

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: May 18, 2021 Consent [X] Regular []
Public Hearing []

Department: Water Utilities Department

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Work Authorization (WA) No. 3 to the Lift Station Rehabilitation Continuing Construction Contract 2020 (Continuing Contract) with Hinterland Group Inc. (Hinterland) for the Lift Station Pressure Nodes Addition (Project) in the amount of \$471,957.00.

Summary: On September 15, 2020, the Board of County Commissioners approved the Palm Beach County Water Utilities Department (PBCWUD) Contract (R2020-1379) with Hinterland. WA No. 3 provides for the installation of pressure nodes on the water and force main pipes at twenty-three (23) lift stations throughout the PBCWUD service area in order to monitor potable water and force main pressures. The Project also includes the installation of water services, backflow preventers and electrical components required for remote monitoring of system pressures at the lift stations. The Continuing Contract was procured under the requirements of the Equal Business Opportunity Ordinance. On January 15, 2020, the Goal Setting Committee applied an Affirmative Procurement Initiative (API) of a mandatory 20% Small Business Enterprise (SBE) subcontracting participation, of which 3% shall be among certified African American and/or Hispanic American owned firms. The Continuing Contract provides for 26.87% SBE participation which includes 3.18% MBE participation, 3.18% MBE (H). WA No. 3 includes 0.00% SBE participation which includes 0.00% MBE participation, 0.00% MBE (H). The cumulative SBE participation including WA No. 3 is 0.00% which includes 0.00% MBE participation, 0.00% MBE (H). Hinterland is a Palm Beach County based Company. The Project is included in the PBCWUD FY21 budget. (PBCWUD Project No. 19-047) Countywide (MJ).

Background and Justification: The Project is necessary to install pressure nodes on the water services and force mains at twenty-three (23) lift stations identified by PBCWUD to be monitored by a Supervisory Control and Data Acquisition (SCADA) system. The Project will allow remote monitoring of the pressures on the water and force mains at these lift stations within the PBCWUD service area. Completion of the Project will provide better reliability, control and monitoring of the water distribution and wastewater collection systems while minimizing response time to emergency situations.

Attachments:

1. Four (4) Originals of Work Authorization No.3
2. Location Map
3. Certificate of Liability Insurance

Recommended By: Jim Stiles Department Director Date 4-13-2021

Approved By: Neil J. Blum Assistant County Administrator Date 7/27/2021

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2021	2022	2023	2024	2025
Capital Expenditures	\$471,957	0	0	0	0
Operating Costs	0	0	0	0	0
External Revenues	0	0	0	0	0
Program Income (County)	0	0	0	0	0
In-Kind Match County	0	0	0	0	0
NET FISCAL IMPACT	\$471,957	0	0	0	0
# ADDITIONAL FTE POSITIONS (Cumulative)	0	0	0	0	0

Budget Account No.: Fund 4001 Dept. 720 Unit 2554 Object 4615

Is Item Included in Current Budget? Yes X No

Does this item include the use of federal funds? Yes No X

Reporting Category N/A

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

One (1) time expenditure from user fees, connection fees and balance brought forward.

C. Department Fiscal Review: _____ GF

III. REVIEW COMMENTS

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

P. Deegan-Rawlin 4/22/21 Jorge Miller for Lewin Products
 OFMB QA 4-22-21 (P) 4/22/21 Contract Development and Control
4-22-21 TW

B. Legal Sufficiency:

[Signature] 4/27/21
 Assistant County Attorney

C. Other Department Review:

 Department Director

This summary is not to be used as a basis for payment.

WORK AUTHORIZATION NO. 3

**Palm Beach County Water Utilities Department
Lift Station Rehabilitation Continuing Construction Contract 2020
Resolution No. R2020-1379 Contract Dated September 15, 2020**

Project Title: Lift Station Pressure Nodes Addition

PBCWUD Project No.: 19-047

Contractor: Hinterland Group Inc.

Address: 2051 West Blue Heron Blvd., Riviera Beach, FL 33404

Budget Line Item No.: 4001-720-2554-4615

District: Countywide

This Work Authorization provides for: **Construction services for the installation of pressure nodes on the water and force main pipes at twenty-three (23) lift stations throughout the Palm Beach County Water Utilities Department (PBCWUD) service area in order to monitor potable and force main pressures.**

(See ATTACHMENT A for detailed scope of services)

The Contract provides for 26.87% SBE participation which includes 3.18% M/WBE participation, 3.18% MBE (H). This Work Authorization includes 0.00% overall SBE participation which includes 0.00% M/WBE participation, 0.00% MBE (H). The cumulative SBE participation, including this Work Authorization is 0.00% which includes 0.00% M/WBE participation, 0.00% MBE (H).

1. Services completed by the Contractor to date:

See **ATTACHMENT B**

2. Contractor shall begin work within ten (10) calendar days from the issuance of Notice to Proceed (NTP). Execution of the Project will be accomplished as follows from the issuance of the NTP:

Substantial Completion 180 Calendar Days

Final Construction Completion 210 Calendar Days

Liquidated damages will apply as follows:

\$500.00 per day past substantial completion date.

