



City of Clearwater  
Procurement

Jay Ravins, Department Director  
100 South Myrtle Avenue, Clearwater, FL 33756

---

[INNOVATIVE MASONRY RESTORATION] RESPONSE DOCUMENT REPORT

ITB No. 21-0017-UT

NE WRF Clarifier Splitter Box Rehab

RESPONSE DEADLINE: October 15, 2025 at 2:00 pm

Report Generated: Wednesday, March 11, 2026

Innovative Masonry Restoration Response

CONTACT INFORMATION

**Company:**

Innovative Masonry Restoration

**Email:**

dave@imrestoration.com

**Contact:**

David LaPorte

**Address:**

16264 Lakeside Ave SE  
Prior Lake, MN 55372

**Phone:**

(952) 457-3818

**Website:**

[www.imrestoration.com](http://www.imrestoration.com)

**Submission Date:**

Oct 15, 2025 1:54 PM (Eastern Time)

## ADDENDA CONFIRMATION

*No addenda issued*

## QUESTIONNAIRE

### 1. Certified Business\*

Are you a Certified Small Business or a Certified Minority, Woman or Disadvantaged Business Enterprise?

No

### 2. Vendor Certification\*

By submitting this response, the Vendor hereby certifies that:

- A. It is under no legal prohibition on contracting with the City of Clearwater.
- B. It has read, understands, and is in compliance with the specifications, terms and conditions stated herein, as well as its attachments, and any referenced documents.
- C. It has no known, undisclosed conflicts of interest.
- D. The prices offered were independently developed without consultation or collusion with any of the other vendors or potential vendors or any other anti-competitive practices.
- E. No offer of gifts, payments or other consideration were made to any City employee, officer, elected official, or consultant who has or may have had a role in the procurement process for the commodities or services covered by this contract. The Vendor has not influenced or attempted to influence any City employee, officer, elected official, or consultant in connection with the award of this contract.
- F. It understands the City may copy all parts of this response, including without limitation any documents or materials copyrighted by the Vendor, for internal use in evaluating respondent's offer, or in response to a public records request under Florida's public

records law (F.S. Chapter 119) or other applicable law, subpoena, or other judicial process; provided that the City agrees not to change or delete any copyright or proprietary notices.

- G. It hereby warrants to the City that the Vendor and its subcontractors will comply with, and are contractually obligated to comply with, all federal, state, and local laws, rules, regulations, and executive orders.
- H. It certifies that Vendor is not presently debarred, suspended, proposed for debarment, declared ineligible, voluntarily excluded, or disqualified from participation in this matter from any federal, state, or local agency.
- I. It will provide the commodities or services specified in compliance with all federal, state, and local laws, rules, regulations, and executive orders if awarded by the City.
- J. It is current in all obligations due to the City.
- K. It will accept all terms and conditions as set forth in this solicitation if awarded by the City.
- L. The signatory is an officer or duly authorized representative of the Vendor with full power and authority to submit binding offers and enter into contracts for the commodities or services as specified herein.

Confirmed

### **3. E-Verify System Certification\***

***PER FLORIDA STATUTE 448.095, CONTRACTORS AND SUBCONTRACTORS MUST REGISTER WITH AND USE THE E-VERIFY SYSTEM TO VERIFY THE WORK AUTHORIZATION STATUS OF ALL NEWLY HIRED EMPLOYEES.***

The affiant, by virtue of confirming below, certifies that:

- A. The Contractor and its Subcontractors are aware of the requirements of Florida Statute 448.095.
- B. The Contractor and its Subcontractors are registered with and using the E-Verify system to verify the work authorization status of newly hired employees.
- C. The Contractor will not enter into a contract with any Subcontractor unless each party to the contract registers with and uses the E-Verify system.

- D. The Subcontractor will provide the Contractor with an affidavit stating that the Subcontractor does not employ, contract with, or subcontract with unauthorized alien.
- E. The Contractor must maintain a copy of such affidavit.
- F. The City may terminate this Contract on the good faith belief that the Contractor or its Subcontractors knowingly violated Florida Statutes 448.09(1) or 448.095(2)(c).
- G. If this Contract is terminated pursuant to Florida Statute 448.095(2)(c), the Contractor may not be awarded a public contract for at least 1 year after the date on which this Contract was terminated.
- H. The Contractor is liable for any additional cost incurred by the City as a result of the termination of this Contract.

Confirmed

#### **4. Scrutinized Company Certification\***

Please download the below documents, complete, notarize, and upload.

- [SCRUTINIZED COMPANIES AND B...](#)

SCRUTINIZED\_COMPANIES\_AND\_BUSINESS\_OPERATIONS\_CERTIFICATION\_(7)\_1).pdf

#### **5. Compliance with Anti-Human Trafficking Laws\***

Please download the below documents, complete, and upload.

- [Compliance with 787.06 form...](#)

Compliance\_with\_787.06\_form\_\_(4).pdf

#### **6. Section V - Contract Documents\***

Please download the below documents, complete, sign, and upload.

