

BID PROPOSAL CHECKLIST

Note: Please submit your bid in this order for electronic and paper bids.

YES NO 1. Bid submittal – If submitting a paper bid → one (1) original and one (1) PDF (CD) copy or flash drive

YES NO 2. Bid Cover Page

YES NO 3. Acknowledgment of addendums (if any) (Not applicable, no addendums have been issued)

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 (Not applicable, ineligible for preference)

YES NO 10. Conflict of Interest

YES NO 11. Non-Collusion Affidavit

YES NO 12. Insurance Certificates

YES NO 13. Copy of Appropriate Licenses

BID COVER PAGE

SUBMIT BIDS TO: Wellington Attn: Clerk's Office 12300 Forest Hill Blvd Wellington, FL 33414	REFER ALL INQUIRIES TO PRIMARY CONTACT: Purchasing Division 12300 Forest Hill Blvd Wellington, FL 33414 Phone:561-791-4154	<h2 style="margin:0;">Wellington</h2> <h1 style="margin:0;">INVITATION TO BID</h1> <p style="margin:0;">COMMODITY/SERVICE</p>
BID TITLE: Palm Tree Pruning and Root Pruning		BID NO: ITB 202026

NAME OF FIRM, ENTITY, or ORGANIZATION: Mainguy Landscape Services				
NAME OF CONTACT PERSON: Robert Mainguy	VENDOR MAILING ADDRESS: 1855 South Flamingo Road	CITY: Davie	ZIP: 33325	STATE: FL
TITLE: President	VENDOR HEADQUARTERS ADDRESS (IF DIFFERENT):	CITY:	ZIP:	STATE:
PHONE NUMBER: (877) 741-3030		FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN): 20-0944467		
EMAIL ADDRESS: mail@mainguy.com		STATE OF FLORIDA BUSINESS LICENSE NUMBER (IF APPLICABLE): N/A		
FAX NUMBER: (877) 741-3454				
ORGANIZATIONAL STRUCTURE (Please Check One): 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> 3 </u> <u> 25 </u> <u> 2004 </u> <small>Month / Day / Year</small>			(B) State or Country of Incorporation: Florida	

BID SUBMITTAL

To:

Village of Wellington

12300 Forest Hill Blvd.

Wellington, Florida 33414

Mainguy Landscape Services

(Vendor)

agrees to provide material for the Palm Tree Pruning & Root Pruning 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 2nd day of June, 2020
(Month) (Year)

SCHEDULE OF VALUES

SECTION A – 12” – 14” ROOT PRUNING AND ROOT BARRIER INSTALLATION

Item	Unit of Measure	Unit Cost
1. Root Pruning per specifications	LF	\$ 7.50
2. Supply and Install Root Barrier per specifications to a depth of 19.5”	LF	\$ 5.95
3. Supply and Install Root Barrier per specifications to a depth of 36”	LF	\$ 15.75
4. Supply and Install Root Barrier per specifications to a depth of 48”	LF	\$ 22.50
Section A Total (Items 1 -4)		\$ 51.70

EXCEPTIONS TO BID: Yes _____ No X , if so explain and provide original manufacturer’s brochure with bid submittal

SECTION B – PALM TREE PRUNING

Item	Unit of Measure	Unit Cost
1. Washingtonian palms:	EA	\$ 25.00
2. General palms (Sabal, Ribbon Palm, Queen, Royal, Fan):	EA	\$ 20.00
3. Large Date palms (Canary Island, Medjool):	EA	\$ 35.00
4. Coconut palms:	EA	\$ 25.00
5. Mechanical boot removal:	LF	\$ 5.00
Grand Total: Section B (Items 1-5)		\$ 110.00

BIDDER/CONTRACTOR understands that contractor will be paid based upon work actually performed and accepted by Wellington. Per tree price shall include all labor, materials, transportation, equipment, fuel and all other items necessary to complete the work. All items incidental to or necessary for the completion of the project shall be included in the price.

Wellington will evaluate Palm Tree Pruning and Root Pruning independently. Wellington reserves the right to award each area independently. Bidder may submit pricing for one or two areas. When submitting pricing for any area, bidders must bid on all items in that area. Each area shall be awarded to the lowest, responsive and responsible Bidder, taking into consideration pricing, experience, staffing, equipment, materials, references and past performance.