\$250.00 per day past final completion date.

WORK AUTHORIZATION NO. 3

**Palm Beach County Water Utilities Department
Lift Station Rehabilitation Continuing Construction Contract 2020
Resolution No. R2020-1379 Contract Dated September 15, 2020**

3. The compensation to be paid to the Contractor for providing the requested services in accordance with the Contract Bid Prices is \$471,957.00.
4. This Work Authorization does not amend, change, or modify the Contract which remains in full force and effect.
5. All Attachments to this Authorization are incorporated herein and made a part of the Work Authorization.

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WORK AUTHORIZATION NO. 3

Palm Beach County Water Utilities Department
Lift Station Rehabilitation Continuing Construction Contract 2020
Resolution No. R2020-1379 Contract Dated September 15, 2020

Project Title: Lift Station Pressure Nodes Addition

PBCWUD Project No.: 19-047

IN WITNESS WHEREOF, this Work Authorization is accepted, subject to the terms, conditions and obligations of the aforementioned Contract.

PALM BEACH COUNTY, A POLITICAL SUBDIVISION OF THE STATE OF FLORIDA

Joseph Abruzzo, Clerk of the Circuit Court
& Comptroller, Palm Beach County

Palm Beach County, Board
of County Commissioners

ATTEST:

Signed: _____

DKM

Dave Kerner, Mayor

JCS

Typed Name: _____

Deputy Clerk

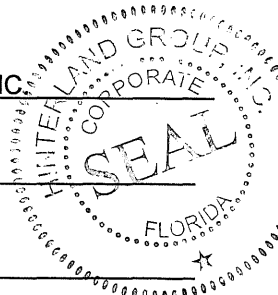
(Date)

Approved as to Form and Legal
Sufficiency

Contractor: HINTERLAND GROUP INC.

Signed: _____

(Signature)



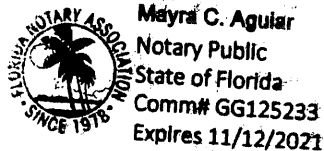
Typed Name: Michael W. Jones
County Attorney

Daniel Duke III, President
(Name and Title)

03/18/2021
(Date)

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of (X) physical presence or () online notarization, this 18 day of March, 2021, by Daniel Duke III, who is (X) personally known to me or () has produced N/A as identification.



Mayra C. Aguiar
(Signature of Notary Public - State of Florida)

Mayra C. Aguiar
(Print, Type, or Stamp Commissioned Name of Notary Public)

WORK AUTHORIZATION NO. 3

**Palm Beach County Water Utilities Department
Lift Station Rehabilitation Continuing Construction Contract 2020
Resolution No. R2020-1379 Contract Dated September 15, 2020**

LIST OF ATTACHMENTS

ATTACHMENT A	Scope of Work
ATTACHMENT B	Summary and Status of Work Authorizations
ATTACHMENT C	Public Construction Bond
ATTACHMENT D	Form of Guarantee
ATTACHMENT E	Schedule of Bid Items
ATTACHMENT F	OEBO Schedule 1 and 2
ATTACHMENT G	Summary of SBE-M/WBE Business Tracking
ATTACHMENT H	Location Map

Revised 02/11/2021

ATTACHMENT A

SCOPE OF WORK AUTHORIZATION NO. 3

PBCWUD Project No.: 19-047

Project Title: Lift Station Pressure Nodes Addition

Contractor shall perform:

Construction services for the installation of pressure nodes on the water and force main pipes at twenty-three (23) lift stations throughout the PBCWUD service area in order to monitor potable and force main pressures. Project also includes the installation of water services, backflow preventers and electrical components required for remote monitoring of system pressures at the lift stations in accordance with the construction documents and governing regulations.

Revised 02/11/2021

ATTACHMENT B

SUMMARY AND STATUS OF WORK AUTHORIZATIONS

Work Auth. No.	PBCWUD Project No.	Title	Status	Project Total Amount	SBE Total Amount	SBE Participation %	Approved	
							By	Date
1	21-032	Lift Station Rehabilitation Priority Work Phase 1	Pending	\$851,935.01	\$40,000.00	4.69%	BCC	Pending
2	19-064	Loxahatchee Groves Park Lift station and Force Main	Pending	\$234,386.65	16,260.00	6.93%	BCC	Pending
3	19-047	Lift Station Pressure Nodes Addition	Pending	\$471,957.00	\$00,000.00	0.00%	BCC	Pending

ATTACHMENT C

PUBLIC CONSTRUCTION BOND – WORK AUTHORIZATION NO. 3
To Lift Station Rehabilitation Continuing Construction Contract 2020
Resolution No. R2020-1379 Contract Dated September 15, 2020

PROJECT TITLE: Lift Station Pressure Nodes Addition

PBCWUD PROJECT NO.: 19-047

BOND NUMBER: 21BCSIP8659

WORK AUTHORIZATION/BOND AMOUNT: \$471,957.00

CONTRACTOR'S NAME: Hinterland Group Inc.

