

Meeting Date: February 5, 2008

Department:

Submitted By: Department of Airports

Submitted For:

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve:

- (A)** A contract with Hi-Lite Markings, Inc. in the amount of \$648,618.50 for the Airfield Marking Improvements Project at Palm Beach International Airport (PBI) and North Palm Beach County General Aviation Airport (F45); and
- (B)** A Budget Transfer of \$248,700 in the Airports' Improvement and Development Fund to provide budget for Airfield Marking Improvements, including a transfer from reserves.

Summary: This project was advertised utilizing the competitive bid process. On November 15, 2007 three (3) bids were received for the Airfield Marking Improvements Project at PBI and F45. Hi-Lite Markings, Inc. has been identified as a responsible/responsive bidder in the amount of \$648,618.50 which includes the base bid and alternates 1, 2, 3 and 4. The Small Business Enterprise (SBE) Goal for this project was established at 15.00%. Hi-Lite Markings, Inc. bid contained 12.80% SBE participation. **Countywide (JCM)**

Background and Justification: In an effort to meet revised Federal guidelines related to airfield markings, the Department of Airports has executed the competitive bid process for Airfield Marking Improvements at PBI and F45. This project consists of the removal of existing markings at both airports, as well as the addition of enhanced taxiway centerline lead-in line markings and extended runway hold position markings per the revised standards in Federal Aviation Administration (FAA) Advisory Circular (AC) 150/5340-1J.

Attachments:

1. Three (3) Original Contracts
2. Bid Tabulation/Engineers and SBE Recommendation
3. Budget Transfer

Recommended By

Department Director

Date

Approved By:

County Administrator

Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2008	2009	2010	2011	2012
Capital Expenditures	\$ 648,619				
Operating Costs					
External Revenues (PFC's)					
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	648,619				
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included In Current Budget? Yes _____ No X
 Budget Account No.: Fund _____ Department _____ Unit _____ Object _____
 Reporting Category _____

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Expenditures are funded from Airport Revenues.

C. Departmental Fiscal Review: *Michael Sumner*

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

Colleen... 1-23-08
 OFMB
 CN 1/14/08

Don J. Javet 1/29/08
 Contract Dev. and Control
 2/26/08 1/24/08

B. Legal Sufficiency:

James... 1/31/08
 Assistant County Attorney

This Contract complies with our contract review requirements.

C. Other Department Review:

 Department Director

CONTRACT

THIS CONTRACT, made and entered on _____, between **PALM BEACH COUNTY**, a political subdivision of the State of Florida, hereinafter referred to as the "OWNER" and **Hi-Lite Markings, Inc.** hereinafter referred to as the "CONTRACTOR".

WITNESSETH:

That the said Contractor having been awarded the contract for:

**Airfield Marking Improvements at
Palm Beach International Airport and
North Palm Beach County General Aviation Airport
PALM BEACH COUNTY PROJECT No. PBNC 07-10**

in accordance with the Bid therefore and for and in consideration of the promises and of the covenants and agreements, and of the payments herein specified, to be made and performed by the Contractor and the Owner, the Contractor hereby covenants and agrees to and with the Owner to undertake and execute all of the said named work, in a good, substantial and workmanlike manner, and to furnish all the materials and all the tools and labor necessary to properly perform and complete the work ready for use, in strict accordance with all the provisions of the Contract including the following documents described below which are made a part hereof and incorporated herein by reference:

- Invitation to Bid and Instructions to Bidders dated October 2007.
- Completed Bond, Surety and Insurance Forms, dated _____.
- Specifications, dated October 2007.
- General Conditions, dated October 2007.
- Addendum No. 1, dated November 9, 2007.
- Drawings, dated October 2007.
- Completed Bid and Attachments, dated November 15, 2007.

and to accept as full compensation for the satisfactory performance of this Contract the sum of **Six Hundred Forty Eight Thousand Six Hundred Eighteen and 50/100 Dollars (\$ 648,618.50)** which includes the Base Bid plus Additives 1 through 4 for the **Airfield Marking Improvements** Project at **Palm Beach International Airport and North Palm Beach County General Aviation Airport**.

The prices named in the Bid are for the completed work, and include the furnishing of all materials and all labor, tools, and appliances and all expense, direct or indirect, connected with the proper execution of the work and of maintaining the same until it is accepted by the Board of County Commissioners.

Airfield Marking Improvements
Palm Beach International Airport and North Palm Beach County General
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Contract Documents
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Time/Liquidated Damages

Time is of the essence. The Contractor shall commence the work to be performed under this Contract on the date set by the Owner in the written notice to proceed, continue the work with due diligence and shall complete the entire work per Attachment No. 2 to the Bid Form. Further, in the event interim milestone completion dates are established in Attachment No. 2 of the Bid Form for separable portions of the work, the Contractor agrees to complete said separable portions of the work in accordance with said milestone dates.

In case of failure on the part of the Contractor to complete the work within the time(s) specified in the Contract, or within such additional time(s) as may be granted by formal action of the Board of County Commissioners or fails to prosecute the work, or any separable part thereof, with such diligence as will insure its completion within the time(s) specified in the Contract or any extensions thereof, Owner will suffer damage, the amount of which is difficult, if not impossible to ascertain. Therefore, the Contractor shall pay to the Owner, as liquidated damages, the amounts indicated in the Milestone and Damages Data (Attachment #2 of the Bid Form) for each calendar day of delay that actual completion extends beyond the time limits specified in said Attachment until such reasonable time as may be required for final completion of work. In no way shall costs for liquidated damages be construed as a penalty on the Contractor.

Liquidated damages due to the Owner may be deducted from payments due to the Contractor, or may be collected from the Contractor or its surety or sureties. These provisions for liquidated damages shall not prevent the Owner, in case of the Contractor's default, from terminating the Contractor's right to proceed as provided in General Provision section 80-09 "Default and Termination of Contract".

Utilization of Small Business Enterprises

It is the policy of the Board of County Commissioners of Palm Beach County, Florida, that SBE-M/WBE(s) have the maximum practical opportunity to participate in the competitive process of supplying goods, services and construction to the County. To that end the Board of County Commissioners established Ordinance No. 2002-064, which sets forth the County's requirements for the SBE-M/WBE program, and are incorporated in this solicitation. Compliance with the requirements contained in this section shall result in a bidder being deemed responsive to SBE-M/WBE requirements. The provisions of this ordinance are applicable to this solicitation, and shall have precedence over the provisions of this solicitation in the event of a conflict.

Convicted Vendor List

As provided in F.S. 287.132-133, by entering into this contract or performing any work in furtherance hereof, the contractor certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the Convicted Vendor List maintained by the State of Florida Department of Management Services within the 36 months immediately preceding the date hereof. This notice is required by F.S. 287.133 (3) (a).

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida, has made and executed this Contract on behalf of the said Owner and caused the seal of the said Owner to be affixed hereto, and the Contractor has hereunto set his hand and seal the day and year above written.

ATTEST: SHARON R. BOCK,
Clerk & Comptroller

COUNTY: PALM BEACH COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS


BY: _____
Deputy Clerk

BY: _____
Addie L. Greene, Chairperson

(SEAL)

ATTEST: Kelly J. Spinner CONTRACTOR Hi-Lite Markings, Inc.

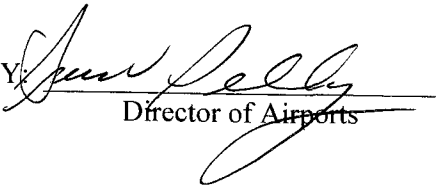
BY: 
Secretary

BY: 
Richard C. McNeely III
TITLE: Vice President/General Manager

(CORPORATE SEAL)

APPROVED TO AS TO TERMS AND
CONDITIONS

APPROVED AS TO FORM AND LEGAL
SUFFICIENCY

BY: 
Director of Airports

BY: _____
County Attorney

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PUBLIC CONSTRUCTION BOND

BOND NUMBER: PRF7597029

BOND AMOUNT: Six Hundred Forty Eight Thousand Six Hundred Eighteen and 50/100
(\$648,618.50)

CONTRACT AMOUNT: Six Hundred Forty Eight Thousand Six Hundred Eighteen and 50/100
(\$648,618.50)

CONTRACTOR'S NAME: Hi-Lite Markings, Inc.

