs, the contractor is responsible for paying the benefits for the work related injury, illness or fatality.

If you meet the above criteria to be exempt, you **MUST** provide us with one of the following:

- If your business is a sole proprietorship or unincorporated business: provide us a Verification of Automatic Exempt Certificate. This verification is a letter that is issued by the State of Florida Department of Financial Services. To receive a letter from the State, complete the following directions: 1) Call the National Council of Compensation Insurance 1-800-622-4123, Option 5, and ask them for the class code for your type of business. 2) Once you have received this code, call the Department of Financial Services at 1-850-413-1601 and provide them your business name, class code, mailing address, and contact phone number. They will send you the Verification of Automatic Exempt Certificate. 3) Provide us a copy of the Verification of Automatic Exempt Certificate.
- If your business is a corporation (including a professional association or limited liability company), and you are not required to have workers compensation insurance as per the requirements as outlined above, you must provide the Village with a copy of your Florida Division of Workers' Compensation Certificate of Election to be Exempt.

If you are an employer that meets the requirements of workers compensation and needs to obtain coverage, contact your current business insurance agent, or you may use the following resources to locate an agent: [www.faia.com](http://www.faia.com), [www.piafl.org/wc-info.pdf](http://www.piafl.org/wc-info.pdf) , or call (850) 893-8245.

Please be reminded that the furnishing of this information to Wellington is a non-negotiable requirement to perform services for us. Failure to provide this timely may result in either termination of your services or delay of payment for services. Your workers compensation Certificate of Coverage, of Workers' Compensation Certificate of Election to be Exempt, or Verification of Automatic Exempt Certificate must be delivered or mailed to the Purchasing Department located at 12300 Forest Hill Boulevard, Wellington, Florida, 33414.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/14/2025

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

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

<b>PRODUCER</b> Lipscomb & Pitts Insurance, LLC 2670 Union Ave. Ext. Suite 100 Memphis TN 38112	<b>CONTACT NAME:</b> Crystal Annarumma <b>PHONE (A/C, No, Ext):</b> 817-336-2377 <b>FAX (A/C, No):</b> 817-347-6981 <b>E-MAIL ADDRESS:</b> CAnnarumma@higginbotham.net
<b>INSURED</b> K&K Systems, Inc. P.O. Box 1065 Verona MS 38879	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Automobile Mutual Insurance Company <b>INSURER B:</b> State Auto Property & Casualty Insurance Company <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>

**COVERAGES** **CERTIFICATE NUMBER:** 1615099486 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> BI&PD Ded \$1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	10067752CP	4/1/2025	4/1/2026	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 Deductible \$1,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ \$10,000			10200820CU	4/1/2025	4/1/2026	EACH OCCURRENCE \$3,000,000 AGGREGATE \$3,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	10171055WC - 3	4/1/2025	4/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

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

The General Liability, Workers' Compensation and Umbrella policies include a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status.

The General Liability, Workers' Compensation and Umbrella policies include a blanket automatic waiver of subrogation endorsement that provides this feature to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such provision.

The General Liability and Umbrella policies include a blanket Primary & Non-Contributory endorsement that applies to the certificate holder only when there is a See Attached...

## CERTIFICATE HOLDER

Village of Wellington  
c/o Insurance Tracking Services, Inc. (ITS)  
P.O. Box 60840  
Las Vegas NV 89160

## CANCELLATION

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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# State of Mississippi

STATE TAX COMMISSION  
JACKSON, MISSISSIPPI

PERMIT TO ENGAGE IN BUSINESS OF SELLING TANGIBLE PERSONAL  
PROPERTY OR SERVICES TAXABLE UNDER THE SALES TAX LAW

THIS PERMIT IS ISSUED AS PROVIDED BY SECTION 27-65-27, MISS. CODE  
OF 1972, UPON CONDITION THAT THE HOLDER SHALL PAY ALL TAXES ACCRUING  
UNDER THE PROVISIONS OF THIS ACT AND SHALL KEEP ADEQUATE RECORDS,  
INCLUDING THE DAILY SALES, ACTION TO ALL PURCHASES, INVOICES, STATE  
SHALL BE OPEN FOR INSPECTION TO ALL BY ANY AUTHORIZED AGENT TO PAY THE SALES  
TAX COMMISSIONER. CHAPTER SALES SHALL BE REPORTED TO THE COMMISSIONER  
PERMIT. UNDER THIS MAKE ALL SALES IN THE PERMIT. THE HOLDER OF BUSINESS,  
NUMBER SHOWN BELOW. THIS PERMIT AUTHORIZES THE HOLDER TO PURCHASE  
MATERIALS FROM TAX EXEMPT FROM TAX.