CONTRACTOR'S ADDRESS: 2051 West Blue Heron Blvd., Riviera Beach, FL 33404

CONTRACTOR'S PHONE: (561) 640-3503

SURETY COMPANY: Hartford Accident and Indemnity Company

SURETY'S ADDRESS: 2301 Lucien Way, #360, Maitland, FL 32751

OWNER'S NAME: PALM BEACH COUNTY

OWNER'S ADDRESS: 8100 Forest Hill Boulevard
West Palm Beach, FL 33413

OWNER'S PHONE: (561) 493-6000

DESCRIPTION OF WORK: Installation of pressure nodes at twenty-three (23) lift stations

PROJECT LOCATION: LS8101, LS8102, LS8111, LS8112, LS8117, LS8120, LS8130, LS8157,
LS8303, LS8202, LS8205, LS8215, LS8217, LS8222, LS8223, LS0684, LS1091, LS0698, LS0675, LS1017,
LS0983, LS4122, LS4131

LEGAL DESCRIPTION: S07, 05, 04-T44-R37; S42, 31, 29-T43-R37; S26-T43-R36; S14-T44-R36; S24-
T42-R36; S33-T41-R37; S29-T42-R37; S18, 29-T46-R42; S19, 20-T45-R42; S02-T47-R41; S32-T47-R42; S27,
23-T43-R41;

Revised 02/11/2021

PUBLIC CONSTRUCTION BOND

This Bond is issued in favor of the County conditioned on the full and faithful performance of the Work Authorization No. 3 to Lift Station Rehabilitation Continuing Construction Contract 2020, Contract Resolution No. R2020-1379 dated on September 15, 2020.

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 Four Hundred Seventy-One Thousand Nine Hundred Fifty-Seven Dollars and 00/100 Cents, \$471,957.00,

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 _____, 20____, entered into Work Authorization No. 3 to Lift Station Rehabilitation Continuing Construction Contract 2020, Contract Resolution No. R2020-1379 with the County for

Work Authorization Project Name: Lift Station Pressure Nodes Addition

Work Authorization Project No.: 19-047

Project Description: Installation of pressure nodes at twenty-three (23) lift stations

Project Location: LS8101, LS8102, LS8111, LS8112, LS8117, LS8120, LS8130, LS8157, LS8303, LS8202, LS8205, LS8215, LS8217, LS8222, LS8223, LS0684, LS1091, LS0698, LS0675, LS1017, LS0983, LS4122, LS4131

in accordance with Design Criteria Drawings and Specifications prepared by

Name of Design Firm: Mock, Roos & Associates, Inc.

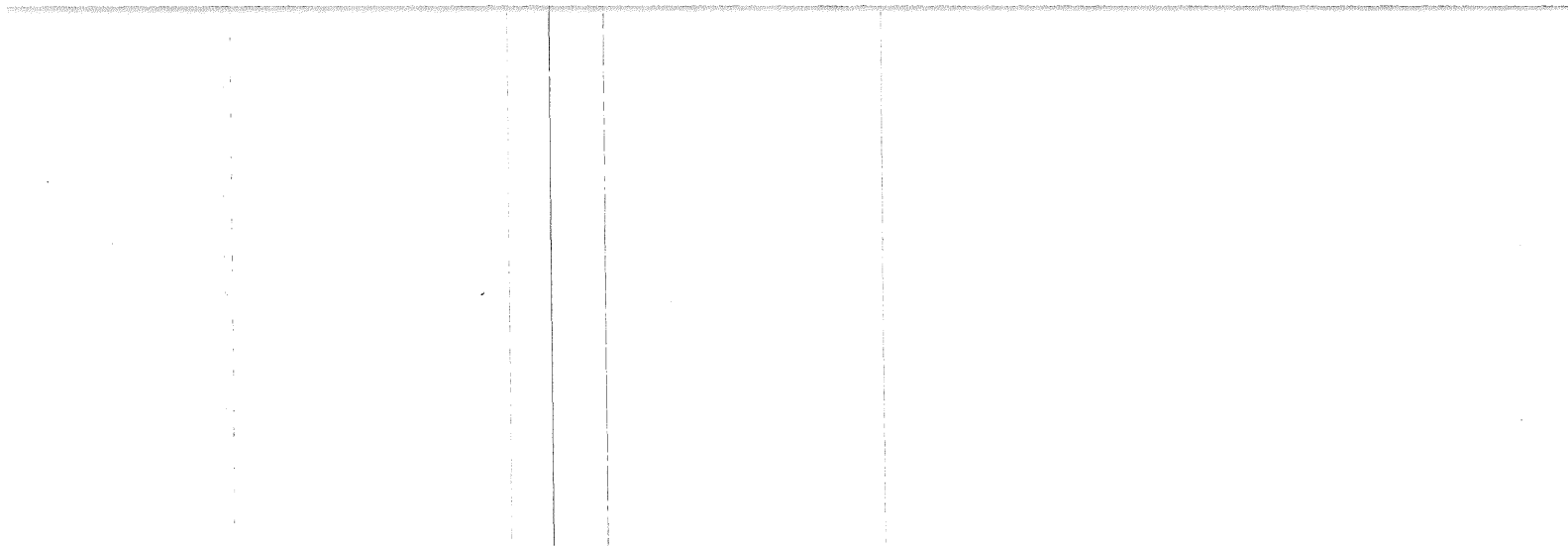
Location of Firm: 5720 Corporate Way, West Palm Beach, FL 33407

Phone: (561) 683-3113

Fax: _____

which Work Authorization No. 3 to Lift Station Rehabilitation Continuing Construction Contract 2020, Contract Resolution No. R2020-1379 is by reference made a part hereof in its entirety, and is hereinafter referred to as the Work Authorization.