CONTRACTOR'S ADDRESS: 18249 Hi-Lite Drive
Adams Center, NY 13606

CONTRACTOR'S PHONE: 315-583-6111

SURETY COMPANY: Fidelity and Deposit Company of Maryland

SURETY'S ADDRESS: 3910 Keswick Road
Baltimore, MD. 21211

OWNER'S NAME: PALM BEACH COUNTY

OWNER'S ADDRESS: 50 South Military Trail
West Palm Beach, FL 33406

OWNER'S PHONE: _____

DESCRIPTION OF WORK: **At Palm Beach International Airport: the project consists of approximately 100,000 SF of enhanced lead-in and hold bar marking, with associated existing marking removal. The project requires night work and strict phasing, safety and security requirements, including security badging.**

At North Palm County General Aviation Airport: the project consists of approximately 100,000 SF of runway markings and associated marking removal. The project requires strict phasing, safety and security requirements, including security badging.

PROJECT LOCATION: **Palm Beach International Airport and North Palm Beach County General Aviation Airport, Palm Beach County, Florida**

LEGAL DESCRIPTION: Project No. PBNC 07-10 Airfield Marking Improvements
at Palm Beach International Airport and North Palm
Beach County General Aviation Airport

This Bond is issued in favor of the County conditioned on the full and faithful performance of the Contract.

Airfield Marking Improvements
Palm Beach International Airport and North Palm Beach County General
Aviation Airport

Contract Documents
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KNOW ALL MEN BY THESE PRESENTS: that Contractor and Surety, are held and firmly bound unto

Palm Beach County Board of County Commissioners
301 N. Olive Avenue
West Palm Beach, Florida 33401

as Obligee, herein called County, for the use and benefit of claimant as herein below defined, in the amount of **Six Hundred Forty Eight Thousand Six Hundred Eighteen and 50/100 Dollars (\$ 648,618.50) which includes the Base Bid plus Additives 1 through 4** for the payment whereof Principal and Surety bind themselves, their heirs, personal representatives, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS,

Principal has by written agreement dated _____, 200_, entered into a contract with the County for

Project Name: **Airfield Marking Improvements**

Project No.: **PBNC 07-10**

Project Description: **At Palm Beach International Airport: the project consists of approximately 100,000 SF of enhanced lead-in and hold bar marking, with associated existing marking removal. The project requires night work and strict phasing, safety and security requirements, including security badging.**

At North Palm County General Aviation Airport: the project consists of approximately 100,000 SF of runway markings and associated marking removal. The project requires strict phasing, safety and security requirements, including security badging.

Project Location: **Palm Beach International Airport and North Palm Beach County General Aviation Airport**

in accordance with Design Criteria Drawings and Specifications prepared by

THE LPA GROUP INCORPORATED
615 Crescent Executive Court, Suite 200
Lake Mary, Florida 32746
407-306-0200 | 407-306-0460 (FAX)

which contract is by reference made a part hereof in its entirety, and is hereinafter referred to as the Contract.

THE CONDITION OF THIS BOND is that if Principal:

I. Performs the contract dated _____, 200_ between Principal and County for the design and construction of **Airfield Marking Improvements at Palm Beach International Airport and North Palm Beach County General Aviation Airport**, the contract being made a part of this bond by reference, at the times and in the manner prescribed in the contract; and

Airfield Marking Improvements
Palm Beach International Airport and North Palm Beach County General
Aviation Airport

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2. Promptly makes payments to all claimants, as defined in Section 255.05, 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; and
3. Pays County all losses, damages (including liquidated damages), expenses, costs, and attorneys' fees, including appellate proceedings, that County sustains because of a default by Principal under the contract; and
4. Performs the guarantee of all work and materials furnished under the contract for the time specified in the contract, then this bond is void; otherwise it remains in full force.
5. 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 and Surety waives notice of such changes.
6. The amount of this bond shall be reduced by and to the extent of any payment or payments made in good faith hereunder, inclusive of the payment by Surety of construction liens which may be filed of record against said improvement, whether or not claim for the amount of such lien be presented under and against the bond.
7. Principal and Surety expressly acknowledge that any and all provisions relating to consequential, delay and liquidated damages contained in the contract are expressly covered by and made a part of this Performance, Labor and Material Payment Bond. Principal and Surety acknowledge that any such provisions lie within their obligations and within the policy coverages and limitations of this instrument.
8. Section 255.05, Florida Statutes, as amended, together with all notice and time provisions contained therein, is incorporated herein, by reference, in its entirety. 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. This instrument regardless of its form, shall be construed and deemed a statutory bond issued in accordance with Section 255.05, Florida Statutes.
9. Any action brought under this instrument shall be brought in the state court of competent jurisdiction in Palm Beach County and not elsewhere.

Michael D. Vanden
Witness

[Signature]
Witness

x Richard C. McNeely III
Principal (Seal)

Richard C. McNeely III
Vice President/General Manager
Title

Fidelity and Deposit Company of Maryland

Surety (Seal)
Timothy J. Reardon
Timothy J. Reardon, Attorney-in-Fact
Title

Airfield Marking Improvements
Palm Beach International Airport and North Palm Beach County General
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Power of Attorney
FIDELITY AND DEPOSIT COMPANY OF MARYLAND
HOME OFFICE: P.O. BOX 1227, BALTIMORE, MD 21203-1227

Know ALL MEN BY THESE PRESENTS: That the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, a corporation of the State of Maryland, by W. B. WALBRECHER, Vice-President, and T. E. SMITH, Assistant Secretary, in pursuance of authority granted by Article VI, Section 2, of the By-Laws of said Company, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, does hereby nominate, constitute and appoint Richard C. Howland, Joseph J. LaClair, Carol A. Spink, Melissa J. Good, Timothy J. Reardon and Walter J. Hammond, all of Watertown, New York EACH its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, and as its act and deed: any and all bonds and undertakings and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its office in Baltimore, Md., in their own proper persons. This power of attorney revokes that issued on behalf of Richard C. Howland, Kathleen A. Simser, Susan H. O'Donnell, Melissa J. Good and David A. Burnett, dated January 28, 1997.

The said Assistant Secretary does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article VI, Section 2, of the By-Laws of said Company, and is now in force.

IN WITNESS WHEREOF, the said Vice-President and Assistant Secretary have hereunto subscribed their names and affixed the Corporate Seal of the said FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 18th day of May, A.D. 1999.

ATTEST:

FIDELITY AND DEPOSIT COMPANY OF MARYLAND



T. E. Smith

Assistant Secretary

By:

W. B. Walbrecher

Vice-President

State of Maryland } ss:
County of Baltimore }

On this 18th day of May, A.D. 1999, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, came W. B. Walbrecher, Vice-President and T. E. Smith, Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and they each acknowledged the execution of the same, and being by me duly sworn, severally and each for himself depose and saith, that they are the said officers of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and that the said Corporate Seal and their signatures as such officers were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.



Carol J. Fader

Notary Public

My Commission Expires: August 1, 2000

EXTRACT FROM BY-LAWS OF FIDELITY AND DEPOSIT COMPANY OF MARYLAND

"Article VI, Section 2. The Chairman of the Board, or the President, or any Executive Vice-President, or any of the Senior Vice-Presidents or Vice-Presidents specially authorized so to do by the Board of Directors or by the Executive Committee, shall have power, by and with the concurrence of the Secretary or any one of the Assistant Secretaries, to appoint Resident Vice-Presidents, Assistant Vice-Presidents and Attorneys-in-Fact as the business of the Company may require, or to authorize any person or persons to execute on behalf of the Company any bonds, undertaking, recognizances, stipulations, policies, contracts, agreements, deeds, and releases and assignments of judgements, decrees, mortgages and instruments in the nature of mortgages,...and to affix the seal of the Company thereto."