ISSUED TO:

K & K SYSTEMS INC

P O BOX 1065  
VERONA

MS 38879

ACCOUNT NO. 041-20591-5

DATE ISSUED: 10/10/02

BY: ED BUELOW, JR.  
COMMISSIONER

This license shall not make lawful any act or thing declared to be unlawful by the State of Mississippi

ORIGINAL



Company ID Number: 129693

**INFORMATION REQUIRED  
FOR THE E-VERIFY PROGRAM**

Information relating to your Company:

Company Name: K & K SYSTEMS, INC

Company Facility Address: 687 PALMETTO ROAD  
TUPELO, MS 38801

Company Alternate Address: PO BOX 1065  
VERONA, MS 38879

County or Parish: LEE

Employer Identification Number: 721370925

North American Industry  
Classification Systems Code: 339

Parent Company: \_\_\_\_\_

Number of Employees: 20 to 99      Number of Sites Verified for: 1

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State.

- MISSISSIPPI      1 site(s)

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

Name: **FRANCIS A WILSON**  
Telephone Number: **(888) 414 - 3003**  
E-mail Address: **INFO@K-KSYSTEMS.COM**

Fax Number: **(662) 566 - 7123**

**NO COERCION FOR LABOR OR SERVICES AFFIDAVIT**

STATE OF Mississippi )

COUNTY OF Lee )

BEFORE ME, the undersigned, personally appeared Wayne Kasal (Name of Affiant),  
who, first being duly sworn, deposes and says:

1. I have personal knowledge of the facts in this affidavit and am of legal age and of no disability and have the authority to make the statements contained herein.
2. I am the officer or agent of the business entity named below and make this affidavit to comply with section 787.06, Florida Statutes.
3. The business entity does not use coercion for labor or services as defined in section 787.06, Florida Statutes.
4. I understand that I have a continuing obligation to notify the Village of Wellington if the status of the business entity changes.
5. Under penalty of perjury, I declare that I have read the foregoing Affidavit and that the facts stated in it are true.

FURTHER AFFIANT SAYETH NOT.

Affiant Name:

Signature: Wayne Kasal

Title: Account Manager

Business Entity Name: K&K Systems, Inc.

Date: July 16, 2025

SWORN TO AND SUBSCRIBED before me by means of ☒ physical presence or ☐ online notarization, this \_\_\_\_ day of July 16, 2025, by Wayne Kasal (Name of Affiant), as Account Manager (Title) of K&K Systems, Inc. (Name of Business Entity), who is personally known to me or who has produced Driver's License \_\_\_\_\_, as identification.



Amanda Michelle Robinson  
NOTARY PUBLIC, State of: MS

Printed Notary Name:

My Commission Expires:





## Eco-RRFB (Rectangular Rapid Flash Beacon)

K&K Systems' Rectangular Rapid Flash Beacon (RRFB) is a device using LED flashing beacons in combination with pedestrian warning signs, to provide a high-visibility strobe-like warning to drivers when pedestrians use a crosswalk. In general, RRFBs are a visual cue that pedestrians may begin crossing the roadway at any time. They are always accompanied by crosswalk markings and signs. Crosswalk RRFBs operate by wireless push button activation. When a pedestrian pushes the button to cross the street, the sign is activated and begins to flash to warn drivers of the crossing pedestrians. The flashing pattern can be activated with pushbuttons or automated (e.g., video or infrared) pedestrian detection.

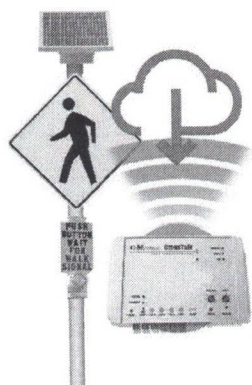
### Push Button Assembly:

- ▶ 2" Button with momentary switch rated at 36VDC
- ▶ 5" x 7" button fixture with crossing sign inserted

### Potential Benefits:\*

- ▶ RRFBs are a lower cost alternative to traffic signals
- ▶ An official FHWA-sponsored experimental implementation and evaluation conducted in St. Petersburg, Florida found that RRFBs at pedestrian crosswalks are dramatically more effective at increasing driver yielding rates to pedestrians than traditional overhead beacons.
- ▶ RRFBs stutter flash may elicit a greater response from drivers than traditional methods.

\* [https://safety.fhwa.dot.gov/intersection/conventional/unsignalized/tech\\_sum/fhwasa09009/](https://safety.fhwa.dot.gov/intersection/conventional/unsignalized/tech_sum/fhwasa09009/)

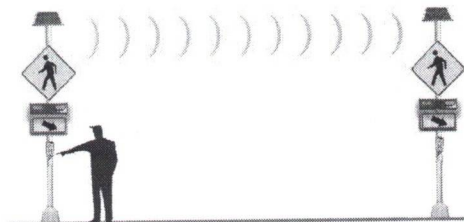


## CrossTalk

CrossTalk K&K Systems' CrossTalk device is a compact, all-in-one solar controller, flasher, auto-dimmer and scheduler that is programmed using CrossLink or cellular service. The CrossTalk is located inside the control cabinet. CrossTalk can be used from a central office to control a single sign or multiple signs at multiple locations by programming through the web interface.