- 1. THE CONDITION OF THIS BOND is that if Principal:
 - a. Performs the Work Authorization dated _____, 20____, between Principal and County for the construction of the above project, the Work Authorization being made a part of this bond by reference, at the times and in the manner prescribed in the Work Authorization; and



- b. 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 Work Authorization; and
 - c. 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 Work Authorization; and
 - d. Performs the guarantee of all work and materials furnished under the Work Authorization for the time specified in the Work Authorization; then this bond is void; otherwise it remains in full force.
2. Any changes in or under the contract documents and compliance or noncompliance with any formalities connected with the Work Authorization or the changes does not affect Surety's obligation under this bond and Surety waives notice of such changes.
 3. 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.
 4. Principal and Surety expressly acknowledge that any and all provisions relating to consequential, delay and liquidated damages contained in the Work Authorization 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 coverage's and limitations of this instrument.
 5. 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.
 6. Any action brought under this instrument shall be brought in the state court of competent jurisdiction in Palm Beach County, Florida and not elsewhere.

 Witness

MAYRA C. AGUIAR
 Print Name

 Witness

Ariel Rosario, Licensed 4-40 Agent/Witness
 Print Name

Hinterland Group Inc.

 Principal

Daniel Duke, III

Print name

President

Title
Hartford Accident and Indemnity Company

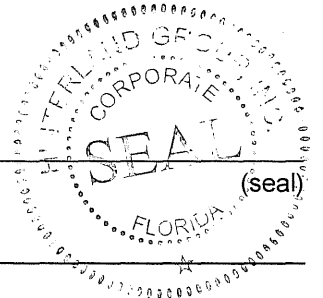
Jennie N. Lanman
 Surety (seal)

Jennie N. Lanman

Print name

Attorney-In-Fact

Title



ATTACHMENT D

FORM OF GUARANTEE

GUARANTEE FOR (Contractor and Surety Name) Hinterland Group Inc. and Hartford Accident and Indemnity Company

We the undersigned hereby guarantee that the Lift Station Rehabilitation Continuing Construction Contract 2020, Contract Resolution No. R2020-1379, Contract Dated September 15, 2020, PBCWUD Project No. 19-047, Work Authorization No. 3, Project Title: Lift Station Pressure Nodes Addition, 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 our work, together with any work of others 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 Final Completion of all 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 by the County. The date of Final Completion shall be the date set forth on the fully executed and acknowledged Contractor's Certification of Final Completion form. When correction work is started, it shall be carried through to completion.

In the event of our failure to acknowledge notice, and commence corrections of defective work 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. County and Contractor agree that the provisions of Florida Statute Chapter 558 shall not apply to this Contract/Agreement.

SEAL AND NOTARIAL ACKNOWLEDGMENT OF SURETY

Hinterland Group Inc.
(Contractor)

By: [Signature]
(Signature)



Daniel Duke, III, President
(Printed name)

Hartford Accident and Indemnity Company
(Surety)

(Seal)

By: [Signature]
(Signature)

Jennie N. Lanman, Attorney-In-Fact
(Printed name)



HALCYON UNDERWRITERS

YOUR PARTNER IN PRODUCTION. MAKING THE DIFFERENCE

555 Winderley Place, Suite 420
Maitland, Florida 32751

March 22, 2021

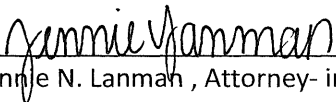
To: Palm Beach County
8100 Forest Hill Boulevard
West Palm Beach, FL 33413

Re: Hinterland Group Inc.
Bond No: 21BCSIP8659
Resolution No. R2020-1379
Lift Station Pressure Nodes Addition – WA #3

To Whom It May Concern

Please allow this letter to serve as formal authorization for Palm Beach County to date the captioned Construction Bond and power of attorney to coincide with the Contract Date. Please advise our office once dated. We are the bonding agent for Hinterland Group, Inc. They are bonded by Hartford Accident and Indemnity Company, an A+ rated surety in the AM Best Guide. Please be advised that we authorize you to date powers of attorney, form of guarantee and bonds for Bond No: 21BCSIP8659; Resolution No. R2020-1379; Lift Station Pressure Nodes Addition – WA #3.

Thank you and please call me if you have any questions.