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? 21 years

2. What is the last project of this nature that you have completed?
Town of Golden Beach - pruning all Palm Trees and Shade Trees located throughout the Town

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:

<u>Town of Golden Beach</u>	<u>One Golden Beach Drive, Golden Beach, FL 33160</u>	<u>(305) 932-0744</u>	<u>alexdiaz@goldenbeach.us</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</small>
<u>Town of Lauderdale By The Sea</u>	<u>4501 North Ocean Drive, Lauderdale by the Sea, FL 33308</u>	<u>(954) 640-4232</u>	<u>mikew@lbtts-fl.gov</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</small>
<u>Inverrary Association, Inc.</u>	<u>8010 N University Drive, Tamarac, FL 33321</u>	<u>(954) 739-1600</u>	<u>anitavillalon@aol.com</u>
<small>Name</small>	<small>Address</small>	<small>Phone</small>	<small>Email</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
Palm Pruning	Madison Green HOA, Inc.	\$17,500.00	7/1/2020	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). No

Subcontractor	Work to be Performed
No subcontractors will be used on this project	

8. What equipment do you own that is available for the work? See list below

Equipment Type	Equipment Type
Bucket Truck (60' boom)	Chain Saws
Chip Truck (20 c.y. body)	Power Pruners
Chippers (2)	Blowers

9. What equipment will you purchase for the proposed work? Vermeer RT200 Trencher

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. Robert Mainguy, ISA Certified Arborist since 2002. Have managed numerous similar jobs over the past eighteen (18) years such as annual tree pruning at the Town of Golden Beach and the Town of Lauderdale By The Sea.
12. The address of principal place of business is 1855 South Flamingo Road, Davie, FL 33325
13. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows: Robert Mainguy, President; Susan Mainguy, Secretary
14. List all organizations which were predecessors to Bidder or in which the principals or officers of the Bidder were principals or officers. Mainguy Industries, Inc. - Robert Mainguy is 100% shareholder
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. 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 Mainguy Landscape Services for Robert Mainguy, President
[print name of entity submitting sworn statement] [print individual's name and title]

whose business address is 1855 South Flamingo Road, Davie, FL 33325 and (if applicable) its Federal Employer Identification Number (FEIN) is 20-0944467 (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

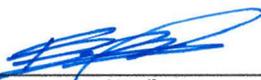
COUNTY OF BROWARD

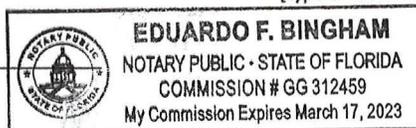

[signature]

June 2, 2020
[date]

Subscribed and Sworn to (or affirmed) before me on June 2, 2020 by Robert Mainguy
[date] [name]

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


[Notary's Signature and Seal]



Eduardo F. Bingham, GG312459
Print Notary Name and Commission No.

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 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.

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.

Mainguy Landscape Services

COMPANY NAME



AUTHORIZED SIGNATURE

Robert Mainguy, President

NAME (PRINT OR TYPE)

NON-COLLUSION AFFIDAVIT

State of Florida

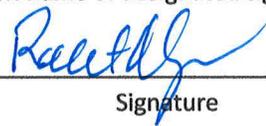
County of Broward

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

Mainguy Landscape Services
Name of Bidder

Robert Mainguy
Print name of designated signatory


Signature

President
Title

On this 2nd day of June, 2020, before me appeared Robert Mainguy personally known to me to be the person described in and who executed this Affidavit 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.


Signature

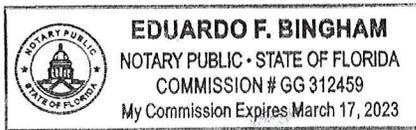
Notary Public in and for the State of Florida

Eduardo F. Bingham
(Name Printed)

Residing at Davie, Florida

My commission expires March 17, 2023

(Affix Seal Here)