## CrossTalk Activation

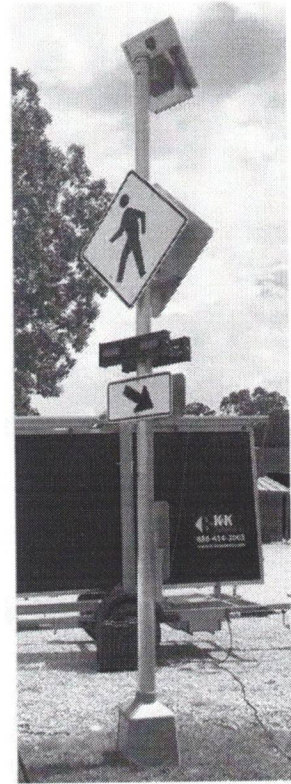
CrossTalk for pedestrian street crossings where people need to cross safely. Pedestrians simply press the button to activate the CrossTalk device located inside the control cabinet. The CrossTalk wirelessly activates the sign alert LEDs on both sides for the programmed amount of time.



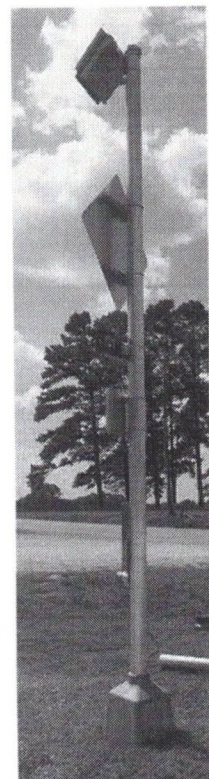
