

34-5

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: November 20, 2012

Consent Regular
 Ordinance Public Hearing

Department: Facilities Development & Operations

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Amendment No. 4 to Contract with Davco Electrical Contractors Corporation (R2009-2056) to implement the third renewal of the annual electrical contract with a maximum value of \$1,000,000.

Summary: Amendment No. 4 is a renewal to the annual electrical contract which was awarded to Davco Electrical Contractors Corporation. The annual electrical contract is an indefinite-quantity contract and this renewal has a maximum value of \$1,000,000. The maximum value is shared and work orders are awarded based on competitive quotes/bids issued to all five (5) participating contractors. The renewal term is for twelve (12) months or until \$1,000,000 in work orders are issued in this term. Staff is bringing forward the amendment at this time based on expiration of the term. All terms of the original contract remain in effect. This is the third of four extensions allowed by the Contract. The Small Business Enterprise (SBE) goal is 15% and will be tracked cumulatively for each work order issued. The cumulative SBE participation to date is 85.40%. SBE and local preference applied at work order level. Davco Electrical Contractors Corporation is a Palm Beach County company. This is a bond-wavier contract.

(FD&O Admin) Countywide

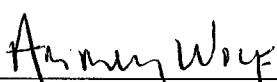
(JM)

Background and Justification: Amendment No. 4 is the third renewal to the Annual Electrical Contract which was awarded to Davco Electrical Contractors Corporation on December 1, 2009 and renewed on November 30, 2011. The contractor will continue to perform as an annual Electrical contractor for implementation of electrical projects for various facilities. This annual Electrical contract is an indefinite-quantity contract and this renewal has a maximum value of \$1,000,000. The renewal term is for twelve (12) months or until the renewal limit of \$1,000,000 is reached.

Attachments:

Amendment No. 4

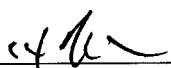
Recommended by:


Department Director

10/12/12
Date

Approved by:


County Administrator


Date

AMENDMENT No. 4 TO ANNUAL ELECTRIC CONTRACT

This agreement amends the contract between Palm Beach County (County) and Davco Electrical Contractor Corporation (Contractor) authorized pursuant to Palm Beach County Resolution (R-2009-2056).

The contract provided that Contractor would act as annual Electrical Contractor working within the annual capacity as established below:

	Effective Date	End Date	Added Capacity	Cumulative Capacity
Original Contract	December 1, 2009	November 30, 2010		\$1,000,000.00
Renewal #1	November 30, 2010	November 30, 2011	\$1,000,000.00	\$2,000,000.00
Renewal #2	November 30, 2012	November 30, 2013	\$1,000,000.00	\$3,000,000.00

Amendment No. 1 dated October 18, 2010, was approved by FD&O Director and amended the contract to include the Inspector General language.

Amendment No. 2: 1) Renewal No. 1 extends the term of the original contract from November 30, 2010 through November 30, 2011; 2) increases the total dollar value by \$1,000,000 for a new total contract value of \$2,000,000; and 3) revised the Inspector General language.

Amendment No. 3: 1) Renewal No. 2 extends the term of the original contract from November 30, 2011 through November 30, 2012; and 2) increases the total dollar value by \$1,000,000 for a new total contract value of \$3,000,000.

Amendment No. 4: 1) Renewal No. 3 extends the term of the original contract from November 30, 2012 through November 30, 2013; and 2) increases the total dollar value by \$1,000,000 for a new total contract value of \$4,000,000.

Except as amended herein, all provisions of the existing contract shall remain in full force and effect.

ATTEST:

Sharon R. Bock, Clerk & Comptroller

BOARD OF COUNTY COMMISSIONERS

Deputy Clerk

Chair

Witness:

Armon Salinas

Printed Name

[Signature]

Signature

Davco Electrical Contractor Corporation

[Signature]

Signature David J. Blotnick

C.O.O.

Title

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

[Signature]
County Attorney

[Signature]
Audrey Wolf, Director
Facilities Development & Operations



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
7/9/2012

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

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

PRODUCER Wells Fargo Ins Services USA, Inc. (WPB) 2054 Vista Parkway, Suite 400 West Palm Beach FL 33411-2718		CONTACT NAME: PHONE (A/C, No, Ext): (561) 655-5500 FAX (A/C, No): (561) 655-5509 E-MAIL: ADDRESS:	
		INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED Davco Electrical Contractors Corp. 4885 Park Ridge Blvd Boynton Beach FL 33426 (561) 732-3434		INSURER A: North River Insurance Company 21105 INSURER B: Houston Specialty Insurance Co. 12936 INSURER C: AGCS Marine Insurance Company 22837 INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: Cert ID 314082

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY	Y	Y	TEN11350	7/8/2012	7/8/2013	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRQ-JECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							XCU Liability \$ 1,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR	Y	Y	5821007436	7/8/2012	7/8/2013	EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NJ)		Y/N	N/A			E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
C	Equipment Floater			MXI93043117	7/9/2012	7/9/2013	\$555000 scheduled \$ \$150000 leased

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
30 days notice of cancellation, 10 day notice for non-payment. Installation Floater- Co. C AGCS Marine Ins. Co. 7/8/12-13, Policy MXI93021133, Limit \$500,000. Additional insured includes completed operations per form CG0370704 when required by contract. Blanket Waiver of Subrogation per form CG24040509 when required by contract. 10 day notice of cancellation for non-payment of premium. Certificate holder is additional insured as respects to General Liability

CERTIFICATE HOLDER

CANCELLATION

Palm Beach County Board of County Commissioners
 c/o Facilities Services
 Attn: Louise Feldkamp
 2633 Vista Parkway
 West Palm Beach FL 33411

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Rena Jucker



CERTIFICATE OF LIABILITY INSURANCE

OP ID: JT

DATE (MM/DD/YYYY)

03/26/12

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PRODUCER SLATON INSURANCE P.O. Box 220537 West Palm Beach, FL 33422 Casey Cunniff, CPCU	561-683-8383	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: DAVCO-1	FAX (A/C, No):
	561-684-5995		
INSURED Davco Electrical Contractors Corp. Attn: David Blotnick 4885 Park Ridge Blvd. Boynton Beach, FL 33426	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Hanover Ins. Co.		22292
	INSURER B: FCCI Insurance Company		10178
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		AZJ780667702	03/31/12	03/31/13	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A X 65688	12/31/11	12/31/12	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER

PALMBE7

PBC Board of County Commission
 Capital Improvements Division
 Facilities Dev. & Operations
 2633 Vista Parkway
 West Palm Beach, FL 33411

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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NOTEPAD:

HOLDER CODE **PALMBE7**
INSURED'S NAME **Davco Electrical Contractors**

DAVCO-1
OP ID: **JT**

PAGE **2**
DATE **03/26/12**

Waiver of subrogation infavor of certificate holder wllh respects to
Workers Comp.