CERTIFICATE

I, the undersigned, Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the original Power of Attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the Vice-President who executed the said Power of Attorney was one of the additional Vice-Presidents specially authorized by the Board of Directors to appoint any Attorney-in-Fact as provided in Article VI, Section 2, of the By-Laws of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed."

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said Company, this

_____ day of _____, _____

J. D. Matis

Assistant Secretary

PRINCIPAL'S ACKNOWLEDGMENT
INDIVIDUAL VERIFICATION

State of _____
County of _____

On this _____ day of _____, in the year 20____, before me personally came _____ to me known, and known to me to be the person (s) who is (are) described in and who executed the foregoing instrument, and acknowledges to me that he (they) executed the same.

(Notary Public)

LIMITED LIABILITY COMPANY VERIFICATION

State of _____
County of _____

On this _____ day of _____, in the year 20____, before me personally appeared _____, to me known and known to me to be the person who executed the foregoing Agreement, and who being by me duly sworn, deposes and says that (s) he is the _____ of _____, A Limited Liability Company, and that (s) he executed the foregoing Agreement as the act and deed of the said Limited Liability Company.

(Notary Public)

CORPORATE VERIFICATION

State of New York
County of Jefferson

On this 2nd day of January, in the year of 2008, before me personally came Richard C. McNeely III to me known, who, being by me duly sworn, deposes and says that (s) he resides in the City of Watertown, NY that (s) he is the Vice President/COO of the Hi-Lite Markings, Inc. the corporation described in and which executed the foregoing instrument, that (s) he knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by the order of the Board of Directors of said corporation, and that (s) he signed his/her name thereto by like order.

(Notary Public)

SURETY ACKNOWLEDGMENT

State of New York
County of Onondaga

DENNIS M. HAEFNER SR.
Notary Public, State of New York
Registration No. 01HA5061100
Qualified in Jefferson County
Commission Expires Jun. 30, 2010

On this 31st day of DECEMBER, in the year 2008, before me personally came Timothy J. Reardon to me know, who, being by me duly sworn, did depose and say that (s) he resides in Watertown, NY; that (s) he is the Attorney-in-Fact of the Fidelity & Deposit Company of Maryland, the corporation described in and which executed the attached instrument; that (s) he knows the corporate seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; and that it was so affixed by order of the Board of Directors of the said corporation; and that (s) signed his/her name thereto by like order.

(Notary Public)

Carol A. Spink
Notary Public, State of New York
No. 01SP6081169
Qualified in Jefferson County
Commission Expires September 30, 2009



FIDELITY AND DEPOSIT COMPANY

OF MARYLAND
3910 KESWICK ROAD, BALTIMORE, MD 21203

Statement of Financial Condition As Of December 31, 2006

ASSETS

Bonds	\$ 150,563,710
Stocks	39,367,826
Cash and Short Term Investments	38,939,878
Reinsurance Recoverable	8,609,769
Other Accounts Receivable	25,762,452
TOTAL ADMITTED ASSETS	<u>\$ 263,243,635</u>

LIABILITIES, SURPLUS AND OTHER FUNDS

Reserve for Taxes and Expenses	\$ 625,582
Ceded Reinsurance Premiums Payable	32,539,586
Securities Lending Collateral Liability	35,322,207
TOTAL LIABILITIES	<u>\$ 68,487,375</u>
Capital Stock, Paid Up	\$ 5,000,000
Surplus	189,756,260
Surplus as regards Policyholders	194,756,260
TOTAL	<u>\$ 263,243,635</u>

Securities carried at \$33,209,464 in the above statement are deposited as required by law.

Securities carried on the basis prescribed by the National Association of Insurance Commissioners. On the basis of December 31, 2006 market quotations for all bonds and stocks owned, the Company's total admitted assets would be \$261,193,375 and surplus as regards policyholders \$192,706,000.

I, DAVID A. BOWERS, Corporate Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing statement is a correct exhibit of the assets and liabilities of the said Company on the 31st day of December, 2006.



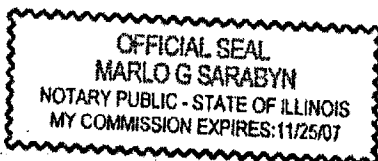
Corporate Secretary

State of Illinois }
City of Schaumburg } SS:

Subscribed and sworn to, before me, a Notary Public of the State of Illinois, in the City of Schaumburg, this 20th day of March, 2007.



Notary Public



Florida Hurricane Catastrophe Fund (FHCF)

Emergency Assessment - 2005 Hurricanes



The Florida legislature created the FHCF in order to provide capacity to the personal and commercial residential property insurance market. In accordance with Florida law, deficits of the FHCF are funded through emergency assessments on direct premiums for certain property and casualty lines of business in the state of Florida.

As a result of the 2005 hurricane season, the FHCF anticipates a deficit of approximately \$1.2 billion. In order to fund this deficit, policies effective on or after January 1, 2007 are subject to an emergency assessment of 1% of premium for the following lines of business:

Fire, Allied Lines, Multi-Peril Crop, Farmowners; Multi-Peril, Homeowners Multi-Peril, Commercial Multi-Peril (liability and non-liability), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Earthquake, Other Liability, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, and Credit.

The FHCF emergency assessment applicable to this policy is not subject to premium taxes, fees, or commissions.

CORPORATE CERTIFICATE

PBC PROJECT NUMBER: PBNC 07-10

DATE: 12/10/2007

The undersigned hereby certifies that the following are true and correct statements:

1. That he/she is the Secretary of Hi-Lite Markings, Inc. Corporation, a corporation organized and existing in good standing under the laws of the State of New York, hereinafter referred to as the "Corporation", and that the following Resolutions are true and correct copies of certain Resolutions adopted by the Board of Directors of the Corporation as of the 12th day of April, 2004 in accordance with the laws of the State of the State of Incorporation of the Corporation, the Articles of Incorporation and the By-laws of the Corporation:

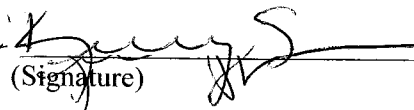
RESOLVED, that the Corporation shall enter into that certain Agreement between Palm Beach County, a political subdivision of the State of Florida and the Corporation, a copy of which is attached hereto, and be it

FURTHER RESOLVED, that Richard C. McNeely III the Vice President/General Manager of the Corporation, is hereby authorized and instructed to execute such Agreement and such other instruments as may be necessary and appropriate for the Corporation to fulfill its obligations under the Agreement.

2. That the foregoing resolutions have not been modified, amended, rescinded, revoked or otherwise changed and remain in full force and effect as of the date hereof.

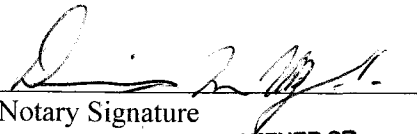
3. That the Corporation is in good standing under the laws of the State of Florida or its State of Incorporation if other, and has qualified, if legally required, to do business in the State of Florida and has the full power and authority to enter into such Agreement.

IN WITNESS WHEREOF, the undersigned has set his hand and affixed the Corporate Seal of the Corporation the 10th day of December, 2007.


(Signature)
Kelly J. Spinner
(Print Signatory's Name)
It's Secretary

(CORPORATE SEAL)

SWORN TO AND SUBSCRIBED before me this 2nd day of January, 2008 by the Secretary of the aforesaid corporation, who is personally known to me OR who produced _____ as identification and who did _____ take an oath.


