INVITATION TO BID (ITB)
Contract #: O-0524
THEA Transportation and Management Office Renovation

ITB Issue Date & Cone of Silence Effective Date: 3/8/2024
ITB Response Due Date: 5/6/2024

RESPONSIBLE DEPARTMENT
Operations: PM-Brian Pickard, Director of Operations

PROCUREMENT DEPARTMENT
Shannon Bush, Contracts and Procurement Manager
1104 East Twiggs Street, Suite 300
Tampa, Florida 33602
Telephone Number: (813) 272-6740
Email: Procurement@tampa-xway.com

THE RESPONSIBILITY OF SUBMITTING A BID PROPOSAL PACKAGE IN RESPONSE TO THIS SOLICITATION DOCUMENT TO THEA ON OR BEFORE THE STATED DEADLINE SHALL BE SOLELY AND STRICTLY OF THE BIDDER. THEA SHALL IN NO WAY BE RESPONSIBLE FOR DELAYS CAUSED BY THE UNITED STATES MAIL, OR ANY OTHER DELIVERY SERVICE, OR CAUSED BY ANY OTHER OCCURRENCE.

BIDDERS SHALL READ THE SOLICITATION DOCUMENTS IN IT’S ENTIRETY PRIOR TO SUBMITTING A BID PROPOSAL PACKAGE.

BY SUBMITTING A BID PROPOSAL PACKAGE, THE BIDDER ACKNOWLEDGES THEY HAVE READ, UNDERSTAND, AND ACCEPT THE TERMS AND CONDITIONS TO BE MET AND THE CHARACTER AND QUALITY OF THE SCOPE OF WORK TO BE PROVIDED

Legal Entity Name (Bidder): __________________________________________________________
Address of Bidder: __________________________________________________________________
FEIN: _________________________
Name of Authorized Officer: _________________________ Title: ___________________________
E-mail: _________________________________  Phone Number: ___________________________
Some of the Attachments for this Project include documents exempt from public disclosure as provided by Section 119.071(3)(b), Florida Statutes. In order to receive all Attachments, Bidders MUST complete the Authority’s Exempt Documents Form. The Exempt Documents Form shall be executed by the Bidder’s authorized representative, or, if the Bidder is not an architect, contractor or engineering firm, the Bidder’s Project engineer who will be identified in its response package may execute the Authority’s Exempt Form on behalf of the Bidder. Anyone obtaining a OneDrive File Share will be required to provide a copy of their valid form of I.D., their business card, and if applicable, documentation exhibiting their Florida engineering, architectural or contractor’s license number (such as a business card with their license number). Please contact the Procurement Office at procurement@tampaxway.com to request your link. The Authority will only provide access to the OneDrive link to one representative per Bidder, architect, contractor or engineering firm.

Exhibits

A. Scope of Work
B. Public Entity Crime
C. Drug-Free Workplace
D. Bid Proposal Form
E. Bid Tabulation Sheet
F. Conflict of Interest Form
G. Experience and References
H. Certification Regarding Scrutinized Companies List
I. Insurance Requirements, Coverage and Limits
J. Bid Bond
K. Payment and Performance Bond
L. Exempt Documents/Security System Plan Distribution Form

References/Attachments/Construction Drawings/Specification Attachment(s)-

1. THEA Specification Manual
2. 23062_THEA Office Remodel – Arch_S&S
3. Elec FIN Review_S&S
4. Energy Cales- S&S
5. THEA Mech100_ CDs_SS
I. INTRODUCTION

The Tampa-Hillsborough County Expressway Authority (THEA) is soliciting sealed bids from qualified contractors to provide minor interior renovation of multiple offices in the current THEA building for the Tampa Hillsborough Expressway Authority (THEA) Headquarters, located at 1104 E. Twiggs St, suite 300, Tampa, FL 33602.

II. INSTRUCTIONS TO BIDDERS

1. THEA must receive all submittals at the location, date, time and method identified in Section VI., Schedule of Events. Any submittal received after the stated time and date shall not be considered. It shall be the sole responsibility of the firm to have its package electronically submitted to THEA. THEA will not accept other delivery methods. Delay in delivery shall not be the responsibility of THEA. Submittals received after the deadline shall not be considered.

2. Each bidder shall examine all documents and shall determine all matters relating to the interpretation of such documents.

3. The following exhibits are required by THEA to be completed by the bidder and submitted as part of the bid proposal package:

   B. Public Entity Crime
   C. Drug-Free Workplace
   D. Bid Proposal Form
   E. Bid Tabulation Sheet
   F. Conflict of Interest Form
   G. Experience and References
   H. Certification Regarding Scrutinized Companies List
   I. Exempt Documents/Security System Plan Distribution Form

4. A Surety Commitment Letter is required to be submitted as part of the bid proposal package. The bidder is required to provide proof of bonding capacity and provide acknowledgment by the bidder’s surety of the ability to provide the required Payment and Performance Bond and Bid Bonds.

5. Proof of Insurance is required to be submitted as part of the bid proposal package. The bidder must provide evidence of the bidder’s ability to provide the insurance coverage required in Exhibit I – Insurance Requirements, Coverages, and Limits, either by means of an existing policy or other verifiable proof (such as an Agent/Broker commitment letter).

6. Each bidder shall submit a Bid Tabulation Sheet, Exhibit E, quantifying all costs affiliated with the Scope of Work.

7. Bid proposal packages are to only be submitted electronically to THEA’s Procurement e-mail inbox. One (1) original, combined pdf bid proposal package and the required forms above must be delivered to THEA’s Procurement Department, clearly labeled, "Bid Proposal Package O-0524:THEA Transportation and Management Office Renovation” sent to:

   Procurement Office
   Procurement@tampa-xway.com

8. THEA shall not be liable for any expenses incurred in the preparation of the bid proposal package.
9. THEA reserves the right to accept or reject any or all bid proposal packages, to waive irregularities and technicalities, and to request resubmission or to re-advertise for all or any part of the work. THEA shall be the sole judge of the submittals and the resulting negotiated agreement that is in THEA's best interest, and THEA's decision shall be final.

10. THEA requires all bidders to perform a Mandatory Site Visit. Any bidder failing to complete the Mandatory Site Visit will be deemed non-responsive and eliminated from further consideration. The Mandatory Site Visit will be in coordination with both the Procurement and Operations offices as identified in Section VI., Schedule of Events.

11. The successful bidder shall be required to execute an agreement, in form and content acceptable to THEA, indemnifying and holding harmless THEA, its officials, officers, employees, and agents from all claims.

12. CONE OF SILENCE

Bidders, their agents, or associates shall refrain from contacting or soliciting any THEA staff, the consultants representing THEA regarding this ITB or members of the Board of Directors directly or indirectly regarding this ITB one this solicitation once the ITB is published and until the Board of Directors has made a final decision to award the contract. Failure to comply with this provision may result in the disqualification of the firm.

AT THE DISCRETION OF THEA, ANY VIOLATION OF THE REQUIREMENTS SET FORTH IN THIS SECTION SHALL CONSTITUTE GROUNDS FOR IMMEDIATE REJECTION OF THE BID PROPOSAL PACKAGE AND THE BIDDER SHALL BE DEEMED NON-RESPONSIVE.

13. Questions about this ITB for interpretation, clarification or about the project must be in writing addressed to THEA Procurement Department at Procurement@tampa-xway.com. To be considered, such requests must be received no later than the date and time states for the Deadline for Respondent’s submission of questions to THEA referenced in Section VI., Schedule of Events. Questions received after the date will not be considered.