Jennie N. Lanman, Attorney-in-Fact

POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD

BOND, T-12

One Hartford Plaza

Hartford, Connecticut 06155

bond.claims@thehartford.com

call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Name: HALCYON UNDERWRITERS
Agency Code: 21-224119

- Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
- Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
- Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
- Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
- Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of \$15,000,000:**

Jennie N. Lanman
of
Maitland, FL

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by X, and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on May 6, 2015 the Companies have caused these presents to be signed by its Senior Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



John Gray, Assistant Secretary

M. Ross Fisher, Senior Vice President

STATE OF CONNECTICUT }
COUNTY OF HARTFORD } ss. Hartford

On this 11th day of January 2016, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Senior Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.



CERTIFICATE

Kathleen T. Maynard
Notary Public
My Commission Expires July 31, 2021

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of March 22, 2021.
Signed and sealed at the City of Hartford.



Kevin Heckm

ATTACHMENT E
SCHEDULE OF BID ITEMS

Palm Beach County Water Utilities Department

Lift Station Rehabilitation Continuing Construction Contract 2020

Contract Resolution No. R2020-1379

Contract Dated: September 15, 2020

Work Authorization No.: 3

Contractor Name: Hinterland Group Inc.

Project Name: Lift Station Pressure Nodes Addition

WUD Project No.: 19-047

Bid Item No.	Item (Furnish and Install with Appurtenances)	Quantity	Units	Unit Price	Total
22	6" DIP Push-On Joint Force Main (36"-60" Cover)	40	LF	\$50.00	\$2,000.00
28	6" Mechanical Joint Restraint for DIP/PVC/HDPE	5	EA	\$150.00	\$750.00
33	Ductile Iron Fittings for Wastewater Force Main	5.3	Tons	\$6,500.00	\$34,450.00
47	4" to 6" Diameter Connection to Existing Wastewater Force Main (Joint Restraint for existing pipe to be included if required)	19	EA	\$3,500.00	\$66,500.00
68	Concrete Lift Station Pad Installation (6" thick w/ no.9 WWF)	65	SQ FT	\$10.00	\$650.00
84	Remote Telemetry Unit w/Solar Panel	6	EA	\$15,000.00	\$90,000.00
85	Antenna Installation w/ Tower	1	EA	\$4,500.00	\$4,500.00
92	2" Electrical Conduit Installation	860	LF	\$20.00	\$17,200.00
94	Ultrasonic Level Transducer	39	EA	\$1,500.00	\$58,500.00
95	1-1/2" - 2" New Water Service Tap up to 8" Water Main	3	EA	\$500.00	\$1,500.00
96	1-1/2" - 2" New Water Service Tap 10" to 12" Water Main	2	EA	\$500.00	\$1,000.00
98	1-1/2" PVC or HDPE Water Service Installation	340	LF	\$80.00	\$27,200.00
99	2" PVC or HDPE Water Service Installation	615	LF	\$100.00	\$61,500.00
100	Backflow Preventer Assembly	9	LS	\$2,500.00	\$22,500.00
106	Gate Valve Box (H-20 Load Rated)	25	EA	\$450.00	\$11,250.00
131	Asphalt Pavement Removal	120	SY	\$20.00	\$2,400.00
132	Concrete Pavement Removal	10	SY	\$55.00	\$550.00
133	Asphalt Pavement Overlay (1.5" thick, Asphalt Type S-III: 20 to 100 tons per work area) Including Milling and Resurfacing	85	Tons	\$300.00	\$25,500.00
139	Sod Replacement (St Augustine or Bahia)	450	SY	\$5.00	\$2,250.00
141	Maintenance of Traffic	2,500	LF	\$1.00	\$2,500.00
146	6" Line Stop (for Force Mains)	1	EA	\$5,500.00	\$5,500.00
151	Pre-Construction Video (per Project Location)	20	LS	\$600.00	\$12,000.00
(A) SUBTOTAL BASE BID (Bid Items 1-256)					\$450,200.00
259	Additional Work not included in Bid Items (See Item 259A Below)	1	LS	\$6,000.00	\$6,000.00
260	Mobilization (2.5% of Subtotal Bid Price [A])	1	LS	2.5%	\$11,255.00
261	Demobilization (1% of Subtotal Bid Price [A])	1	LS	1%	\$4,502.00
(B) SUBTOTAL ADDITIONAL WORK BID PRICE (Bid Items 259-261)					\$21,757.00
TOTAL BID PRICE (A + B)					\$471,957.00
Additional Work not included in Bid Items:					
259A	Fire Hydrant Assembly	1.00	Lump Sum	\$6,000.00	\$6,000.00

Revised 02/11/2021

ATTACHMENT F
OEBO SCHEDULE 1

Office of Equal Business Opportunity Compliance Programs

**OEBO SCHEDULE 1
LIST OF PROPOSED CONTRACTOR/CONSULTANT AND
SUBCONTRACTOR/SUBCONSULTANT PARTICIPATION**

SOLICITATION/PROJECT/BID NAME: Lift Station Pressure Nodes Addition
 NAME OF PRIME RESPONDENT/BIDDER: Hinterland Group Inc.
 CONTACT PERSON: Chase Roberts
 SOLICITATION OPENING/SUBMITTAL DATE: September 15, 2020