Notary Signature
DENNIS M. HAEFNER SR.
Notary Public, State of New York
Registration No. 01HA506110U
Commission Expires Jun. 30, 2010

Print Notary Name

NOTARY PUBLIC

~~State of Florida at Large~~

State of New York

My Commission Expires:

FORM OF GUARANTEE

GUARANTEE FOR _____

We hereby, the undersigned, guarantee that the **Airfield Marking Improvements at Palm Beach International Airport and North Palm Beach County General Aviation Airport**, Palm Beach County, Florida, which we have constructed and bonded, has been done in accordance with the plans and specifications; that the work constructed will fulfill the requirements of the guaranties included in the Contract Documents. We agree to repair or replace any or all of the work, together with any other adjacent work which may be damaged in so doing, that may prove to be defective in the workmanship or materials within a period of **one year** from the date of issuance to us of the Notice of Substantial Completion of the above named work by the County of Palm Beach, State of Florida, without any expense whatsoever to said County of Palm Beach, ordinary wear and tear and unusual abuse or neglect excepted.

In the event of our failure to comply with the above-mentioned conditions within five (5) calendar days after being notified in writing by the Board of County Commissioners, Palm Beach County, Florida, we, collectively or separately, do hereby authorize Palm Beach County to proceed to have said defects repaired and made good at our expense and we will honor and pay the costs and charges therefore upon demand. When correction work is started, it shall be carried through to completion.

DATED _____
(Notice of Substantial Completion Date)

SEAL AND NOTARIAL ACKNOWLEDGMENT OF SURETY

(Seal)

CONTRACTOR

COUNTERSIGNED RESIDENT
AGENT IN FLORIDA:

By: _____
(Signature)

(Seal) Agent

SURETY

By: _____

By: _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this _____ day of _____, 200_ by _____ who is personally known to me or who has produced _____ as identification and who did (did not) take an oath.

Notary Public, State of Florida

My Commission Expires: _____

Commission Number: _____

Airfield Marking Improvements
Palm Beach International Airport and North Palm Beach County General
Aviation Airport

Contract Documents
October 2007



STATEMENT OF INTENT FOR A ONE YEAR GUARANTEE BOND UPON COMPLETION

January 9, 2008

TO: Palm Beach County
50 South Military Trail, Suite 110
West Palm Beach, FL 33406

For: Hi-Lite Markings, Inc. Performance and Payment Bond No. PRF7597029 / Project NO. PBNC07-10
Airfield Marking Improvements at Palm Beach International Airport and North Palm Beach County
General Aviation Airport

Be advised that Fidelity and Deposit Company of Maryland intends to issue a one year guarantee for the above mentioned performance and payment bond for all work and materials furnished under the contract.

This guarantee bond is to take effect upon the completion date of the contract.

Any arrangements for the bond required by the contract is a matter between the Contractor and ourselves.

We are on the Federal Register, Department of the Treasury, Fiscal Service, as a company holding a Certificate of Authority as an acceptable Surety on federal bonds in the State of Florida.

FIDELITY AND DEPOSIT COMPANY OF MARYLAND

BY:  (SEAL)
John A. Sroka, Attorney-in-Fact

Fidelity and Deposit Company of Maryland
3910 Keswick Rd.
Baltimore, MD 21211

Power of Attorney FIDELITY AND DEPOSIT COMPANY OF MARYLAND

KNOW ALL MEN BY THESE PRESENTS: That the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, a corporation of the State of Maryland, by THEODORE G. MARTINEZ, Vice President, and GREGORY E. MURRAY, Assistant Secretary, in pursuance of authority granted by Article VI, Section 2, of the By-Laws of said Company, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, does hereby nominate, constitute and appoint Charles J. LACOMB, Robert J. RAYO, Linda J. PROVO, Corinne E. YOUSEY and John A. SROKA, all of Syracuse, New York, EACH its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed, any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its office in Baltimore, Md., in their own proper persons. This power of attorney revokes that issued on behalf of Victor A. D'SERLE, Charles J. LACOMB, Robert J. RAYO, Linda J. PROVO, Patricia G. CORWIN, Corinne E. YOUSEY, dated March 12, 2007.

The said Assistant Secretary does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article VI, Section 2, of the By-Laws of said Company, and is now in force.

IN WITNESS WHEREOF, the said Vice-President and Assistant Secretary have herunto subscribed their names and affixed the Corporate Seal of the said FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 10th day of September, A.D. 2007.

ATTEST:

FIDELITY AND DEPOSIT COMPANY OF MARYLAND



Gregory E. Murray

Theodore G. Martinez

By:

Gregory E. Murray Assistant Secretary

Theodore G. Martinez

State of Maryland } ss:
City of Baltimore }

On this 10th day of September, A.D. 2007, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, came THEODORE G. MARTINEZ, Vice President, and GREGORY E. MURRAY, Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and they each acknowledged the execution of the same, and being by me duly sworn, severally and each for himself depose and saith, that they are the said officers of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and that the said Corporate Seal and their signatures as such officers were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.



Dennis R. Hayden

Dennis R. Hayden

Notary Public

My Commission Expires: February 1, 2009

EXTRACT FROM BY-LAWS OF FIDELITY AND DEPOSIT COMPANY OF MARYLAND

"Article VI, Section 2. The Chairman of the Board, or the President, or any Executive Vice-President, or any of the Senior Vice-Presidents or Vice-Presidents specially authorized so to do by the Board of Directors or by the Executive Committee, shall have power, by and with the concurrence of the Secretary or any one of the Assistant Secretaries, to appoint Resident Vice-Presidents, Assistant Vice-Presidents and Attorneys-in-Fact as the business of the Company may require, or to authorize any person or persons to execute on behalf of the Company any bonds, undertaking, recognizances, stipulations, policies, contracts, agreements, deeds, and releases and assignments of judgements, decrees, mortgages and instruments in the nature of mortgages,....and to affix the seal of the Company thereto."

CERTIFICATE

I, the undersigned, Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that the Vice-President who executed the said Power of Attorney was one of the additional Vice-Presidents specially authorized by the Board of Directors to appoint any Attorney-in-Fact as provided in Article VI, Section 2, of the By-Laws of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed."

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said Company,

this 9th day of January, 2008

Liu D. Baur

Assistant Secretary

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee for prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the report entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organization level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number, the contract, grant, or loan award number, the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal official. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimate to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="checked" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="checked" type="checkbox"/> b. initial award <input type="checkbox"/> c. post award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="checked" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Hi-Lite Markings, Inc. 18249 Hi-Lite Drive Adams Center, NY 13606 Congressional District, if known:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name Address of Prime: N/A Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description CFDA Number, if applicable:	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ 648,618.50	
10. a. Name and Address of Lobbying Entity (if individual, last name, first name, MI) No Lobbying Activities	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI)	
(Attach Continuation Sheet(s) SF-LLL-A, if necessary)		
11. Amount of Payment (check all that apply): - \$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned	13. Type of Payment (check all that apply): <input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other, specify:	
12. Form of Payment (check all that apply): <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind: specify: nature _____ value _____		
14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment indicated in Item 11: (attach Continuation Sheet(s) SF-LLL-A, if necessary)		
15. Continuation Sheet(s) SF-LLL-A attached: _____ Yes _____ No		
16. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Richard C. McNeely III</u> Print Name: <u>Richard C. McNeely III</u> Title: <u>Vice President/General Manager</u> Telephone No: <u>315-583-6111</u> Date: <u>1/2/2008</u>	
FEDERAL USE ONLY	Authorized for Local Reproduction Standard Form LLL	

DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET

0348-0046

Reporting Entity: _____ Page _____ of _____

Authorized for Local Reproduction

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 12/14/07	
PRODUCER Cool Insuring Agency Inc 784 Troy Schenectady Road Latham, NY 12110 518 783-2665		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Hi-Lite Markings, Inc. 18249 Hi-Lite Dr. Adams Center, NY 13606			
		INSURERS AFFORDING COVERAGE	NAIC #
		INSURER A: Charter Oak Fire Insurance Co	25615
		INSURER B: Travelers Property Cas Co of America	25674
		INSURER C: First Rehab Ins Co of America	
		INSURER D:	
		INSURER E:	