III. QUALIFICATIONS:

1. The bidder must include with its bid proposal package all completed required forms as indicated in Section II, Instructions to Bidders. Failure to submit all completed forms may be cause for rejection at the sole discretion of THEA.

2. Before any award is made, THE requires satisfactory evidence to show that the bidder is fully prepared in every way to execute the work promptly and satisfactorily and has been regularly engaged in such work. Bidders must submit the following documentation of the bidder’s qualifications:
   • Firm’s prior experience including a minimum of three projects of similar size and scope (office renovations of greater than $250,000 in contract value) within the last 5 years on Form F.
   • Include the resume of the Bidder’s proposed Project Manager and Superintendent showing experience on projects of similar size and scope.
   • Evidence of proper state general contractor’s licensure.
IV.  DOING BUSINESS IN THE STATE OF FLORIDA

All bidders shall be in good standing with and authorized to do business in the State of Florida. Furthermore, it is the responsibility of the bidder to confirm that all of its subcontractors are also in good standing and authorized to do business in the State of Florida as may be required pursuant to §607.1501, §605.0902, and §605.0905 Florida Statutes.

If a bidder is not required to register pursuant to Florida Statutes, the successful bidder shall be able to submit documentation demonstrating non-applicability of the statute.

THEA shall not execute an agreement if the successful bidder and subcontractors are not registered and in good standing to do business in the State of Florida as required by the referenced Florida Statutes.

V.  SELECTION PROCESS

THEA intends to purchase the products/services from the responsible and responsive bidder. The selection process for this ITB will consist of the following.

Bid Proposal Packages will be evaluated on whether the bidder is responsible and responsive to this solicitation and meets all requirements within the ITB, and the Scope of Work, with the objective to evaluate those bids and responses and to award a contract for the work to the most qualified bidder.

THEA will determine if the bid is responsive and is a responsible bidder, in its sole and absolute discretion, considering all relevant facts and information. THEA reserves the right at its sole discretion to reject any and all bids if it is determined the total bid price is excessive, best offers are determined to be unreasonable or it is in THEA’s best interest to do so.

The required Bid Bond and Performance and Payment Bond forms, Exhibits J and K, are to be submitted to the THEA Procurement Office of the bidder with the responsive bid proposal package, after Board approval of Final Ranking and Award of Contract.

**FINAL SELECTION:**

The bidder with the responsive bid proposal package will be presented to THEA’s Board of Directors for consideration and approval with a recommendation that the bidder be selected per the Schedule of Events below.

VI.  SCHEDULE OF EVENTS

<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 8, 2024, by 5:00 PM</td>
<td>Advertisement Published</td>
<td>THEA Website &amp; Demandstar</td>
</tr>
<tr>
<td>March 25-29th, between 7 am to 4 pm</td>
<td>Mandatory Site Visit</td>
<td>Email to coordinate: <a href="mailto:Procurement@tampa-xway.com">Procurement@tampa-xway.com</a> Location: THEA Office 1101 E. Twiggs Street, Suite 300 Tampa, FL 33602</td>
</tr>
</tbody>
</table>
VII. TERMS AND CONDITIONS

THEA reserves the right to reject all bid proposal packages, any bid proposal packages not conforming to this Invitation to Bid, and to waive any irregularity or informality with respect to any proposal. THEA further, reserves the right to request clarification of information submitted and to request additional information from one or more firms.

THEA requires that the bidder selected will not discriminate under the agreement against any person in accordance with federal, state, and local governments' regulations. THEA requires the bidder selected make an affirmative statement to the effect that their retention shall not result in conflict of interests with respect to THEA.

THEA requires that the bidder make an affirmative statement to the effect that they have not contacted, or attempted to contact, any member of the Board of Directors, or THEA staff, except as expressly permitted in the ITB.
SECTION 01 1000 - SUMMARY

PART 1 - GENERAL

1.1 RELATED DOCUMENTS

A. Drawings and general provisions of the Contract, including General and Supplementary Conditions and other Division 01 Specification Sections, apply to this Section.

1.2 SUMMARY

A. Section Includes:
   1. Project information.
   2. Work covered by Contract Documents.
   3. Phased construction.
   4. Work performed by Owner.
   5. Multiple Work Packages.
   6. Work under Owner’s separate contracts.
   7. Future work not part of this Project.
   8. Owner's product purchase contracts.
   10. Owner-furnished/Owner-installed (OFOI) products.
   11. Contractor-furnished/Owner-installed (CFOI) products.
   12. Contractor's use of site and premises.
   13. Coordination with occupants.
   15. Specification and Drawing conventions.

1.3 DEFINITIONS

A. Work Package: A group of specifications, drawings, and schedules prepared by the design team to describe a portion of the Project Work for pricing, permitting, and construction.

1.4 PROJECT INFORMATION

A. Project Identification: This is a minor interior renovation of multiple offices in the current THEA building. The scope includes:
   1. Level one:
      a. Reconfiguration of an existing lobby area. This space is 871 Square Feet and will require the relocation of an existing partition including the hosted door and door hardware, removal of existing floor finishes, millwork. Reconfiguration of lighting and mechanical ductwork and the installation of a new ceiling grid. There are no structural impacts, new partitions are non-rated metal stud frame with gyp on both sides up to 6” past the ceiling.
      b. There will be also new returns added to the main lobby area to fix current pressurization issues.
      c. An existing conference room will be split into 2 equal offices. The GC will need to relocate AV equipment and return to owner. The new office spaces will require new light fixtures, new ceiling grid, new floor finishes. There are
THEA Transportation and Management Office Renovation
Scope of Work
EXHIBIT A

no structural impacts, new partitions are non-rated metal stud frame with gyp on both sides up to 6” past the ceiling.

2. Level 2:
   a. Two offices will be combined to make one new office. The new office space will require new light fixtures, new ceiling grid, new floor finishes. There are no structural impacts, new partitions are non-rated metal stud frame with gyp on both sides up to 6” past the ceiling.

3. Level 3:
   a. (3) Existing cubicles will need to be removed from an open office area and returned to the owner. The existing office adjacent to the open office area will be enlarged requiring the ceilings inside the space to be adjusted and will also require the addition of light fixture. The existing ceilings, finishes and lighting in the remaining of the open offices will be demo, the space will be split into 2 equal offices. The new offices will have new partitions that are non-rated metal stud frame with gyp on both sides up to 6” past the ceiling. The ceilings will be acoustical ceiling tiles with 2x4 light fixtures. Some of the light fixtures and diffusers adjacent to the new offices will need to be reconfigured.

4. Project Location: 1104 E Twiggs St STE 300, Tampa, FL 33602 .

B. Owner: Tampa Hillsborough Expressway Authority
   1. Owner's Representative:
      2. Judith Villegas
      3. (813) 440-7930
      4. 1104 E Twiggs Street, Tampa, FL 33602

   6. 2. Architect: HNTB One Tampa City Center, 201 N. Franklin St., Suite 1200 Tampa, FL 33602 .
      7. Architect's Representative:
         a. Andrés Chacón
         b. AIA | NCARB | LEED® AP
         c. Aviation Project Manager
         d. ajchacon@hntb.com
         e. Cell (813) 399-2453

C. Architect's Consultants: Architect has retained the following design professionals, who have prepared designated portions of the Contract Documents:
      a. Representative:
      b. Michael A. Costello, PE | LEED AP
      c. office 813.995.0300|mobile 813.758.9808
      d. 9942 Currie Davis Dr., Ste. H, Tampa, FL 33619
      e. 