687 Palmetto Rd. Tupelo, MS 38801 • 888.414.3003 toll-free • 662.566.7123 fax • [www.k-ksystems.com](http://www.k-ksystems.com) • [sales@k-ksystems.com](mailto:sales@k-ksystems.com)



## DOUBLE - ECO-RRFB (SOLAR POWERED)

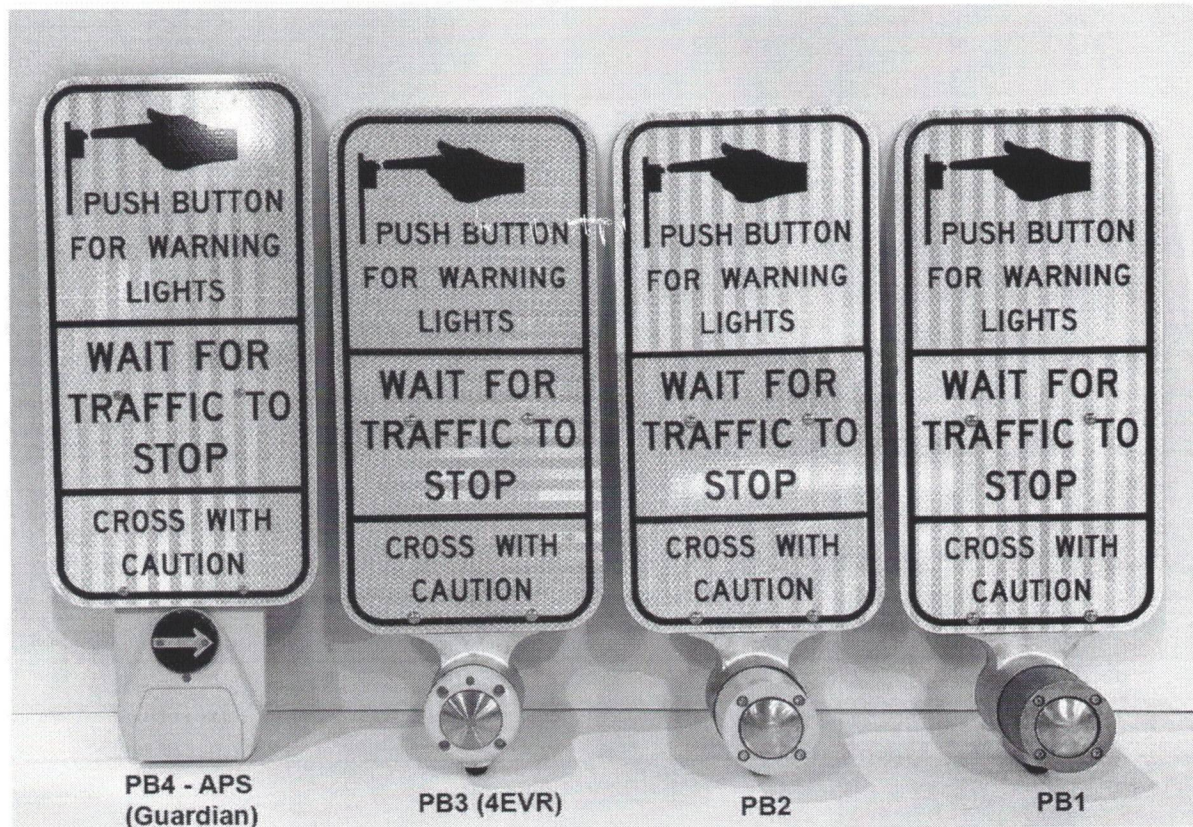
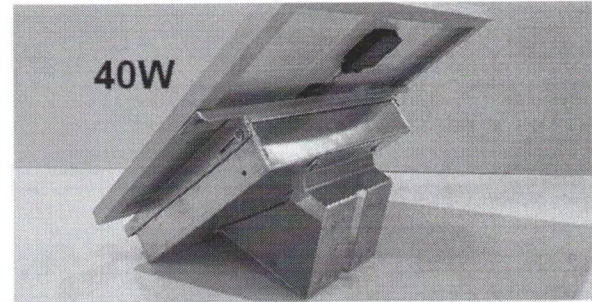
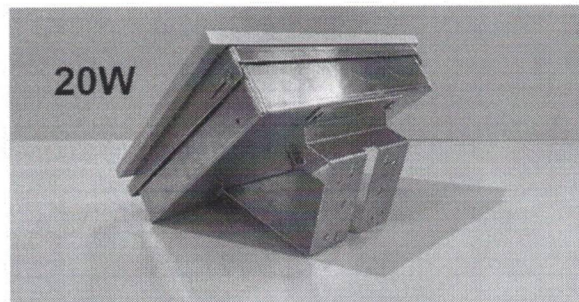
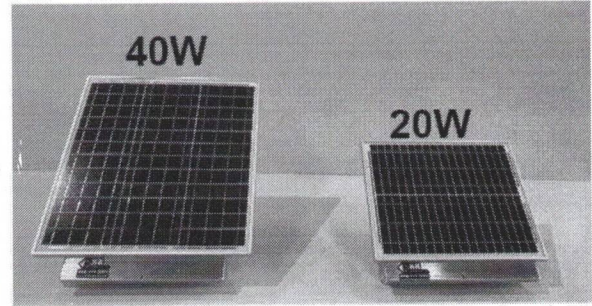
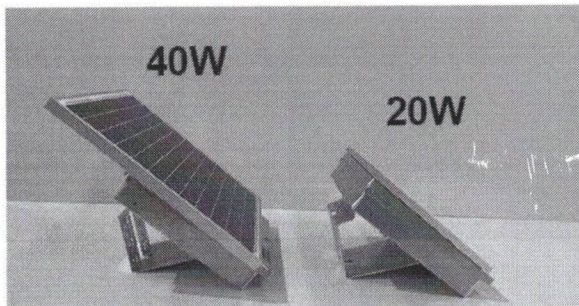