COVERAGES							
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY	DTCO656X5833COF07	09/01/07	09/01/08	EACH OCCURRENCE	\$1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$5,000	
	<input checked="" type="checkbox"/> PD Ded:2,500				PERSONAL & ADV INJURY	\$1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$2,000,000	
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$2,000,000	
B	AUTOMOBILE LIABILITY	DT8810656X5833TIL0	09/01/07	09/01/08	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$	
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$	
	<input checked="" type="checkbox"/> HIRED AUTOS						
<input checked="" type="checkbox"/> NON-OWNED AUTOS							
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$	
					AUTO ONLY: AGG	\$	
B	EXCESS/UMBRELLA LIABILITY	DTSMCUP924K0980TIL	09/01/07	09/01/08	EACH OCCURRENCE	\$9,000,000	
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$9,000,000	
	<input type="checkbox"/> DEDUCTIBLE					\$	
	<input checked="" type="checkbox"/> RETENTION \$ 10000					\$	
						\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below		TO BE ISSUED SEPARATELY			WC STATUTORY LIMITS	OTH-ER	
					E.L. EACH ACCIDENT	\$	
					E.L. DISEASE - EA EMPLOYEE	\$	
					E.L. DISEASE - POLICY LIMIT	\$	
C	OTHER Disability	D81292	04/01/07	Continuous	Statutory		
A	Inland Marine	QT6605829C346COF07	09/01/07	09/01/08			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
Project: PBNC 07-10, Airfield Marking Improvements at Palm Beach International Airport and North Palm Beach County General Aviation Airport Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents are added to (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County c/o Department of Airports 846 Palm Beach International Airports West Palm Beach, FL 33406-1470	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE <i>Michael J. Grass</i>

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

DESCRIPTIONS (Continued from Page 1)

the general liability coverage as additional insureds on a primary and noncontributing basis for all policies for the above project. A Waiver of Subrogation applies

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD
**CERTIFICATE OF PARTICIPATION IN WORKERS' COMPENSATION
GROUP SELF-INSURANCE**

1a. Legal Name and Address of Business Participating in Group Self-Insurance (Use Street Address Only) Hi Lite Markings, Inc. 18249 Hi-Lite Dr. PO Box 460 Adams Center, NY 13606	1d. Business Telephone Number of Business referenced in box "1a" 315- 583-6111 1e. NYS Unemployment Insurance Employer Registration Number of Business referenced in box "1a" 3199998
1b. Effective Date of Membership in the Group 09/01/07 Certificate Period: 01/01/08 to 01/01/09 Certificate Number: 004000351967108	
1c. The Proprietor, Partners or Executive Officers are <input checked="" type="checkbox"/> included (Only check box if all partners/officers included) <input type="checkbox"/> all excluded or certain partners/officers excluded	1f. Federal Employer Identification Number of Business referenced in box "1a" 161381276
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as Certificate Holder) Palm Beach County c/o Department of Airports 846 Palm Beach International Airports West Palm Beach, FL 33406-1470	3. Name and Address of Group Self-Insurer Contractors Compensation Trust c/o First Cardinal Corporation 10 British American Blvd. Latham, NY 12110 518-213-1902

This certifies that the business referenced above in box "1a" is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law as a participating member of the Group Self-Insurer listed above in box "3" and participation in such group self-insurance is still in force. The Group Self-Insurer's Administrator will send this Certificate of Participation to the entity listed above as the certificate holder in box "2".

The Group Self-Insurer's Administrator will notify the above certificate holder within 10 days IF the membership of the participant listed in box "1a" is terminated. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for a maximum of one year from the date certified by the group self-insurer.

If this certificate is no longer valid according to the above guidelines and the business referenced in box "1a" continues to be named on a permit, license or contract issued by the certificate holder, the business must provide the certificate holder either with a new certificate or other authorized proof the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative of the Group Self-Insurer referenced above and that the business referenced in box "1a" has the coverage as depicted on this form.

Certified by: Michael J. Grasso, CPCU, CIC

(Print name of authorized representative of the Group Self-Insurer)

Certified by: Michael J. Grasso
(Signature)

01/01/08

(Date)

Title: Authorized Representative

Telephone Number: (518) 783-2665

WORKERS' COMPENSATION LAW

Section 57 Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.
2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

Please Note: This Certificate is valid only through the policy dates indicated above, OR a maximum of one year after this form is approved by the authorized representatives of the group Self-Insurer. At the expiration of those dates, if the business continues to be named on a permit or contract issued by the above government entity, the business must provide that government entity with a new Certificate. The business must also provide a new Certificate upon notice of cancellation or change in status of the policy.

Contractors Compensation Trust

ATTACHMENT TO **CERTIFICATE OF PARTICIPATION IN WORKERS' COMPENSATION** **GROUP SELF-INSURANCE**

Name & Address of Business Participating in Group Self-Insurance

Hi Lite Markings, Inc.
18249 Hi-Lite Dr.
PO Box 460
Adams Center, NY 13606

Description of Operations/Locations:

**Project: PBNC 07-10, Airfield Marking Improvements at Palm
Beach International Airport and North Palm Beach County General
Aviation Airport**

Policy Number: 004000351967108

Workers' Compensation Limits: Statutory

Employers Liability Limit:

Each Accident: **\$1,000,000**

Disease Policy Limit: **\$1,000,000**

Disease – Each Employee: **\$1,000,000**

WORKERS' COMPENSATION LAW

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD

**CERTIFICATE OF PARTICIPATION IN WORKER'S COMPENSATION
GROUP SELF-INSURANCE**

1a Legal Name and Address of Business Participating in Group Self-Insurance (Use Street Address Only): Hi-Lite Markings, Inc. PO Box 460 Adams Center, NY 13606	1d. Business Telephone Number of Business referred to in box "1a" (315) 583-5441
1b. Effective Date of Membership in the Group: 9/01/2007 Certificate Period: 1/01/2008 To: 1/01/2009 Certificate Number:004000351967108	1e. NYS Unemployment Insurance Employer Registration Number of Business referenced in box "1a" 161381276
1c. The Proprietor, Partners, or Executive Officers are <input checked="" type="checkbox"/> X included (only check box if all partners/officers included) <input type="checkbox"/> all excluded or certain partners/officers excluded	1f. Federal Employee Identification Number of Business referenced in Box "1a" 161381276
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as Certificate Holder) Palm Beach County C/o Department of Airports 846 Palm Beach International Airport West Palm Beach FL 33406-1470	3. Name and Address of Group Self-Insurer Contractors Compensation Trust 10 British American Blvd. Latham, NY 12110

This certifies that the business referenced in box "1a" is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law as a participating member of the Group Self-Insurer listed above in box "3" and participation in such group self-insurance is still in force. The Group Self-Insurer's Administrator will send this Certificate of Participation to the entity listed above as the certificate holder in box "2".

The Group Self-Insurer's Administrator will notify the above certificate holder within 10 days IF the membership of the participant listed in box "1a" is terminated. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for a maximum of one year from the date certified by the group self-insurer.

If this certificate is no longer valid according to the above guidelines and the business referenced in box "1a" continues to be named on a permit, license, or contract issued by the certificate holder, the business must provide the certificate holder either with a new certificate or other authorized proof the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative of the Group Self-Insurer referenced above and that the business referenced in box "1a" has the coverage as depicted on this form.

Certified by: Nicol Sweeney

(Print Name of authorized representative of the Group Self-Insurer)

Certified by:

12/13/2007

(Signature)

(date)

Title: Administrator

Telephone Number: (518) 213-1900

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD
**CERTIFICATE OF PARTICIPATION IN WORKERS' COMPENSATION
GROUP SELF-INSURANCE**

1a. Legal Name and Address of Business Participating in Group Self-Insurance (Use Street Address Only) Hi Lite Markings, Inc. 18249 Hi-Lite Dr. PO Box 460 Adams Center, NY 13606	1d. Business Telephone Number of Business referenced in box "1a" 315- 583-6111 1e. NYS Unemployment Insurance Employer Registration Number of Business referenced in box "1a" 3199998
1b. Effective Date of Membership in the Group 09/01/07 Certificate Period: 09/01/07 to 01/01/08 Certificate Number: 004000351967107	
1c. The Proprietor, Partners or Executive Officers are <input checked="" type="checkbox"/> included (Only check box if all partners/officers included) <input type="checkbox"/> all excluded or certain partners/officers excluded	1f. Federal Employer Identification Number of Business referenced in box "1a" 161381276
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as Certificate Holder) Palm Beach County c/o Department of Airports 846 Palm Beach International Airports West Palm Beach, FL 33406-1470	3. Name and Address of Group Self-Insurer Contractors Compensation Trust c/o First Cardinal Corporation 10 British American Blvd. Latham, NY 12110 518-213-1902

This certifies that the business referenced above in box "1a" is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law as a participating member of the Group Self-Insurer listed above in box "3" and participation in such group self-insurance is still in force. The Group Self-Insurer's Administrator will send this Certificate of Participation to the entity listed above as the certificate holder in box "2".