SOLICITATION/PROJECT/BID No.: 19-047
 ADDRESS: 2051 West Blue Heron Blvd., Riviera Beach, FL 33404
 PHONE NO.: (561) 640-3503 E-MAIL: crogers@hinterlandgroup.com
 DEPARTMENT: Palm Beach County Water Utilities Department

**PLEASE LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY THE PRIME CONTRACTOR/CONSULTANT ON THIS PROJECT.
 PLEASE ALSO LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY ALL SUBCONTRACTORS/SUBCONSULTANTS ON THE
 PROJECT.**

Name, Address and Phone Number	(Check all Applicable Categories)			DOLLAR AMOUNT OR PERCENTAGE OF WORK					Other (Please Specify)
	Non-SBE	M/WBE Minority/Woman Business	SBE Small Business	Black	Hispanic	Women	Caucasian		
1. Hinterland Group Inc. 2051 West Blue Heron Blvd., Riviera Beach, FL 33404 (561) 640-3503	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	\$471,957.00 (Non-SBE)	
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____	
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____	
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____	
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____	
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____	
(Please use additional sheets if necessary)				Total	\$0.00 (0.00%)	\$0,000.00 (0.00%)	\$00.00	\$00.00	\$0.00

Total Bid Price \$471,957.00

Total SBE – MWBE Participation \$00,000.00 (0.00%)

I hereby certify that the above information is accurate to the best of my knowledge


Signature

Chase Rogers, Project Director
Title

- Note:
- The amount listed on this form for a Subcontractor/subconsultant must be supported by price or percentage listed on the properly executed Schedule 2 or attached signed proposal.
 - Firms may be certified by Palm Beach County as an SBE and/or an M/WBE. If firms are certified as both an SBE and/or M/WBE, please indicate the dollar amount under the appropriate category.
 - Modification of this form is not permitted and will be rejected upon submittal.

ATTACHMENT F
OEBO SCHEDULE 2

Office of Equal Business Opportunity Compliance Programs

Revised 02/11/2024

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ATTACHMENT G

Palm Beach County Water Utilities Department

Lift Station Rehabilitation Continuing Construction Contract 2020

Resolution No. R2020-1379 Contract Dated September 15, 2020

SUMMARY OF SBE-M/WBE BUSINESS TRACKING

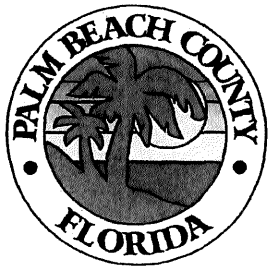
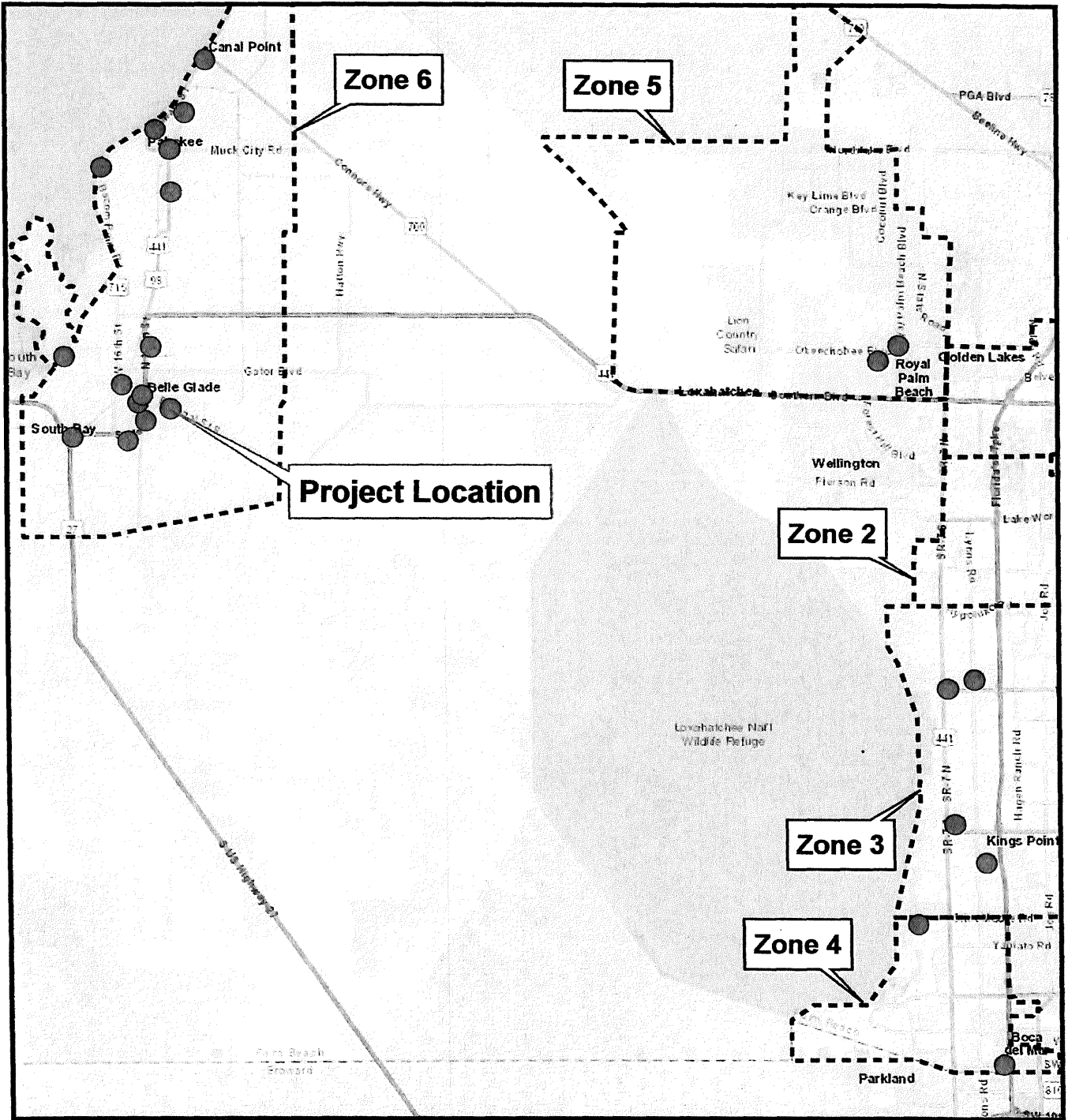
Master Contract Goals	SBE: <u>26.87%</u>	M/WBE: <u>3.18%</u>	MBE (H): <u>3.18%</u>
Current Proposal			
Value of Authorization No.: <u>3</u>	\$471,957.00		
Value of SBE-M/WBE Letters of Intent	\$00,000.00	\$0,000.00	\$0,000.00
Actual Percentage	0.00%	0.00%	0.00%
Signed/Approved Authorizations			
Total Value of Authorizations	\$0.00		
Total Value of SBE-M/WBE Signed Subcontractors	\$0.00	\$0.00	\$0.00
Actual Percentage	0.00%	0.00%	0.00%
Signed/Approved Authorizations Plus Current Proposal			
Total Value of Authorization	\$471,957.00		
Total Value of Subcontractors & Letters of Intent	\$0,000.00	\$0,000.00	\$0,000.00
Actual Percentage	0.00%	0.00%	0.00%