1.5 WORK COVERED BY CONTRACT DOCUMENTS

A. The Work of Project is defined by the Contract Documents and includes, but is not limited to, the following:
   1. Project includes the remodeling of existing offices spaces, this will require partial demolition, reconfiguration of existing spaces. The remodeling of spaces doesn’t require structural scope, doesn’t impact

B. Type of Contract:
   1. Project will be constructed under a single prime contract.

C. Contractor's Responsibilities: The Work includes the following, as applicable:
1. Designate delivery dates of Owner-furnished products in Contractor's construction schedule, utilizing Owner-furnished earliest available delivery dates.

2. Review Owner-reviewed Product Data, Shop Drawings, and Samples, noting discrepancies and other issues in providing for Owner-furnished products in the Work.

3. Receive, unload, handle, store, protect, and install Owner-furnished products.

4. Make building services connections for Owner-furnished products.

5. Protect Owner-furnished products from damage during storage, handling, and installation and prior to Substantial Completion.

6. Repair or replace Owner-furnished products damaged following receipt.

D. Restricted Use of Site: Each Contractor shall have limited use of Project site for construction operations as indicated on Drawings by the Contract limits and as indicated by requirements of this Section.

1. Desired Sequence:

2. First Floor, Third Floor and Second Floor

E. Limits on Use of Site: Limit use of Project site to areas within the Contract limits indicated. Do not disturb portions of Project site beyond areas in which the Work is indicated.

1. Driveways, Walkways and Entrances: Keep driveways parking garage, loading areas, and entrances serving premises clear and available to Owner, Owner's employees, and emergency vehicles at all times. Do not use these areas for parking or for storage of materials.
   a. Schedule deliveries to minimize use of driveways and entrances by construction operations.

F. Condition of Existing Building: Maintain portions of existing building affected by construction operations in a weather tight condition throughout construction period. Repair damage caused by construction operations.

G. Condition of Existing Grounds: Maintain portions of existing grounds, landscaping, and hardscaping affected by construction operations throughout construction period. Repair damage caused by construction operations.

1.6 COORDINATION WITH OCCUPANTS

A. Partial Owner Occupancy: Owner will occupy the premises during entire construction period, with the exception of areas under construction. Cooperate with Owner during construction operations to minimize conflicts and facilitate Owner usage. Perform the Work so as not to interfere with Owner's operations. Maintain existing exits unless otherwise indicated.

1. Maintain access to existing walkways, corridors, and other adjacent occupied or used facilities. Do not close or obstruct walkways, corridors, or other occupied or used facilities without written permission from Owner and authorities having jurisdiction.

2. Provide not less than 72 hours' notice to Owner of activities that will affect Owner's operations.

3. CONTRACTOR All Work at the site shall be performed during regular working hours, and CONTRACTOR will not permit overtime work or the performance of Work on Saturday, Sunday or any legal holiday without OWNER's written consent.

B. Owner Limited Occupancy of Completed Areas of Construction: Owner reserves the right to occupy and to place and install equipment in completed portions of the Work, prior to Substantial Completion of the Work, provided such occupancy does not interfere with
THEA Transportation and Management Office Renovation

Scope of Work

EXHIBIT A

completion of the Work. Such placement of equipment and limited occupancy shall not constitute acceptance of the total Work.

1. Architect will prepare a Certificate of Substantial Completion for each specific portion of the Work to be occupied prior to Owner acceptance of the completed Work.

2. Obtain a Certificate of Occupancy from authorities having jurisdiction before limited Owner occupancy.

3. Before limited Owner occupancy, mechanical and electrical systems shall be fully operational, and required tests and inspections shall be successfully completed. On occupancy, Owner will operate and maintain mechanical and electrical systems serving occupied portions of Work.

4. On occupancy, Owner will assume responsibility for maintenance and custodial service for occupied portions of Work.

1.7 WORK RESTRICTIONS

A. Comply with restrictions on construction operations.

1. Comply with limitations on use of public streets, work on public streets, rights of way, and other requirements of authorities having jurisdiction.

2. The areas that the contractor can use is limited to the owner’s parking lot that will be marked off for material storage and contractor parking. It is directly West of the THEA warehouse.

B. On-Site Work Hours: Limit work to between 8:00 a.m. to 5:00 p.m., Monday through Friday, unless otherwise indicated. Work hours may be modified to meet Project requirements if approved by Owner and authorities having jurisdiction.

1. Weekend Hours: Contractor to coordinate with owner’s representative.

2. Early Morning Hours:

3. Contractor to coordinate with owner’s representative.

4. Hours for Utility Shutdowns: Contractor to coordinate with Owner’s representative.

C. Pre-Bid Conference will be held at appointed time by owner as stated in contract documents. Interested Contractors shall join the meeting via video conference as described in the Bid Advertisement.

D. Bidders may visit unrestricted areas of the site during normal work hours on the date specified by owner in the contract documents, as scheduled with THEA and Owner’s Representative. Interested bidders should contact the Owner’s Representative. The site visit is encouraged to allow bidders to examine the existing building layout and conditions, take measurements and familiarize themselves with the requirements of the project. No additional information will be provided or questions answered during site visits.

E. No deliveries should be made between the hours of 5:00 P.M. to 8:00 A.M. or on Saturday or Sunday, without the written permission of the Owner.

F. Existing Utility Interruptions: Do not interrupt utilities serving facilities occupied by Owner or others unless permitted under the following conditions and then only after arranging for temporary utility services according to requirements indicated:

1. Notify Owner two days in advance of proposed utility interruptions.

2. Obtain Owner's written permission before proceeding with utility interruptions.

G. Noise, Vibration, Dust, and Odors: Coordinate operations that may result in high levels of noise and vibration, dust, odors, or other disruption to Owner occupancy with Owner.

1. Notify Owner not less than two days in advance of proposed disruptive operations.

2. Obtain Owner's written permission before proceeding with disruptive operations.
H. Smoking and Controlled Substance Restrictions: Use of tobacco products, alcoholic beverages, and other controlled substances within the existing building is not permitted.

I. Employee Identification: Provide identification tags for Contractor personnel working on Project site. Require personnel to use identification tags at all times.

J. Employee Screening: Comply with Owner's requirements for drug and background screening of Contractor personnel working on Project site.
   1. Maintain list of approved screened personnel with Owner's representative.
   2. Contractor shall not employ any Subcontractor, Supplier or other person or organizations (including those acceptable to Owner as indicated in paragraph 6.8.2) whether initially, or as a substitute, against whom Owner may have reasonable objection.

K. Contractor shall provide competent, suitably qualified personnel to survey and lay out the Work and perform construction as required by the Contract Documents. Contractor shall at all times maintain good discipline and order at the site. Except in connection with the safety or protection of persons or the Work or property at the site or adjacent thereto, and except as otherwise indicated in the Contract Documents, all Work at the site shall be performed during regular working hours, and Contractor will not permit overtime work or the performance of Work on Saturday, Sunday, or any legal holiday without Owner’s written consent.
   1.

1.8 SPECIFICATION AND DRAWING CONVENTIONS

A. Specification Content: The Specifications use certain conventions for the style of language and the intended meaning of certain terms, words, and phrases when used in particular situations. These conventions are as follows:
   1. Imperative mood and streamlined language are generally used in the Specifications. The words "shall," "shall be," or "shall comply with," depending on the context, are implied where a colon (:) is used within a sentence or phrase.
   2. Text Color: Text used in the Specifications, including units of measure, manufacturer and product names, and other text may appear in multiple colors or underlined as part of a hyperlink; no emphasis is implied by text with these characteristics.
   3. Hypertext: Text used in the Specifications may contain hyperlinks. Hyperlinks may allow for access to linked information that is not residing in the Specifications. Unless otherwise indicated, linked information is not part of the Contract Documents.
   4. Specification requirements are to be performed by Contractor unless specifically stated otherwise.