## SINGLE - ECO-RRFB (SOLAR POWERED)





## Solar Panels and FDOT R10-25 Signs with Push Button Options

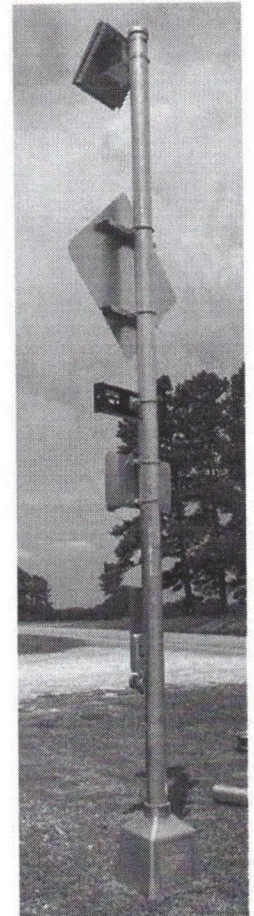


Guardian PB4-APS requires 40 Watt Solar Panel or AC Option



# ECO-RRFB - WITH AC-OPT60 OPTION

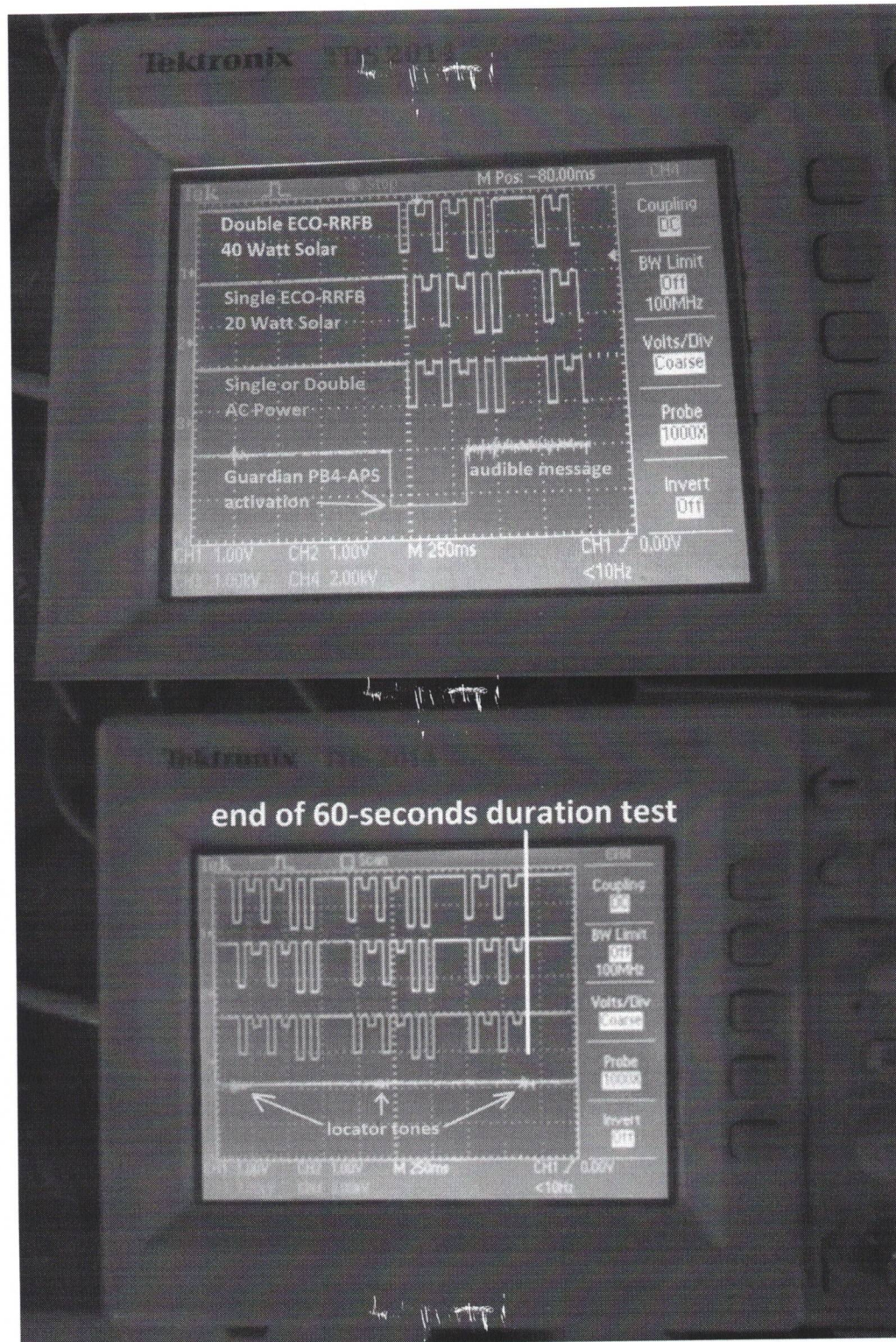
\* UNIT IS AC POWERED, AVAILABLE IN BOTH SINGLE & DOUBLE CONFIGURATION



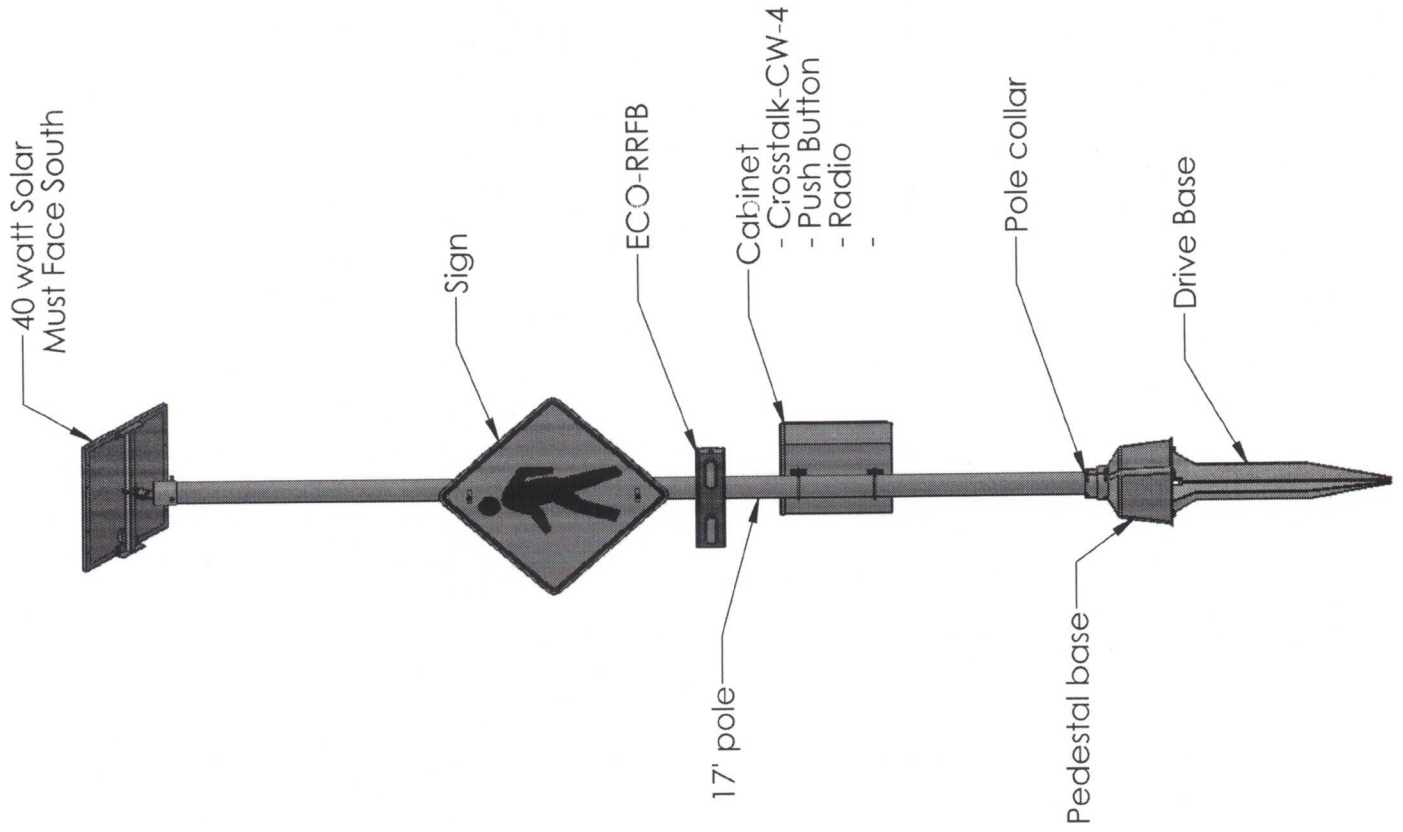
ECO-RRFB SERIES	
<b>ECO-RRFB(Standard)</b>	ECO Rectangular Rapid Flashing Beacon. System includes 20W solar, 18a battery, Crosstalk/Crosswalk-4, control cabinet, push button, and radio. Meets MUTCD specifications on flash pattern and SAE J595 LED array
<b><i>Rectangular Rapid Flasher Beacons(RRFB) Options</i></b>	
<b>AC-OPT60</b>	Add sealed 60 watt-12VDC power supply. <b>(Remove the existing battery)</b>
<b>ADD-RRFB</b>	Add an additional RRFB with Confirmation Lights
<b>ADDBAT12018</b>	Add battery pack - 18 amp, 12V, AGM battery. Dimensions: 7.13"x2.99"x6.54"