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/1/2020

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

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

PRODUCER Setnor Byer Insurance & Risk 900 S. Pine Island Road #300 Plantation FL 33324	CONTACT NAME: Middle Unit 1 PHONE (A/C, No, Ext): (954)382-4350 FAX (A/C, No): (954)382-2810 E-MAIL ADDRESS: certificates@setnorbyer.com
	INSURER(S) AFFORDING COVERAGE INSURER A: The Hartford Fire Ins. Co. INSURER B: Vantapro Specialty Insurance Company INSURER C: Natl Union Fire Co of Pittsbur INSURER D: Continental Divide Ins. Co. INSURER E: INSURER F:
INSURED Mainguy Environmental Care Inc DBA Mainguy Landscape Services 1855 South Flamingo Road Davie FL 33325	NAIC # 44768 35939

COVERAGES

CERTIFICATE NUMBER: 2020_0114

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"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			21UENOL4207	1/14/2020	1/14/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			5087-0318-01	1/14/2020	1/14/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			EBU020700860	1/14/2020	1/14/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	MAWC129331	1/14/2020	1/14/2021	<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)

General Liability: Additional insured per form HG00010605 when required by written contract, Primary and Noncontributory coverage per form HG00010605 when required by written contract, Waiver of subrogation per form HG00010605 when required by written contract. Auto Liability: Additional insured per form SA00039000118, when required by written contract, Waiver of subrogation per form CA04441013, when required by written contract. Workers Compensation: Waiver of subrogation, when required by written contract. Per Florida Statute 45 day Notice of Cancellation except in the event of nonpayment of premium, then 10 day notice. All of the above are subject to policy terms, limitations, exclusions and conditions.

CERTIFICATE HOLDER**CANCELLATION**

Village of Wellington 12300 Forest Hill Boulevard 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 D Saunders/STEFAN
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ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

1855 S FLAMINGO RD
 DAVIE, FL 33325-5804

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
56-0027 LANDSCAPING	MAINGUY ROB		B19.575402 - 08/19/19	\$99.00	B40135673

This document is valid only when receipted by the Tax Collector's Office.

STATE OF FLORIDA
PALM BEACH COUNTY
2019/2020 LOCAL BUSINESS TAX RECEIPT

B1 - 428

MAINGUY LANDSCAPE SERVICES
 mainguy environmental care inc
 1855 S FLAMINGO RD
 DAVIE, FL 33325-5804

LBTR Number: 201014570
EXPIRES: SEPTEMBER 30, 2020

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

1855 S FLAMINGO RD
 DAVIE, FL 33325-5804

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0060 IRRIGATION SPRINKLER CONTRACTOR	MAINGUY ROB MAINGUY ENVIRONMENTAL CARE	U22254	B19.575829 - 08/19/19	\$27.50	B40175807

This document is valid only when receipted by the Tax Collector's Office.

STATE OF FLORIDA
PALM BEACH COUNTY
2019/2020 LOCAL BUSINESS TAX RECEIPT

B2 - 428

MAINGUY LANDSCAPE SERVICES
 mainguy environmental care inc
 1855 S FLAMINGO RD
 DAVIE, FL 33325-5804

LBTR Number: 2018106638
EXPIRES: SEPTEMBER 30, 2020

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.

INTERNATIONAL SOCIETY OF ARBORICULTURE

CERTIFIED ARBORIST™

Robert H. Mainguy

Having successfully completed the requirements set by the International Society of Arboriculture, the above named is hereby recognized as an ISA Certified Arborist®



Kevin Martlage

Kevin Martlage
Director of Credentialing
International Society of Arboriculture

Caitlyn Pollihan

Caitlyn Pollihan
Executive Director
International Society of Arboriculture

FL-0984A

Certification Number

30 Mar 2002

Certified Since

30 Jun 2020

Expiration Date



#0847
ISO/IEC 17024
Personnel Certification Program
ISA Certified Arborist®

Certificate of Completion

Susan B. Mainguy

**Has Completed a Florida Department of
Transportation Approved Temporary Traffic
Control (TTC) Advanced Course.**

08/31/2021

Date Expires

140

FDOT Provider #

Jeremiah McCarthy

Instructor

32047

Certificate #



Metro Florida Safety Council
Tri-County
Dade, Broward, Palm Beach,
metrofloridasafetycouncil.com
mlyons@metrofloridasafetycouncil.com



For more information about Temporary Traffic
Control (TTC) or to verify this certificate

www.motadmin.com