B. Division 00 Contracting Requirements: General provisions of the Contract, including General and Supplementary Conditions, apply to all Sections of the Specifications.

C. Division 01 General Requirements: Requirements of Sections in Division 01 apply to the Work of all Sections in the Specifications.

D. Drawing Coordination: Requirements for materials and products identified on Drawings are described in detail in the Specifications. One or more of the following are used on Drawings to identify materials and products:
   1. Terminology: Materials and products are identified by the typical generic terms used in the individual Specifications Sections.
   2. Abbreviations: Materials and products are identified by abbreviations scheduled on Drawings and published as part of the U.S. National CAD Standard.
3. Keynoting: Materials and products are identified by reference keynotes referencing Specification Section numbers found in this Project Manual.

END OF SECTION 01 1000
PUBLIC ENTITY CRIMES FORM

SWORN STATEMENT UNDER SECTION 287.133(3)(a), FLORIDA STATUTES

1. This sworn statement is submitted to Tampa-Hillsborough County Expressway Authority by ____________________________________________  
   [print individual’s name and title]

   for ____________________________________________  
   [print name of entity submitting sworn statement]

   whose business address is ____________________________________________

   and (if applicable) its Federal Employer Identification Number (FEIN) is _____________

   (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 a 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 adjunction 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 a 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:

   i. A predecessor or successor of a person convicted of a public entity crime; or

   ii. 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 the 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 prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

5. I understand that a “person” as defined in Paragraph 287.133(1)(e), 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. 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 the information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. [indicate with a check mark 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 the management of 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 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 of 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 of July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. [attach a copy of the final order]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

____________________________________________
Signature

____________________________________________
Date

State of __________________
County of ________________

PERSONNALLY APPEARED BEFORE ME, the undersigned authority,

____________________________________________
[Name of individual signing] who, after first being sworn by me, affixed his/her signature in

the space provided above on this ____ day of _____________, 20____.

____________________________________________
Notary Public

Page 2 of 3
DRUG-FREE WORKPLACE FORM

The undersigned firm, in accordance with Florida Status 287.087 hereby certifies that

Name of Business

1. Publish a statement of notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.

2. Inform employees about the dangers of drug abuse in the workplace, the business’s policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.

3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in Paragraph 1.

4. In the statement specified in paragraph 1, notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employees will abide by the terms of a statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Florida Statute 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.

5. Impose a sanction of, or require the satisfactory participation in a drug abuse assistance or rehabilitation program is such is available in the employee’s community, by any employee who is convicted.

6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1 thru 5.

As the person authorized to sign this statement, I certify that this firm complies with the above requirements.

___________________________
Firm’s Signature

___________________________
Date
PRICE PROPOSAL FORM

(Print this page on bidder’s letterhead and attach with response)

Date: ______________________________

TAMPA-HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY (THEA)
Attention: Procurement Department
Shannon Bush, Contracts and Procurement Manager
1104 East Twiggs Street, Suite 300
Tampa, FL 33602

Subject: _____________________________________________________________________

Dear THEA:

Having carefully examined the Instructions to Bidders, Supplementary Instructions to Bidders, General
Provisions, Supplementary General Provisions, Special Provisions and Technical Specifications, Plans or
Drawings (if issued), of the above subject project and contract, as well as the premises and the conditions
affecting the work, the undersigned proposes to furnish all labor and materials called for by them and equipment
necessary and to accomplish the entire work within the time period indicated in accordance with the said
documents for the prices presented in the price schedules included on the attached BID TABULATION SHEET.

The undersigned acknowledges that they understand the following conditions that within the price schedules
amounts indicated with brackets around the amounts are considered to be deductions or credits to the overall
project cost. Calculations of price schedule extensions and price totals shall appropriately account for individual
deductive and additive pay items.

TOTAL LUMP SUM PRICE: $_______________________________

WRITTEN AMOUNT:

_____________________________________ DOLLARS AND _________________ CENTS

The undersigned firm agrees to keep this offer open for acceptance for One Hundred
Twenty (120) days after date of opening the bid proposal package.

The signer of this bid proposal package hereby declares that the only person, persons, company or parties
interested in this bid proposal package as principals are named herein, that this bid proposal package is made
without connection with any other person, persons, company or parties submitting a proposal; and that it is in
all respects fair and in good faith, without collusion or fraud.

__________________________________________
Name of Respondent

__________________________________________  ________________
Authorized Signature  Date
<table>
<thead>
<tr>
<th>REF NO.</th>
<th>BID ITEM NO.</th>
<th>ITEM DESCRIPTION</th>
<th>QTY</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>BID AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1.001</td>
<td>Example</td>
<td>1</td>
<td>LS</td>
<td>500</td>
<td>$500.00</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-</td>
</tr>
</tbody>
</table>

**TOTAL BID AMOUNT**: 1 500 $500.00
CONFLICT OF INTEREST STATEMENT

Check one of the boxes below:

☐ To the best of our knowledge, the undersigned bidder has no potential conflict of interest due to any other clients, contracts, or property interest for this solicitation and project.

OR

☐ The undersigned bidder, by attachment to this form, submits information which may be a potential conflict of interest due to other clients, contracts or property interest for this solicitation and project.

BIDDER:

By: ________________________________

Authorized Signature

___________________________________
Printed Name of Signer

___________________________________
Title of Signer

___________________________________
Date Signed
EXHIBIT G

EXPERIENCE AND REFERENCES

3.0 Experience:

3.0.1. State the total work volume and value that your organization has been responsible for in the past five years in:

   a. Total Dollar value
      
   b. Number of Contracts

3.0.2. List the dollar volume and number of government projects you have completed in the past 5 years:

   a. Dollar Value
      
   b. Number of government projects

3.1 Provide the following information on at least three (3) projects that Bidder has performed within the past five (5) years that were similar to this project with a contract value of at least $250,000. List chronologically, starting with the last project. Complete a new questionnaire for each representative project.

3.2 Provide your Florida General Contractor’s License Number and Expiration Date.
EXHIBIT G

3.2.1  Project Title: 

a. Date Project Completed: ________________________________ 

b. Project Name: __________________________________________ 

c. Owner Name: __________________________________________ 

d. Owner Address: _________________________________________ 

e. Owner Telephone: ________________________________________ 

f. Name of Reference for this Project: ___________________________ 

g. Relationship of Reference to Owner: __________________________ 

h. Title and Position Reference held for this Project: _______________ 

i. Firm name where Reference was employed for this Project: _______________ 

j. Reference’s Telephone: _________________________________ 

k. Dollar Amount: _________________________________________ 

l. List any other special criteria i.e. specialized repair or equipment, etc. worked: ____________________________ 

m. Describe Your Specific Scope of Work: ________________________ 

n. General Contract Amount: _________________________________ 

o. Your Participation was:____________________________________ 

p. Completion Date: ________________________________________________________________________________ 

q. Was Project completed on time? ____________________________________________________________________ 

r. Was Project completed within budget? __________________________________________________________________ 

   • If not, explain: ________________________________________________________________________________ 

s. Penalties imposed? (Yes or No; if Yes, explain) ________________________________ 

____________________________________________________________________________________________ 

t. Any liens, claims, or lawsuits? (Yes or No, if Yes, explain):______________________________ 