Revised 02/11/2021

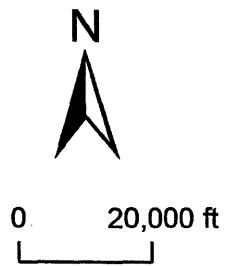
ATTACHMENT H

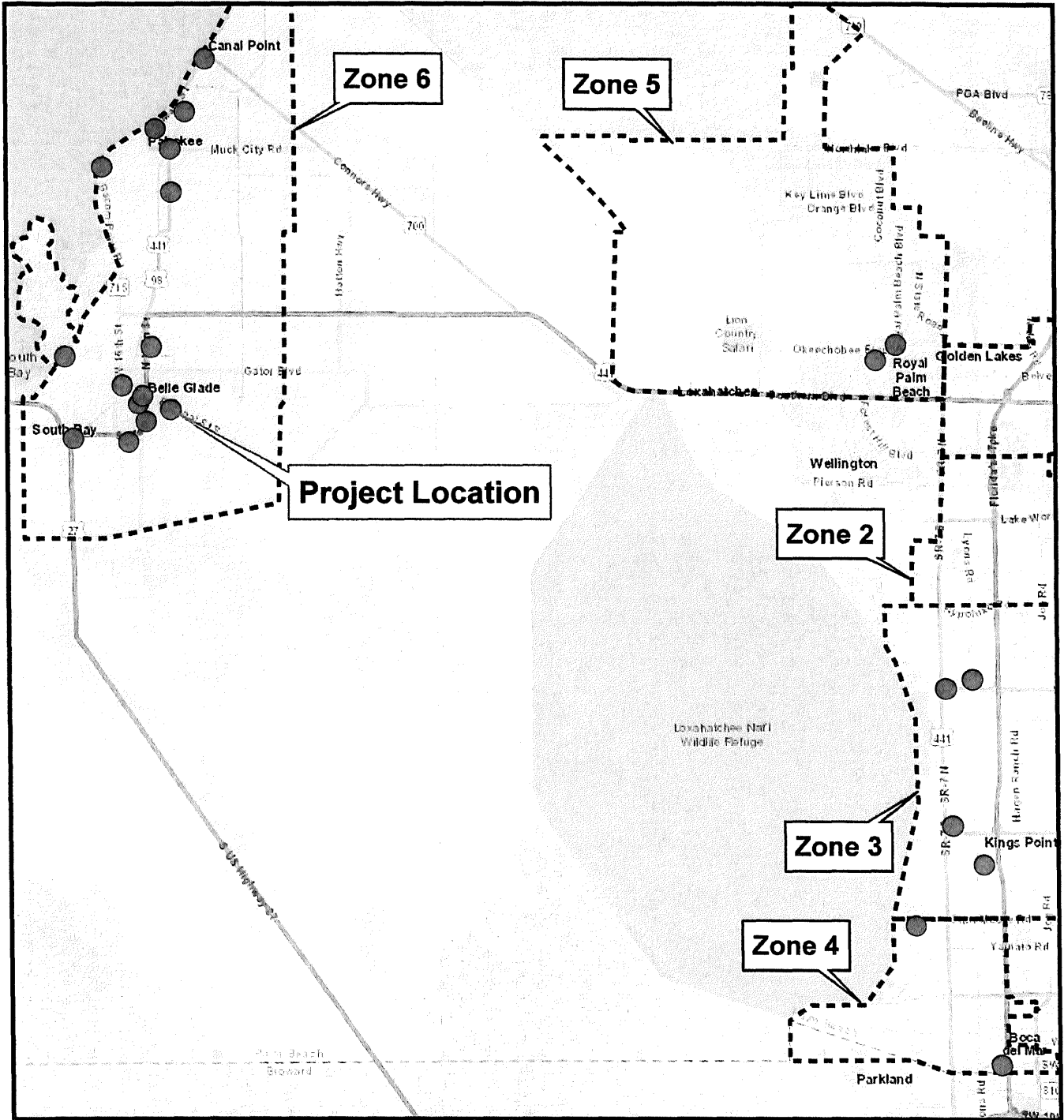
Location Map

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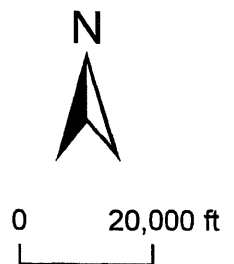


ATTACHMENT H
LOCATION MAP
PBCWUD Project No. 19-047
Lift Station Pressure Nodes
Work Authorization No 3
Hinterland Group Inc.





**ATTACHMENT 2
LOCATION MAP
AGENDA ITEM**
Lift Station Pressure Nodes
PBCWUD Project No. 19-047
Work Authorization No 3
Hinterland Group Inc.





ATTACHMENT 3

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/29/2021

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 South Shore Insurance Inc. 955 SE Central Parkway Stuart FL 34994	CONTACT NAME: PHONE (A/C No. Ext): (772) 426-9973 FAX (A/C No.): (772) 872-5870 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #
INSURED Hinterland Group Inc. 2051 West Blue Heron Blvd Riviera Beach, FL 33404	INSURER A: Zurich American Insurance Company 16535 INSURER B: Travelers Property Casualty Company of Amer 25674 INSURER C: American Guarantee & Liability Insurance Co. 26247 INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** **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 INSR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU Coverage Included <input checked="" type="checkbox"/> Primary/Non Contributory GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	x	x	GLO 4956332-01	01/31/2021	01/31/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$	
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS	x	x	BAP 4956334-01	01/31/2021	01/31/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			ZUP81N2525921	01/31/2021	01/31/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	x	WC 4956333-01	01/31/2021	01/31/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Inland Marine			CPP667426001	01/31/2021	01/31/2022	Installation Floater \$ 2,000,000 Rented/Leased Equi \$ 500,000	

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