The Group Self-Insurer's Administrator will notify the above certificate holder within 10 days IF the membership of the participant listed in box "1a" is terminated. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for a maximum of one year from the date certified by the group self-insurer.

If this certificate is no longer valid according to the above guidelines and the business referenced in box "1a" continues to be named on a permit, license or contract issued by the certificate holder, the business must provide the certificate holder either with a new certificate or other authorized proof the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative of the Group Self-Insurer referenced above and that the business referenced in box "1a" has the coverage as depicted on this form.

Certified by: Michael J. Grasso, CPCU, CIC

(Print name of authorized representative of the Group Self-Insurer)

Certified by:

Michael J. Grasso
(Signature)

09/01/07

(Date)

Title:

Authorized Representative

Telephone Number: (518) 783-2665

WORKERS' COMPENSATION LAW

Section 57 Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.
2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

Please Note: This Certificate is valid only through the policy dates indicated above, OR a maximum of one year after this form is approved by the authorized representatives of the group Self-Insurer. At the expiration of those dates, if the business continues to be named on a permit or contract issued by the above government entity, the business must provide that government entity with a new Certificate. The business must also provide a new Certificate upon notice of cancellation or change in status of the policy.

Contractors Compensation Trust

ATTACHMENT TO
CERTIFICATE OF PARTICIPATION IN WORKERS' COMPENSATION
GROUP SELF-INSURANCE

Name & Address of Business Participating in Group Self-Insurance
 Hi Lite Markings, Inc. 18249 Hi-Lite Dr. PO Box 460 Adams Center, NY 13606

Description of Operations/Locations: Project: PBNC 07-10, Airfield Marking Improvements at Palm Beach International Airport and North Palm Beach County General Aviation Airport
Policy Number: 004000351967107
Workers' Compensation Limits: Statutory
Employers Liability Limit: Each Accident: \$1,000,000 Disease Policy Limit: \$1,000,000 Disease – Each Employee: \$1,000,000

WORKERS' COMPENSATION LAW

ENDORSEMENT

Date Prepared: 12/13/2007 FEIN: 161381276
Name of Group: Contractors Compensation Trust
Name of Member: Hi-Lite Markings, Inc.

Address: PO Box 460
Adams Center, NY 13606

Policy Number: 004000351967108
Policy Period: 1/01/2008 - 1/01/2009

Effective Date: 1/01/2008 Carrier #: 0

INTENT OF ENDORSEMENT (INDICATE ONLY ONE ACTION PER ENDORSEMENT)

(X) ADDITION TO WAIVER OF SUBROGATION SCHEDULE

INSTRUCTIONS:

For changes, indicate below the name or address prior to endorsement. Each item on the left must correspond with an item on the right.

Indicate below the new name or address after change or the name and address of an addition or deletion. For deletions give disposition.

00002 Palm Beach County
Proj-Airfield Marking Improv. @ Palm Beach Inter.
Airport and No Beach Co Gen. Aviation Airport
c/o Department of Airports
846 Palm Beach International Airport
West Palm Beach, FL 33406

Agent: 67 - Cool Insuring Agency Inc-Latham
Requestor: LMCDONNELL

STATE

INSURED

FILE

AGENT _____

LC

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

Schedule

Palm Beach County
c/o Department of Airports
846 Palm Beach International Airport
West Palm Beach, FL 33406
Proj-Airfield Marking Improv.@ Palm Beach Inter.
Airport and No Beach Co Gen. Aviation Airport

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy)

Endorsement Effective: 1/01/2008

Policy No.: 004000351967108

Endorsement No.: 2

Insured: Hi-Lite Markings, Inc.

Premium: \$100,887.00

Insurance Company: Contractors Compensation Trust

WC 00 03 13
(Ed. 4/84)

Countersigned by

Michael J. Grasso

Copyright 1983 National Council on Compensation Insurance.
Cool Insuring Agency Inc-Latham-00067

Printed on: December 13, 2007

LMCDONNELL

ENDORSEMENT

Date Prepared: 12/13/2007 FEIN: 161381276

Name of Group: Contractors Compensation Trust
Name of Member: Hi-Lite Markings, Inc.

Address: PO Box 460
Adams Center, NY 13606

Policy Number: 004000351967108
Policy Period: 09/01/07- 01/01/08

Effective Date: 12/13/07 Carrier #: 0

INTENT OF ENDORSEMENT (INDICATE ONLY ONE ACTION PER ENDORSEMENT)

(X) ADDITION TO WAIVER OF SUBROGATION SCHEDULE

INSTRUCTIONS:

For changes, indicate below the name or address prior to endorsement. Each item on the left must correspond with an item on the right.

Indicate below the new name or address after change or the name and address of an addition or deletion. For deletions give disposition.

00002 Palm Beach County
Proj-Airfield Marking Improv. @ Palm Beach Inter.
Airport and No Beach Co Gen. Aviation Airport
c/o Department of Airports
846 Palm Beach International Airport
West Palm Beach, FL 33406

Agent: 67 - Cool Insuring Agency Inc-Latham
Requestor: LMCDONNELL

STATE

INSURED

FILE

AGENT _____

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Schedule

Palm Beach County
c/o Department of Airports
846 Palm Beach International Airport
West Palm Beach, FL 33406
Proj-Airfield Marking Improv.@ Palm Beach Inter.
Airport and No Beach Co Gen. Aviation Airport

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Endorsement Effective: 12/13/07

Policy No.: 004000351967108

Endorsement No.: 2

Insured: Hi-Lite Markings, Inc.

Premium: \$100,887.00

Insurance Company: Contractors Compensation Trust

WC 00 03 13
(Ed. 4/84)

Countersigned by

Michael J. Grasso

Copyright 1983 National Council on Compensation Insurance.
Cool Insurance Agency Inc-Latham-00067

Printed on: December 13, 2007

LMCDONNELL

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
Addie L. Greene, Chairperson
Jeff Koons, Vice Chair
Karen T. Marcus
Robert J. Kanjian
Mary McCarty
Burt Aaronson
Jess R. Santamaria

COUNTY ADMINISTRATOR
Robert Weisman

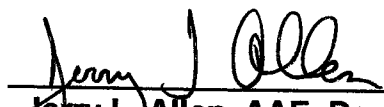
DEPARTMENT OF AIRPORTS



Based on the reviews provided by the Department of Airports Consulting Engineers
and the S/DBE Office, it is our intent to
award a contract to **Hi-Lite Markings, Inc.** for the
below listed project:

**Palm Beach International Airport
North Palm Beach County General Aviation Airport
Airfield Marking Improvements
Palm Beach County Project No. PBNC 07-10
Department of Airports**

Total (Base Bid plus Add 1-4): \$648,618.50



**Jerry L. Allen, AAE, Deputy Director
Palm Beach County Department of Airports**

PALM BEACH COUNTY DEPARTMENT OF AIRPORTS
846 Palm Beach International Airport
West Palm Beach, FL 33406-1470
(561) 471-7412 FAX: (561) 471-7427
www.pbia.org

PALM BEACH COUNTY GLADES AIRPORT
Pahokee

PALM BEACH COUNTY PARK AIRPORT
Lantana

NORTH COUNTY GENERAL AVIATION AIRPORT
Palm Beach Gardens

 printed on recycled paper

"An Equal Opportunity Affirmative Action Employer"