____________________________________________________________________________________________ 

u. If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success did your firm have in achieving the goal. ____________________________ 

v. Provide names and phone numbers of the D/W/MBE or SBE firms used on the project: ______________ 

w. Any other pertinent information? ______________________________________________________________ 

[Use additional sheets as necessary]
EXHIBIT G

3.2.2   **Project Title:**

a. **Date Project Completed:**

b. **Project Name:**

c. **Owner Name:**

d. **Owner Address:**

e. **Owner Telephone:**

f. **Name of Reference for this Project:**

g. **Relationship of Reference to Owner:**

h. **Title and Position Reference held for this Project:**

i. **Firm name where Reference was employed for this Project:**

j. **Reference's Telephone:**

k. **Dollar Amount:**

l. **List any other special criteria i.e. specialized repair or equipment, etc. worked:**

m. **Describe Your Specific Scope of Work:**

n. **General Contract Amount:**

o. **Your Participation was:**

p. **Completion Date:**

q. **Was Project completed on time?**

r. **Was Project completed within budget?**

a. **If not, explain:**

s. **Penalties imposed? (Yes or No; if Yes, explain):**

 t. **Any liens, claims, or lawsuits? (Yes or No, if Yes, explain):**

u. **If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success your firm have in achieving the goal.**

v. **Provide names and phone numbers of the D/W/MBE or SBE firms used on the project:**

w. **Any other pertinent information?**

[Use additional sheets as necessary]
3.2.3  Project Title: ____________________________

a. Date Project Completed: ______________________________

b. Project Name: ________________________________

c. Owner Name: ________________________________

d. Owner Address: ________________________________

e. Owner Telephone: ________________________________

f. Name of Reference for this Project: ________________________________

g. Relationship of Reference to Owner: ________________________________

h. Title and Position Reference held for this Project: ________________________________

i. Firm name where Reference was employed for this Project: ________________________________

j. Reference's Telephone: ________________________________

k. Dollar Amount: ________________________________

l. List any other special criteria i.e. specialized repair or equipment, etc. worked: ________________________________

m. Describe Your Specific Scope of Work: ________________________________

n. General Contract Amount: ________________________________

o. Your Participation was: ________________________________

p. Completion Date: ________________________________

q. Was Project completed on time? ________________________________

r. Was Project completed within budget? ________________________________
   a. If not, explain: ________________________________

s. Penalties imposed? (Yes or No; if Yes, explain) ________________________________

   t. Any liens, claims, or lawsuits? (Yes or No, if Yes, explain): ________________________________

u. If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success did your firm have in achieving the goal. ________________________________

   v. Provide names and phone numbers of the D/W/MBE or SBE firms used on the project: ________________________________

w. Any other pertinent information? ________________________________

[Use additional sheets as necessary]
CERTIFICATION REGARDING SCRUTINIZED COMPANIES LISTS

This certification is required pursuant to Florida Statute, Section 287.135.

A company that, at the time of bidding or submitting a proposal for a new contract or renewal of an existing contract, is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, Iran Terrorism Sectors List, or is engaged in business operations in Cuba or Syria, is ineligible for, and may not bid on, submit a proposal for, or enter into or renew a contract with an agency or local government entity for goods or services of $1 million or more.

Respondent / Bidder
Name:_________________________________________________________

Respondent /Bidder FID or EIN:
_____________________________________________________

Address:  ________________________________________________________________
City:  __________________________  State:  __________________  Zip:  ____________

I hereby warrant that I am duly authorized to sign and bind on behalf of the company listed above as the "Respondent/Bidder".

I hereby certify and affirm that the company listed above as the “Respondent/Bidder” is not listed on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to Florida Statute Section 215.473, or engaged in business operations in Cuba or Syria.

I understand pursuant to Florida Statute, Section 287.135, the submission of a false certification may subject the Respondent/Bidder to civil penalties, attorney’s fees and/or costs.

RESPONDENT/BIDDER:

By: ___________________________________
   (Authorized Signature)

   (Printed Name of Signer)

   (Title of Signer)

   (Date Signed)
INSURANCE REQUIREMENTS, COVERAGES and LIMITS
for
Tampa-Hillsborough County Expressway Authority

Consultants, Contractors and Vendors, hereinafter referred to collectively and individually as “Insured” conducting business with the Tampa-Hillsborough County Expressway, “THEA” are required to maintain adequate insurance coverage and provide insurance certification to THEA.

A. INSURANCE REQUIREMENTS:

1) All insurance shall be from responsible insurance companies eligible to do business in the State of Florida and having an AM Best rating of A- or better and a financial size category of VII or better. Utilization of non-rated companies or companies with AM Best ratings lower than A- or a financial size category lower than VII may be approved on a case by case basis. If the insurer does not meet these requirements, THEA retains the right to approve or disapprove the use of the insurer.

2) INSURED’S liability policies, other than the Workers’ Compensation and Professional Liability, shall provide that THEA, its officials, officers and employees are additional named insureds as to the operations of the INSURED under this AGREEMENT.

3) INSURED’S liability policies, other than the Workers’ Compensation and Professional Liability, shall provide the “Severability of Interest” provision (a/k/a “Separation of Insureds” provision).

4) The INSURED’S Certificate of Insurance(s) shall provide THEA as an additional certificate holder for all policies issued.

5) The INSURED’S Certificate of Insurance(s) shall state the description of the operations, i.e., “Name of Agreement” between THEA and “Name of Insured” and shall state the Contract Number assigned for the AGREEMENT between THEA and the INSURED.

6) The INSURED shall deliver to THEA, within ten (10) days from the receipt of a Notice of Award of this AGREEMENT, properly executed Certificate(s) of Insurance on insurance industry standard certificate of insurance form(s) (example: ACORD form) setting forth the insurance coverages and limits required herein. All of the required insurance coverages shall be issued as required by law and shall be endorsed, where necessary, to comply with the minimum requirements contained herein.

7) Except as otherwise specified in the AGREEMENT, the insurance will commence on or prior to the effective date of the AGREEMENT and will be maintained in force throughout the duration of the AGREEMENT. Three years’ completed operations coverage may be required to be maintained on specific commercial general liability policies and/or professional liability policies effective on the date of substantial completion or the termination of the AGREEMENT, whichever is earlier.

8) Aggregate Policy Limits on policies required of INSURED shall apply exclusively for this AGREEMENT.

9) INSURED authorizes THEA to verify its insurance information with its insurance agents, brokers, surety, and insurance carriers. At THEA’S request, INSURED shall provide copies of the policies at no cost to THEA, subject to redaction by the INSURED of any proprietary information.

10) All insurance coverages of the INSURED shall be primary to any insurance or self-insurance programs carried by THEA; and any THEA insurance or coverages shall not be contributory to INSURED’S insurance requirements in this AGREEMENT.
11) The insurance coverages and limits required of the INSURED under this AGREEMENT are designed to meet the minimum requirements of THEA. They are not designed as a recommended insurance program for the INSURED. The INSURED alone shall be responsible for the sufficiency of its own insurance program.

12) All policies of insurance required herein will be specifically endorsed to require the insurer provide THEA with thirty (30) days notice prior to any cancellation, intent not to renew any policy and/or any change that will reduce the insurance coverages required in this AGREEMENT, except for the application of the Aggregate Limits Provisions. The endorsement will specify that such notice will be sent to:

Tampa-Hillsborough County Expressway, (THEA)
Contracts & Procurement Manager
1104 East Twiggs St, Suite 300
Tampa, FL 33602

13) THEA accepts no responsibility for determining whether the INSURED’S insurance is in full compliance with the insurance required by the AGREEMENT. Neither the approval by THEA nor the failure to disapprove the insurance furnished by the INSURED will relieve the INSURED of their full responsibility to provide the insurance required by this AGREEMENT.