<b>ADD20W</b>	Additional 20 watts of solar. <b>(Total of 40 watts)</b>
<b>CrossTalk-CW-10</b>	Cell - modem; Wireless radio; 900 mhz radio (Approximate 1500 feet range)
<b>PB2(Typical)</b>	Push Button 2 - Button 2" non-corrosive stainless steel, aluminum cap, microswitch; typical movement but is solid state; cannot be stuck in Constant Call; ADA compliant.2
<b>PB3(4-EVR)</b>	Push Button 3 - Solid state Piezo switch; pressure sensitive; cannot be stuck in Constant Call; LED and audible tone; ADA and MUTCD compliant;
<b>PB4-APS(Guardian)</b>	Push Button 4-APS - Solid state Piezo switch; locator tone, custom audio messages; ADA and MUTCD compliant. Available in yellow. Includes 5x7 sign holder (SH1). <b>(Must add ADD20W)</b>
<b>W11-2-3030</b>	W11-2 - 30x30 Pedestrian sign
<b>W11-2-3636</b>	W11-2 - 36x36 Pedestrian sign
<b>W11-2-4848</b>	W11-2 - 48x48 Pedestrian sign
<b>W16-7PL-1224</b>	W16-7PL - Left Down Arrow - 12x24
<b>W16-7PR-1224</b>	W16-7PR - Right Down Arrow - 12x24