November 26, 2007

Mr. Gary Sypek
Director of Planning
Palm Beach County Department of Airports
Palm Beach International Airport
Building 846
West Palm Beach, Florida 33406-1491

Subject: **PBNC 07-10: Airfield Marking Improvements
Bid Tabulation, Review and Recommendation**

Dear Mr. Sypek,

THE LPA GROUP INCORPORATED has reviewed the bids submitted on November 15, 2007 for the subject project. The project had a total of three bidders, whose bids were evaluated by our office for responsiveness to the RFP. The bid price forms submitted by each were evaluated in the attached bid tabulation; the results summarized below:

	<i>Base Bid</i>	<i>Add #1</i>	<i>Add#2</i>	<i>Add #3</i>	<i>Add #4</i>	<i>Base plus Add 1-4</i>
Hi-Lite Markings, Inc.	\$497,465.00	\$1,250.00	\$53,073.00	\$41,630.50	\$55,200.00	\$648,618.50
Afco Constructors, Inc.	\$1,118,626.44	\$628.53	\$137,759.40	\$49,449.20	\$427,705.92	\$1,734,169.49
West Construction, Inc.	\$1,066,347.00	\$14,500.00	\$170,415.00	\$4,200.00	\$504,000.00	\$1,759,462.00

Hi-Lite Markings, Incorporated provided the lowest base bid at **\$497,465.00** and the lowest for the base plus four (4) alternates **\$648,618.50**. Listed below are some details of their bid:

- Hi-Lite Markings, Inc operates out of Adams Center, New York, has 75 employees and has been in business for 17 years. They have a \$5,000,000 bonding capacity and gross annual receipts of \$10.4 M. They have extensive airport experience throughout Florida and the United States.

Mr. Gary Sypek, Page 2

- A signed bid, acknowledged addenda, and fully completed forms all accompanied the bid at the time of submittal. It is therefore the opinion of the engineer this bid is responsive.

Based on the aforementioned evaluation, THE LPA GROUP INCORPORATED recommends a construction contract be awarded to **Hi-Lite Markings, Incorporated** for the base bid plus alternates, whichever combination is in the DOA's and County's best interest. This recommendation is contingent upon Agency review, PBCDOA Minority Affairs review, County Commission approval, and the availability of funds.

If you have any questions or if we can be of further assistance, please do not hesitate to contact us.

Sincerely,
THE LPA GROUP INCORPORATED

A handwritten signature in black ink, appearing to read 'Mark C. Jansen', with a long horizontal flourish extending to the right.

Mark C. Jansen, P.E.
Project Manager

cc: Notye Brewington, PBCDOA
Mohsen Mohammadi, Doug Hambrecht LPA (e-mail)
File: TA438214.3a

Enclosures: Bid tabulation (2 pages)

BID TABULATION

Airfield Marking Improvements
Palm Beach International Airport and North
Palm Beach County General Aviation Airport

Bid Number: PBNC 07-10

For Bids Opened: 15-Nov-07

					Engineering Estimates		Hi-Lite Markings, Inc.		AFCO Constructors, Inc.		West Construction, Inc.		
Bid Item	Specification No.	Description	Unit	Quantity	Unit Price (Dollars-	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)	
Palm Beach International Airport (PBI)													
1	1000	Mobilization	1	LS	\$30,000.00	\$30,000.00	\$29,100.00	\$29,100.00	\$16,312.28	\$16,312.28	\$42,000.00	\$42,000.00	
2	1030	Safety and Security	1	LS	\$25,000.00	\$25,000.00	\$14,500.00	\$14,500.00	\$80,781.69	\$80,781.69	\$98,000.00	\$98,000.00	
3	S-190	Remove Existing Pavement Markings	53,460	SF	\$2.00	\$106,920.00	\$2.00	\$106,920.00	\$3.26	\$174,279.60 *	\$3.50	\$187,110.00	
4	P-620-2	Reflective Pavement Marking - Yellow	34,560	SF	\$1.50	\$51,840.00	\$3.00	\$103,680.00	\$2.61	\$90,201.60 *	\$1.75	\$60,480.00	
5	P-620-3	Non-Reflective Pavement Marking - Black	53,730	SF	\$1.50	\$80,595.00	\$1.50	\$80,595.00	\$2.37	\$127,340.10 *	\$1.40	\$75,222.00 *	
North Palm Beach County General Aviation Airport (F45)													
6	1000	Mobilization	1	LS	\$10,000.00	\$10,000.00	\$6,900.00	\$6,900.00	\$16,312.28	\$16,312.28	\$42,000.00	\$42,000.00	
7	1030	Safety and Security	1	LS	\$5,000.00	\$5,000.00	\$6,900.00	\$6,900.00	\$69,837.78	\$69,837.78	\$98,000.00	\$98,000.00	
8	L-111	Temporary Lighted Portable Runway Closure Marking for Traffic Control	1	LS	\$3,000.00	\$3,000.00	\$10,000.00	\$10,000.00	\$52,199.31	\$52,199.31	\$2,100.00	\$2,100.00	
9	S-190	Remove Existing Pavement Markings	79,220	SF	\$2.00	\$158,440.00	\$1.10	\$87,142.00	\$4.49	\$355,697.80 *	\$3.50	\$277,270.00	
10	P-620-1	Reflective Pavement Marking - White	96,900	SF	\$1.50	\$145,350.00	\$0.53	\$51,357.00	\$1.39	\$134,691.00 *	\$1.85	\$179,265.00	
11	P-620-2	Reflective Pavement Marking - Yellow	700	SF	\$1.50	\$1,050.00	\$0.53	\$371.00	\$1.39	\$973.00 *	\$7.00	\$4,900.00	
TOTAL BID AMOUNT, BASE BID=						\$617,195.00		\$497,465.00		\$1,118,626.44 *		\$1,066,347.00 *	

ADDITIVE #1 BID (Algae-Resistant Additive to Markings at North County)

1	P-620-1	Algae Resistant Additive to White Markings	1	LS	\$750.00	\$750.00	\$1,000.00	\$1,000.00	\$614.00	\$614.00	\$10,500.00	\$10,500.00
2	P-620-1	Algae Resistant Additive to Yellow Markings	1	LS	\$500.00	\$500.00	\$250.00	\$250.00	\$14.53	\$14.53	\$4,000.00	\$4,000.00
TOTAL ADDITIVE #1=						\$500.00		\$1,250.00		\$628.53		\$14,500.00
TOTAL BASE BID + ADDITIVE #1=						\$617,695.00		\$498,715.00		\$1,119,254.97 *		\$1,080,847.00 *

ADDITIVE #2 BID (PBI Threshold Improvements R/W 13-31)

1	S-190	Remove Existing Pavement Markings	36,540	SF	\$2.00	\$73,080	\$1.10	\$40,194.00	\$2.46	\$89,888.40 *	\$3.50	\$127,890.00
2	P-620	Reflective Pavement Marking - White	24,300	SF	\$1.50	\$36,450	\$0.53	\$12,879.00	\$1.97	\$47,871.00 *	\$1.75	\$42,525.00
TOTAL ADDITIVE #2=						\$109,530		\$53,073.00		\$137,759.40 *		\$170,415.00
TOTAL BASE BID + ADDITIVE #2=						\$726,725		\$550,538.00		\$1,256,385.84 *		\$1,236,762.00

ADDITIVE BID #3 - (Runway Closure Markers)

1	L-111	Lighted Portable Runway Closure Marking	2	EA	\$19,000.00	\$38,000	\$20,815.25	\$41,630.50	\$24,724.60	\$49,449.20	\$2,100.00	\$4,200.00
TOTAL ADDITIVE #3=						\$38,000		\$41,630.50		\$49,449.20		\$4,200.00
TOTAL BASE BID + ADDITIVE #3=						\$655,195		\$539,095.50		\$1,168,075.64 *		\$1,070,547.00 *