14) If the INSURED fails to provide or maintain the insurance coverages required in this AGREEMENT, THEA may terminate or suspend this AGREEMENT, or, at the THEA’S sole discretion, may obtain such coverages and invoice the INSURED and include a 15% administrative cost. If not paid within 45 days, the amount will be deducted from INSURED’S invoice. The decision of THEA to purchase such insurance coverages shall in no way be construed as a waiver of its rights under this AGREEMENT.

15) INSURED shall fully comply with the insurance requirements of this AGREEMENT unless excused in writing by THEA. Any deductible applicable to any claim shall be the responsibility of the INSURED.

16) Any liability insurance aggregate limits are to be confirmed in writing by the respective insurance company that to their knowledge, as of the date of the AGREEMENT, there are no pending claims or legal actions against the INSURED, which if resolved in favor of the claimant would impair the insurance company’s ability to cover the minimum insurance limits stated herein.

17) Current Insurance Service Office (ISO) policies, forms, and endorsements or broader shall be used where applicable. Notwithstanding the foregoing, the wording of all policies, forms, and endorsements must be acceptable to THEA without restrictive endorsement.

18) The INSURED will not commence work, use or occupy THEA premises in connection with the AGREEMENT until the required insurance is in force, preliminary evidence of insurance acceptable to THEA has been provided to THEA and THEA has granted permission to the INSURED to commence work or use or occupy the premises in connection with the AGREEMENT.

19) Upon request, the INSURED shall promptly make available a certified, true and exact copy of the insurance policy and endorsements issued to the policy and any renewal thereof for THEA’S review and inspection. In the event of cancellation or non-renewal of this insurance, the INSURED agrees to purchase the maximum "extended claims reporting period" permitted under the policy within the time allowed, unless replacement coverage is obtained with retroactive coverage applicable as of the date the INSURED services started under this AGREEMENT.
20) All insurance minimum coverage limits extend to any subcontractor and the Prime INSURED is responsible for all subcontractors.

B. INSURANCE COVERAGES and LIMITS:

For the term of this AGREEMENT the INSURED shall procure and maintain insurances of the types and limits specified herein.

1) **Workers’ Compensation and Employers’ Liability Insurance** - The minimum limits of Worker’s Compensation/Employer’s Liability Insurance (inclusive of any amount provided by an umbrella or excess policy) are:

<table>
<thead>
<tr>
<th></th>
<th>Florida Statutory Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers’ Compensation</td>
<td></td>
</tr>
<tr>
<td>Employers’ Liability</td>
<td></td>
</tr>
<tr>
<td>Each Accident</td>
<td>$500,000</td>
</tr>
<tr>
<td>Disease – Policy Limit</td>
<td>$500,000</td>
</tr>
<tr>
<td>Disease - Each Employee</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

2) **Commercial General Liability Insurance** - The minimum limits of Commercial General Liability Insurance (inclusive of any amount provided by an umbrella or excess policy) are:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>General Aggregate</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Per Person</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Each Occurrence</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Personal Injury</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Property Damage</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Products &amp; Completed Operations</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

The General Aggregate Limit must be specifically applicable to the AGREEMENT between THEA and the INSURED.

The Certificate must reflect whether the policy is “claims made” or “occurrence”.

Products & Completed Operations coverage to be maintained for three (3) years after final completion of the work under this AGREEMENT.

3) **Business Automobile Liability Insurance** - The minimum limits of Business Automobile Liability Insurance (inclusive of any amount provided by an umbrella or excess policy) covering ownership, maintenance, use, loading and unloading of all its owned, non-owned, leased or hired vehicles are:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bodily Injury</td>
<td></td>
</tr>
<tr>
<td>Each Person</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Each Accident</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Property Damage</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Bodily Injury &amp; Property Damage Combined</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

4) **Umbrella Liability Insurance or Excess Liability Insurance** – Umbrella Liability Insurance or Excess Liability Insurance must provide the same coverages as required for the underlying Commercial General, Business Automobile and Employers’ Liability Coverages with no gaps in continuity of coverages or limits.

Bodily Injury & Property Damage Combined
<table>
<thead>
<tr>
<th>Category</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each Occurrence</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Aggregate (specific to this AGREEMENT)</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Aggregate (not specific to this AGREEMENT)</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>
5) **Professional Liability Insurance, also known as “Errors and Omissions”**. The minimum limits of Professional Liability Insurance covering all work of the INSURED without any exclusions unless approved in writing by THEA are:

<table>
<thead>
<tr>
<th>Professional Liability</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Each Claim</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Aggregate</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

Any deductible applicable to any claim shall be the responsibility of the INSURED and shall not be greater than $100,000 unless approved by THEA in writing. This coverage shall be maintained by the INSURED for a period of not less than three (3) years from the date the INSURED has completed and THEA has accepted the services under this AGREEMENT.

6) **Environmental Impairment (Pollution) Liability, (if required)** – Environmental Impairment (Pollution) Liability insurance is required **only** if specifically stated in the Instructions and Submittal Documents package.

**If required**, the minimum limits of Environmental Impairment (Pollution) Liability insurance coverage (inclusive of any amount provided by an umbrella or excess policy) for liability resulting from pollution or other environmental impairment in connection with operations performed by or on behalf of INSURED under this AGREEMENT or the use or occupancy of THEA premises by or on behalf of the INSURED are:

| Each Occurrence     | $1,000,000 |
| Annual Aggregate    | $1,000,000 |

[END OF INSURANCE REQUIREMENTS, COVERAGES AND LIMITS]
BID BOND

KNOW ALL MEN BY THESE PRESENTS, that we __________________________

(Here In after called the "Principal") and __________________________

(Hereinafter called the "Surety"), a Corporation chartered and existing under the laws of the State of ____________with its principal offices in the City of ____________

and authorized to do business in the State of Florida are held firmly bound unto the Tampa-Hillsborough County Expressway Authority, in the full and just sum of ____________________ Dollars ($_____________), equal to 10% of the bid amount, good and lawful money of the United States of America, to be paid upon demand of the Tampa-Hillsborough County Expressway Authority, to which payment well and truly to be made we bind ourselves, our heirs, executors, administrators, and assigns, jointly and severally by these presents.

WHEREAS, the Principal is about to submit, or has submitted to the Tampa-Hillsborough County Expressway Authority, a proposal for the

___________________________

WHEREAS, the Principal desires to file this bond in accordance with law, in lieu of a certified check or cashier's check otherwise required to accompany this Proposal.

"NOW, THEREFORE: The conditions of this obligation are such that if the Proposal is accepted, the Principal shall, within ten (10) days after the date of receipt of a written notice of Award of Contract, execute a contract in accordance with the Proposal and upon the terms, conditions and prices set forth therein in the form and manner required by the Tampa-Hillsborough County Expressway Authority and execute a sufficient and satisfactory Public Construction Bond, payable to the Tampa-Hillsborough County Expressway Authority and deliver documents which are condition to commencing the work... ". then this obligation to be void; otherwise to be and remain In full force and virtue in law; and the Surety shall, upon failure within the time specified above, immediately pay to the aforesaid Expressway Authority upon Demand the amount thereof in good and lawful money of the United States of America, not as a penalty, but as liquidated damages.