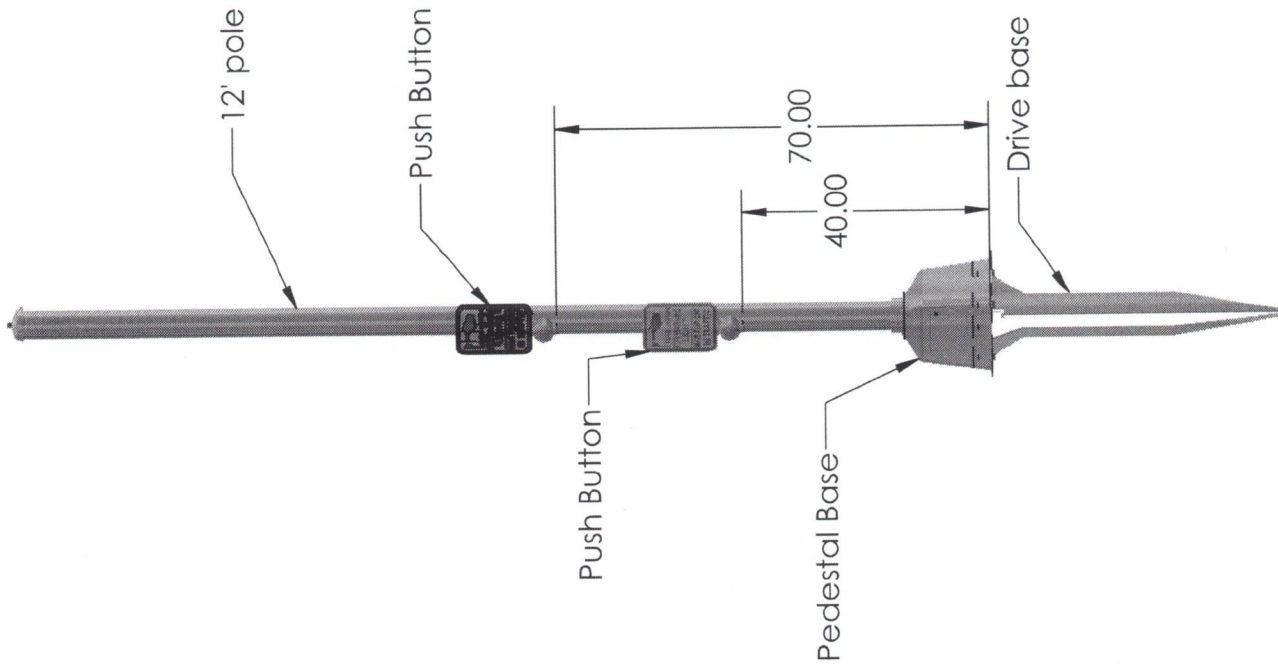
# TERL Testing







<b>K &amp; K SYSTEMS</b>		Office: (888) 414-3003 www.k-ksystems.com	
TITLE: QUO4456		DWG. NO.	
DRAWN BY: James Pilgrim	DATE: 7/16/2025		
CHECKED BY: Timmy P.	DATE: 7/16/2025		
<b>PROPRIETARY AND CONFIDENTIAL</b>			
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<b>**CHECK LOCAL CODES FOR ALL MEASUREMENTS**</b>			
Revision:	Scale: 1/96	Size: 8.5 X 11	Sheet: 1 of 1



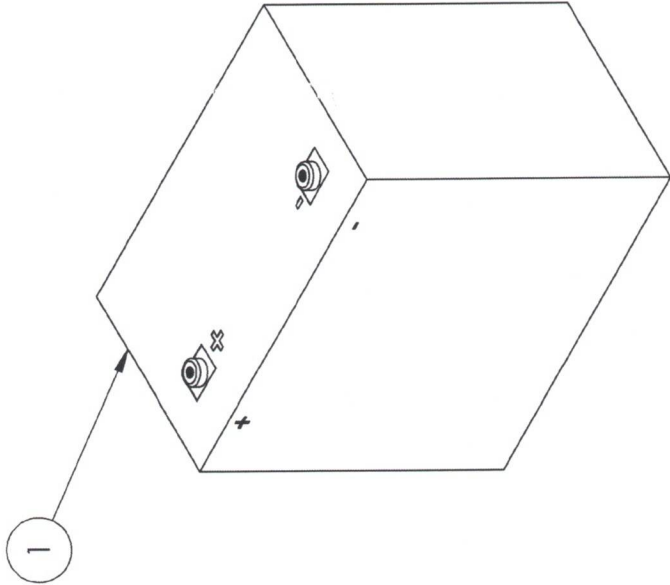
K & K SYSTEMS	Office: (888) 414-3003 www.k-k-systems.com	
	TITLE: QUO4456	DWG. NO.
DRAWN BY: James Pilgrim	DATE: 7/15/2025	
CHECKED BY: Timmy P.	DATE: 7/15/2025	
PROPRIETARY AND CONFIDENTIAL		
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**CHECK LOCAL CODES FOR ALL MEASUREMENTS**		
Revision:	Scale: 1:48	Size: 8.5 X 11
		Sheet: 1 of 1