BID TABULATION

Airfield Marking Improvements
Palm Beach International Airport and North
Palm Beach County General Aviation Airport

Bid Number: PBNC 07-10

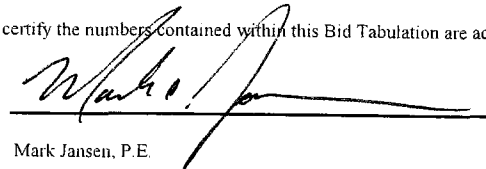
For Bids Opened: 15-Nov-07

					Engineering Estimates		Hi-Lite Markings, Inc.		AFCO Constructors, Inc.		West Construction, Inc.	
Bid Item	Specification No.	Description	Unit	Quantity	Unit Price (Dollars-	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)	Unit Price (Dollars-Cents)	Total Amount (Dollars-Cents)
ADDITIVE BID #4 -(PBI Taxiway -L Shoulder Markings- Green)												
1	P-620-1	Non-Reflective Pavement Marking - Green	240,000	SF	\$1.50	\$360,000.00	\$0.23	\$55,200.00	\$1.78	\$427,705.92	\$2.10	\$504,000.00
TOTAL ADDITIVE #4=						\$360,000.00		\$55,200.00		\$427,705.92		\$504,000.00
TOTAL BASE BID + ADDITIVE #4=						\$977,195.00		\$552,665.00		\$1,546,332.36		\$1,570,347.00
TOTAL BID AMOUNT, BASE BID+ADDITIVE BID #1,2,3 AND 4=						\$1,125,225.00		\$648,618.50		\$1,734,169.49		\$1,759,462.00

I hereby certify the numbers contained within this Bid Tabulation are accurate and complete.

* Represents Mathematical Error. Total Adjusted.

By:



Date:

26-Nov-07

Mark Jansen, P.E.

THE LPA GROUP, INC.

**PALM BEACH COUNTY
DEPARTMENT OF AIRPORTS**

TO: Jerry Allen, Deputy Director Planning/Community Affairs

Date: 11/26/2007

FROM: Notye Brewington
S/DBE Manager

Project #: PBNC 07-10

Page/s: 1 / 4

RE: AIRFIELD MARKING IMPROVEMENTS, PALM BEACH INTERNATIONAL AIRPORT & NORTH
PALM BEACH GENERAL AVIATION AIRPORT

Consultant: LPA Group
Project #: PBNC 07-10
Funding: Local
RFP/Bid Date 11/10/2007
SBE Goal: 15%

Bidders:

A. Hi-Lite Markings, Inc.

P.O. Bo 460

Adams Center, NY 13606

Contact Person: John S. McNeely

Telephone: (315) 583-6111

Fax: (315) 583-5807

Email:

Amount: \$497,465.00 + 1,250.00 + \$53,073.00 + \$41,630.50 + 55,200 = 648,618.50

SBE Subcontractor(s):

1. L & L Worldwide, Inc.

Supplier

\$121,615.91

12.30%

6310 Pompano St.

Jupiter, FL 34458

Contact Person: Lula Stock

Telephone: (561) 630-9201

Fax: (561) 622-2265

Email:

2. Rapid Removal, Inc.

Removal 10 yd Roll off

\$3,000.00

0.51%

P.O. Box 32511

Palm Beach Gardens, FL 33420-2511

Contact Person: J. M. Hall, Project Executive

Telephone: (561) 622-2242

Fax: (561) 622-2265

Email:

Total: \$75,969.55 12.80%

**PALM BEACH COUNTY
DEPARTMENT OF AIRPORTS**

TO: Jerry Allen, Deputy Director Planning/Community Affairs

Date: 11/26//2007

FROM: Notye Brewington
S/DBE Manager

Project #: PBNC 07-10

Page/s: 2/ 4

RE: AIRFIELD MARKING IMPROVEMENTS, PALM BEACH INTERNATIONAL AIRPORT &
NORTH PALM BEACH GENERAL AVIATION AIRPORT

Consultant: LPA Group

Project #: PBNC 07-10

Funding: Local

RFP/Bid Date 11/10/2007

SBE Goal: 15%

Bidders:

B. West Construction, Inc.

318 South Dixie HWY, Ste. 4 -5

Lake Worth, FL 33460

Contact Person: Martha Morgan

Telephone: (561) 588-2027

Fax: (561) 582-9419

Email:

Amount: 1,066,347.00 + 14,500.00 +170,415.00 +4,200.00 +504,000.00 = 1,759,462

SBE Subcontractor(s):

1. West Construction, Inc.

318 South Dixie HWY Ste.4 -5

Lake Worth, FL 33460

Contact Person Martha A. Morgan

Telephone: (561)588-2027

Fax: (561) 582-9419

Email:

General Contractors

\$550,630.00

43.78%

Total: \$550,630.00 43.78%

**PALM BEACH COUNTY
DEPARTMENT OF AIRPORTS**

TO: Jerry Allen, Deputy Director Planning/Community Affairs

Date: 11/26/07

FROM: Notye Brewington
S/DBE Manager

Project #: PBNC 07-10

Page/s: 3/ 4

RE: AIRFIELD MARKING IMPROVEMENTS, PALM BEACH INTERNATIONAL AIRPORT &
North PALM BEACH GENERAL AVIATION AIRPORT

Consultant: LPA
Project #: PBNC 07-10
Funding: Local
RFP/Bid Date 11/10/2007
SBE Goal: 15%

Bidders:

C. AFCO Construction, Inc.
1804 N. W. Madrid Way
Boca Raton, FL 33432
Contact Person: Aldo J. Ferrera, President.
Telephone: (561) 338-2160
Fax: (561) 338-5037
Email: info@afcoconstruction.com
Amount: 1,118,626.44 +\$628.53 +\$137,759.40 +\$427,705.92 = 1,734,169.49

SBE Subcontractor(s):

1. Roberts Traffic Corp. Marking \$301,334.00 23.06%
2210 Hayes Street
Hollywood, FL 33020
Contact Person: Linda Levine
Telephone: (954) 929-2922
Fax: (954) 929-3736
Email:

2. Berlo Industry, Inc. Stripping and Removal \$247,624.50 18.95%
P.O. Box 77-0037
10734 S.W. 188 Street
Miami, FL 33177-0037
Contact Person:
Telephone: (786) 242-3409
Fax: (786) 242-3419

Total: \$548,958.50 42.02%

0%

**PALM BEACH COUNTY
DEPARTMENT OF AIRPORTS**

TO: Jerry Allen, Deputy Director Planning/Community Affairs

Date: 11/5/07

FROM: Notye Brewington
S/DBE Manager

Project #: PB 07-03

Page/s: 4/ 4

RE: AIRFIELD MARKING IMPROVEMENTS, PALM BEACH INTERNATIONAL AIRPORT &
North PALM BEACH GENERAL AVIATION AIRPORT

Consultant: LPA
Project #: PBNC 07-10
Funding: Local
RFP/Bid Date 11/10/2007
SBE Goal: 15%

Comments:

Hi-Lite, low bidder is responsive to the SBE-M/WBE requirements.
Roberts Traffic Corp and Berlo Industry, Inc. are not certified by Palm Beach County as a Small Business Enterprise. AFCO Construction, Inc. is credited 0% SBE participation for this project.

SIGNED


Notye Brewington, MCA
S/DBE Manager

08

FUND 4111 - AIRPORTS IMPROVEMENT DEVELOPEMENT FUND

ACCT. NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED	REMAINING BALANCE
<u>EXPENDITURE</u>	<u>AIRPORT EXPENDITURES</u>							
121-A275-6504	Airfield Marking	400,000	400,000	248,700		648,700	0	648,700
121-A900-9909	RESERVES	7,213,611	6,642,660	0	248,700	6,393,960		6,393,960
	TOTAL EXPENDITURES	<u>51,352,473</u>	<u>82,183,500</u>	<u>248,700</u>	<u>248,700</u>	<u>82,183,500</u>		

Deputy Clerk to the
Board of County Commissioners