Should any of the above policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 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. Certificate Holder is as an additional insured on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. A Waiver of Subrogation is provided on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. Coverage is primary/noncontributory when required by written contract agreement. Daniel Amos Duke III CGC1520354 / Daniel Amos Duke III CUC1224634 / Charles J Breig EC13003615

CERTIFICATE HOLDER Palm Beach County Palm Beach County Board of County Commissioners Insurance Compliance PO Box 100085- DX Duluth, GA 30096	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 <JNL>
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/13/2020

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

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

PRODUCER South Shore Insurance Inc. 955 SE Central Parkway Stuart FL 34994	CONTACT NAME: Jennie Lanman PHONE (A/C, No. Ext): (772) 426-9973 E-MAIL ADDRESS: jennie@southshore-insurance.com	FAX (A/C, No.): 772-872-5870
	INSURER(S) AFFORDING COVERAGE	
INSURED Hinterland Group Inc. 2051 W Blue Heron Blvd Riviera Beach, FL 33404	INSURER A: American Zurich Insurance Company	NAIC # 40142
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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

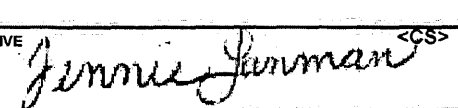
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Builders Risk	Y		EC15291752	07/14/2020	07/14/2021	Blanket Limit \$11,000,000

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

When required by a written or oral contract, all owners; contractors and subcontractors of every tier; manufacturers; suppliers; architects and engineers are insured for their interest in the Covered Property while that Covered Property is at the "project site".

RE:
Builders Risk 5% wind/hail and \$10,000 all other deductible. This policy is on an All Risk form with 100% replacement cost.

CERTIFICATE HOLDER Palm Beach County Board of County Commissioners Water Utilities Department 8100 Forest Hill Boulevard West Palm Beach, FL 33413	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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