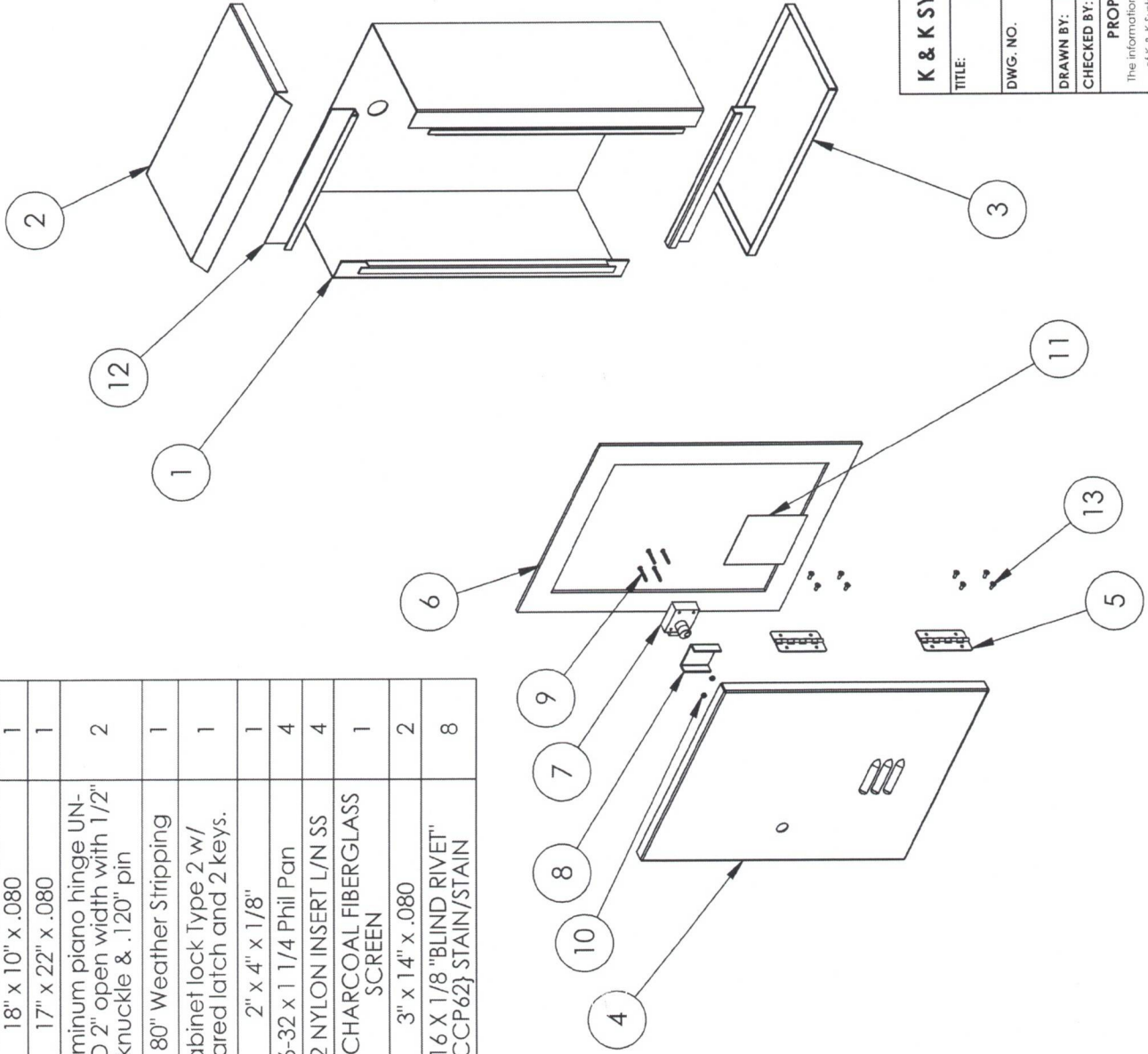
ITEM NO.	PART NUMBER	DESCRIPTION	QTY.
1	BAT-12-55A	12V 55AMP BATTERY	1



K & K SYSTEMS	Office: (888) 414-3003 www.k-ksystems.com
TITLE:	BAT-12-55A
DWG. NO.	
DRAWN BY: Timothy P.	DATE: 4/4/2024
CHECKED BY: Mike Taylor	DATE: 4/4/2024
PROPRIETARY AND CONFIDENTIAL	
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**CHECK LOCAL CODES FOR ALL MEASUREMENTS**	
Revision:	Scale: 1:4    Size: 8.5 X 11    Sheet: 1 of 1



ITEM NO.	PartNo	DESCRIPTION	QTY.
1	MES2441080A	24" x 41" x .080	1
2	MES917080	9" x 17" x .080	1
3	MES1810080	18" x 10" x .080	1
4	MES1722080A	17" x 22" x .080	1
5	SC-Hinge42A	4" aluminum piano hinge UN-STAKED 2" open width with 1/2" knuckle & .120" pin	2
6	SC-WSTRIP280	2" x 80" Weather Stripping	1
7	CL-1026	Cabinet lock Type 2 w/ squared latch and 2 keys.	1
8	MES2418A	2" x 4" x 1/8"	1
9	FAPP632114SS	6-32 x 1 1/4 Phil Pan	4
10	FALN632SS	6-32 NYLON INSERT L/N SS	4
11	TC-CFSCREEN66	6"X6" CHARCOAL FIBERGLASS SCREEN	1
12	MES314080A	3" x 14" x .080	2
13	FABR31618S	3/16 X 1/8 "BLIND RIVET" {CCP62} STAIN/STAIN	8



<b>K &amp; K SYSTEMS</b>	Office: (888) 414-3003 www.k-ksystems.com
TITLE: KK241609-FL	
DWG. NO.	Cabinet
DRAWN BY: Timothy P.	DATE: 6/21/2024
CHECKED BY: Mike Taylor	DATE: 6/21/2024
<b>PROPRIETARY AND CONFIDENTIAL</b>	
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**CHECK LOCAL CODES FOR ALL MEASUREMENTS**	
Revision:	Scale: 1:12 Size: 8.5 X 11 Sheet: 1 of 1