IN TESTIMONY THEREOF, the Principal and Surety have caused these presents to be duly signed and Sealed this_______________day of 20___.

________________________________________
Principal

(Seal)

BY: ________________________________

________________________________________
Surety

(Seal)

BY: ________________________________

________________________________________
Countersigned
CERTIFICATE AND AFFIDAVIT FOR SURETY BOND INSURER

TO: TAMPA-HILLSBOROUGH EXPRESSWAY AUTHORITY
RE: REQUEST FOR PROPOSALS NO. ___________; PROJECT: _______________________
____________________________________________________________________________
____________________________________________________________________________

BIDDER: Name: ________________________________________________________________
Address:  ________________________________________________________________
Telephone: ________________________________________________________________

AMOUNT OF BOND: ____________________________________________________________
SURETY BOND INSURER
Name:  ________________________________________________________________
Address: ________________________________________________________________
Telephone: ________________________________________________________________

Before me, the undersigned authority, personally appeared, __________________________
on this __________ day of ____________, 20__ who hereby certifies that, in accordance with Section 287.0935, Florida Statutes, the insurer named above:

1. Is licensed to do business in the State of Florida;
2. Holds a certificate of authority authorizing it to write surety bonds in Florida;
3. Has twice the minimum surplus and capital required by the Florida Insurance Code at the time the invitation to bid is issued;
4. Is otherwise in compliance with the provisions of the Florida Insurance Code; and
5. Holds a currently valid certificate of authority issued by the United States Department of the Treasury under Section 9304-9308 of Title 31 of the United States Code.

____________________________________
Signature of Officer of Surety Insurer

STATE OF: _________________________________

COUNTY OF: _________________________________

THE FOREGOING INSTRUMENT was sworn to, subscribed and acknowledged before me this ______ day of ____________, 20__ by _______________________, who is personally known to me or _______________________, has produced ______________________ as identification and did take an oath.

(Notary, check appropriate blank; and if obtaining identification, fill in appropriate identification number.)

____________________________________
Notary Public

(Printed Name of Notary)

My Commission Expires: _________________________________

Serial Number, if any)
For Clerk of the Court
Recording Purposes
Return to: Contracts Manager
Tampa Hillsborough Expressway Authority
1104 East Twiggs St., Suite 300
Tampa, FL 33602
BOND NO: _______________________

PERFORMANCE BOND

BY THIS BOND, We, ____________________________________________, a __________ corporation, as Principal, and ____________________________________, a __________ corporation, as Surety, located at ____________________________ are bound to the TAMPA HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY, herein called Owner, in the sum of $___________________, for payment of which we bind ourselves, our heirs, personal representatives, successors, and assigns, jointly and severally.

THE CONDITION OF THIS BOND is that if Principal:

1. Performs the contract dated _________________, 20____ between Principal and Owner for construction of the __________________________________________________________ at the Tampa-Hillsborough County Expressway Authority, Request for Proposals (RFP) Contract No. ____________, at the times and in the manner prescribed in the contract, the contract being made a part of this bond by reference, and

2. Pays Owner all loss, damages including delay damages, including but not limited to liquidated damages, costs, and attorney’s fees, including appellate proceedings, that Owner sustains because of a default by Principal under the contract; and

3. Performs the guarantee of all work and materials furnished under the Contract for the time specified in the Contract for construction and any applicable warranty period, then this bond is void; otherwise it remains in full force.

The Surety, for value received, agrees that any changes, extensions of time, or additions to the Terms of the Contract Documents, and neither compliance nor noncompliance with any formalities connected with the contract or the changes shall not affect Surety’s obligation under this bond. Surety hereby waives notice of any such changes.

Any action instituted by a claimant under this bond for payment must be in accordance with the notice and time limitation provisions in Section 255.05(2), Florida Statutes.

Any changes in or under the contract documents and compliance or noncompliance with any formalities connected with the contract or the changes does not affect Surety’s obligation under this bond.
DATED ON:____________________________, 20______.

Name of Principal (Contractor): ______________________________

By: ______________________________

Name: ______________________________

Title: ______________________________

Address: ______________________________

Telephone No. ________________________

Fax No. ________________________

Name of Surety: ______________________________

By: ______________________________

Attorney in Fact

Name: ______________________________

Title: ______________________________

Address: ______________________________

Telephone No. ________________________

Fax No. ________________________

(Attach "Certificate & Affidavit Form Surety Bond Insurer" and "Power of Attorney" from Surety)

STATE OF _____________________ :
COUNTY OF ____________________ :

THE FOREGOING INSTRUMENT was acknowledged before me this _____ day of ____________________, 20______ by ____________________, who ____ is personally known to me or ____ has produced ______________________________ as identification and did not take an oath.

[Notary, check appropriate blank; and, if obtaining identification, fill in appropriate identification number.]

My Commission Expires: ______________________________

NTARY PUBLIC

(Printed Name of Notary)

(Notary, check appropriate blank; and, if obtaining identification, fill in appropriate identification number.)

This form complies with
Section 255.05, Florida Statutes
CERTIFICATE AND AFFIDAVIT FOR SURETY BOND INSURER

TO: TAMPA HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY (THEA)

RE: __________________________________________________________

PROPOSER:
Name: _________________________________
Address: _________________________________
_________________________________
Telephone: _________________________________

AMOUNT OF BOND: _________________________________

SURETY BOND INSURER:
Name: _________________________________
Address: _________________________________
_________________________________
Telephone: _________________________________

Before me, the undersigned authority, personally appeared, ___________________ on this _____ day of ________ 20____ who hereby certifies that, the insurer named above:
1. Is licensed to do business in the State of Florida;
2. Holds a certificate of authority authorizing it to write surety bonds in Florida;
3. Has twice the minimum surplus and capital required by the Florida Insurance Code at the time the invitation to bid is issued;
4. Is otherwise in compliance with the provisions of the Florida Insurance Code; and,
5. Holds a currently valid certificate of authority issued by the United States Department of the Treasury under Section 9304 to 9308 of Title 31 of the United States Code.

____________________________________
Signature of Officer of Surety Insurer

STATE OF ______________ :

COUNTY OF ____________ :

THE FOREGOING INSTRUMENT was sworn to, subscribed and acknowledged before me this _____ day of _______________________, 20____ by ____________________, who ____ is personally known to me or ____ has produced ______________________________ as identification and did take an oath.

[Notary, check appropriate blank; and, if obtaining identification, fill in appropriate identification number.]_________________________________ _________________________________
Notary Public Printed Name of Notary

My Commission Expires:
_________________________________ (Serial Number, if any)
PAYMENT BOND

BY THIS BOND, We, ________________________________, a __________ corporation, as Principal, and ________________________________, a __________ corporation, as Surety, located at ____________________________ are bound to the TAMPA HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY, herein called Owner, in the sum of $______________, for payment of which we bind ourselves, our heirs, personal representatives, successors, and assigns, jointly and severally.

THE CONDITION OF THIS BOND is that if Principal:

1. Promptly makes payment to all claimants, as defined in Section 233.05(1), Florida Statutes, supplying Principal with labor, materials, or supplies, used directly or indirectly by Principal in the prosecution of the work provided for in the contract dated ______________, 20 _____ between Principal and Owner for construction of _____________________ (RFP No. ___________), the Contract being made a part of this bond by reference; and

2. Pays Owner all loss, damages expenses, costs, and attorney’s fees, including appellate proceedings, that Owner sustains because of a default by Principal under the contract related to payment for such labor, materials, or supplies furnished to the Principal, then this bond is void; otherwise it remains in full force.

Any changes in or under the contract documents and compliance or noncompliance with any formalities connected with the contract or the changes does not affect Surety’s obligation under this bond.

Certain claimants seeking the protection of this Bond must timely comply with the strict requirements set forth in Section 255.05, Florida Statutes, and as otherwise provided by law.
DATED ON:____________________________, 20______.

Name of Principal (Contractor):
__________________________________

By: ______________________________
Name: ______________________________
Title: ______________________________
Address: ____________________________
Telephone No. ________________________
Fax No. ____________________________

By: ______________________________  By: _____________________________
Name: ______________________________ Name: _____________________________
Title: ______________________________ Title: ______________________________
Address: ____________________________ Address: ____________________________
Telephone No. ________________________ Telephone No. ________________________
Fax No. ____________________________

(Attach “Certificate & Affidavit Form Surety Bond Insurer” and
"Power of Attorney" from Surety)

STATE OF _____________________ :  
COUNTY OF ____________________ :

THE FOREGOING INSTRUMENT was acknowledged before me this _____ day of  
_______________________, 20_____ by ____________________, who ____ is personally  
known to me or ____ has produced ______________________________ as identification and did  
ot take an oath. [Notary, check appropriate blank; and, if obtaining identification, fill in appropriate  
identification number.]

My Commission Expires:  
Notary Public
________________________________
(Printed Name of Notary)
________________________________
(Serial Number, if any)

This form complies with  
Section 255.05, Florida Statutes
CERTIFICATE AND AFFIDAVIT FOR SURETY BOND INSURER

TO: TAMPA HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY (THEA)

RE: __________________________________________________________

PROPOSER:
Name: _________________________________
Address: _________________________________
Telephone: _________________________________

AMOUNT OF BOND: _________________________________

SURETY BOND INSURER:
Name: _________________________________
Address: _________________________________
Telephone: _________________________________

Before me, the undersigned authority, personally appeared, ___________________ on this _____ day of ________ 20____ who hereby certifies that, the insurer named above:

1. Is licensed to do business in the State of Florida;
2. Holds a certificate of authority authorizing it to write surety bonds in Florida;
3. Has twice the minimum surplus and capital required by the Florida Insurance Code at the time the invitation to bid is issued;
4. Is otherwise in compliance with the provisions of the Florida Insurance Code; and,
5. Holds a currently valid certificate of authority issued by the United States Department of the Treasury under Section 9304 to 9308 of Title 31 of the United States Code.

____________________________________
Signature of Officer of Surety Insurer

STATE OF ______________ :

COUNTY OF ____________ :

THE FOREGOING INSTRUMENT was sworn to, subscribed and acknowledged before me this _____ day of _______________________, 20____ by ____________________, who is personally known to me or has produced ______________________________ as identification and did take an oath.

[Notary, check appropriate blank; and, if obtaining identification, fill in appropriate identification number.]

Notary Public      Printed Name of Notary

My Commission Expires:

(Serial Number, if any)
Exempt Documents being requested or received are included in those exempt from public disclosure as provided by Section 119.071(3)(b), Florida Statutes (Attached). Security System Plans being requested are confidential and exempt as provided by Section 119.071(3)(a), Florida Statutes (Attached). The Exempt Documents relate to work being performed for or required by the Tampa-Hillsborough County Expressway Authority (THEA) or work related to the Authority’s structures. The following information is being provided as a record of this request or receipt, the Proposer’s certifications herein, and distribution of the Exempt Documents or Security System Plans.

Completion of this form and a signature is required before information will be released (* Indicates Required to Obtain Security System Plans):

A. Entity Requesting/Receiving Documents: (Provide Full Name of Entity)

   Architect: ____________________________________________________________

   Engineer: _____________________________________________________________

   Contractor: ___________________________________________________________

   Other: _______________________________________________________________

B. Name of person receiving Exempt Documents / Security Plans: (Printed): ________________________________

   Title: ________________________________________________________________

   Signature: __________________________ Date: _____________________________

   Email: __________________________________ FL PE License No. (if applicable): ________________________________

   Drivers License or photo identification number of recipient: ________________________________

C. Name of Entity intending to Propose on RFP O-0622: ___________________________________________________________________

D. Relationship of Person receiving Exempt Documents if not employee of Entity intending to Propose on RFP: ___________________________________________________________________

E. Reason for Request/Intended Use: ______________________________________________________________________________

F. RECIPIENT CERTIFICATION: I, personally, and as authorized representative of the above Proposer entity, fully understand (check the applicable certification block)

☐ the exempt nature of the Exempt Documents I am receiving and agree to maintain the exempt status of this information in accordance with Florida law.

☐ the confidential and exempt nature of the Security System Plans I am receiving and agree to maintain the confidential and exempt status of these Security System Plans in accordance with Florida law.

G. THEA Employee Providing Exempt Documents or Security Plans:

   THEA Office: ___________________________ Employee Name: ___________________________

H. Signature of THEA Employee Authorizing Distribution: __________________________ Date: __________________________

   Provider’s Signature (if different than person authorizing distribution): __________________________

I. Method of delivery: Pick-up by Requestor

   Date Provided: __________________________

EXHIBIT L
TAMPA-HILLSBOROUGH COUNTY EXPRESSWAY AUTHORITY
EXEMPT DOCUMENTS / SECURITY SYSTEM PLAN
DISTRIBUTION FORM
THEA MODIFIED 050-020-26 STATE
HIGHWAY ENGINEER
07/22 Page 1 of 2
EXEMPT DOCUMENTS - Section 119.071(3)(b), Florida Statutes, provides:
Building plans, blueprints, schematic drawings, and diagrams, including draft, preliminary, and final formats, which depict the internal layout and structural elements of a building, arena, stadium, water treatment facility, or other structure owned or operated by an agency are exempt from s. 119.07(1) and s.24(a), Art. I of the State Constitution. This exemption applies to building plans, blueprints, schematic drawings, and diagrams, including draft, preliminary, and final formats, which depict the internal layout and structural elements of a building, arena, stadium, water treatment facility, or other structure owned or operated by an agency before, on, or after the effective date of this act. Information made exempt by this paragraph may be disclosed to another governmental entity if disclosure is necessary for the receiving entity to perform its duties and responsibilities; to a licensed architect, engineer, or contractor who is performing work on or related to the building, arena, stadium, water treatment facility, or other structure owned or operated by an agency; or upon a showing of good cause before a court of competent jurisdiction. The entities or persons receiving such information shall maintain the exempt status of the information.

SECURITY SYSTEM PLAN - Section 119.071(3)(a), Florida Statutes, provides: 
As used in this paragraph, the term “security system plan” includes all Records, information, photographs, audio and visual presentations, schematic diagrams, surveys, recommendations, or consultations or portions thereof relating directly to the physical security of the facility or revealing security systems; Threat assessments conducted by any agency or any private entity; Threat response plans; Emergency evacuation plans; Sheltering arrangements; or Manuals for security personnel, emergency equipment, or security training. A security system plan or portion thereof for: Any property owned by or leased to the state or any of its political subdivisions; or Any privately owned or leased property held by an agency is confidential and exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution. This exemption is remedial in nature and it is the intent of the Legislature that this exemption apply to security system plans held by an agency before, on, or after the effective date of this paragraph. Information made confidential and exempt by this paragraph may be disclosed by the custodian of public records to The property owner or leaseholder; or Another state or federal agency to prevent, detect, guard against, respond to, investigate, or manage the consequences of any attempted or actual act of terrorism, or to prosecute those persons who are responsible for such attempts or acts.