- [Section V - Contract Docume...](#)

Clearwater\_Clarifier\_Bid\_Bond.pdf

Non-Collusion\_Affidavit.pdf

Proposal\_Form.pdf  
 Addendum\_Acknowledgement.pdf

**7. W-9\***

Upload your current W-9 form. (available at <https://www.irs.gov/pub/irs-pdf/fw9.pdf>)

W9\_2025.pdf

**PRICE TABLES**

**21-0017-UT NE WRF CLARIFIER SPLITTER BOX REHAB**

ALL lines must contain a bid to be considered. Located at 3290 S.R. 580 Safety Harbor, FL 34695, the NE WRF Clarifier Splitter Box Rehab project 21-0017-UT scope is splitter boxes rehabilitation and slide gate replacements as well as repairs of concrete cracks and coating of channels to clarifiers. It also includes the addition of stairs.

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	Remove Defective Concrete & Surface Repairs – Overlay Thickness < 1/4"	10	SF	\$120.00	\$1,200.00
2	Remove Defective Concrete & Repair Concrete Spalls	5	CF	\$720.00	\$3,600.00
3	Clean and Epoxy Protective Coating for Concrete Surfaces	12,000	SF	\$14.00	\$168,000.00
4	Repair Structural Cracks (Epoxy Injection)	350	LF	\$55.00	\$19,250.00
5	Repair Expansion Joint	25	LF	\$285.00	\$7,125.00
6	Clean and Apply Sealant on Inside Interface Between Metal Splash Plate and Top of Wall	500	LF	\$15.00	\$7,500.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
7	Slide Gate Procurement and Installation	8	EA	\$37,250.00	\$298,000.00
8	All Other Work Required to Complete the Base Bid	1	LS	\$92,000.00	\$92,000.00
<b>TOTAL</b>					<b>\$596,675.00</b>

**OWNER'S CONTINGENCY**

10% of the subtotal from lines 1 through 8 on the table above.

Line Item	Description	Unit of Measure	Unit Cost
9	Owner's Contingency (10%)	LS	\$59,667.50

SCRUTINIZED COMPANIES FORMS

SCRUTINIZED COMPANIES AND BUSINESS OPERATIONS WITH CUBA AND SYRIA CERTIFICATION FORM

IF YOUR BID/PROPOSAL IS \$1,000,000 OR MORE, THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID/PROPOSAL. FAILURE TO SUBMIT THIS FORM AS REQUIRED MAY DEEM YOUR SUBMITTAL NONRESPONSIVE.

The affiant, by virtue of the signature below, certifies that:

- 1. The vendor, company, individual, principal, subsidiary, affiliate, or owner is aware of the requirements of section 287.135, Florida Statutes, regarding companies on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or engaging in business operations in Cuba and Syria; and
2. The vendor, company, individual, principal, subsidiary, affiliate, or owner is eligible to participate in this solicitation and is not listed on either the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Sector List, or engaged in business operations in Cuba and Syria; and
3. Business Operations means, for purposes specifically related to Cuba or Syria, engaging in commerce in any form in Cuba or Syria, including, but not limited to, acquiring, developing, maintaining, owning, selling, possessing, leasing or operating equipment, facilities, personnel, products, services, personal property, real property, military equipment, or any other apparatus of business or commerce; and
4. If awarded the Contract (or Agreement), the vendor, company, individual, principal, subsidiary, affiliate, or owner will immediately notify the City of Clearwater in writing, no later than five (5) calendar days after any of its principals are placed on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Sector List, or engaged in business operations in Cuba and Syria.

David LaPorte

Authorized Signature

David LaPorte

Printed Name

Principal

Title

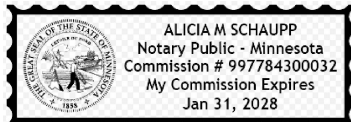
Innovative Masonry Restoration LLC

Name of Entity/Corporation

STATE OF MN

COUNTY OF Dakota

The foregoing instrument was acknowledged before me by means of physical presence or online notarization on, this 14 day of October, 2025, by David LaPorte (name of person whose signature is being notarized) as the Principal (title) of Innovative Masonry Restoration LLC (name of corporation/entity), personally known, or produced Driver's license (type of identification) as identification, and who did/did not take an oath.



Alicia Schaupp

Notary Public

Alicia Schaupp

Printed Name

My Commission Expires: 1/31/28

NOTARY SEAL ABOVE

SCRUTINIZED COMPANIES FORMS

SCRUTINIZED COMPANIES THAT BOYCOTT ISRAEL LIST CERTIFICATION FORM

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID/PROPOSAL. FAILURE TO SUBMIT THIS FORM AS REQUIRED MAY DEEM YOUR SUBMITTAL NONRESPONSIVE.

The affiant, by virtue of the signature below, certifies that:

- 1. The vendor, company, individual, principal, subsidiary, affiliate, or owner is aware of the requirements of section 287.135, Florida Statutes, regarding companies on the Scrutinized Companies that Boycott Israel List, or engaged in a boycott of Israel; and
2. The vendor, company, individual, principal, subsidiary, affiliate, or owner is eligible to participate in this solicitation and is not listed on the Scrutinized Companies that Boycott Israel List, or engaged in a boycott of Israel; and
3. "Boycott Israel" or "boycott of Israel" means refusing to deal, terminating business activities, or taking other actions to limit commercial relations with Israel, or persons or entities doing business in Israel or in Israeli-controlled territories, in a discriminatory manner.
4. If awarded the Contract (or Agreement), the vendor, company, individual, principal, subsidiary, affiliate, or owner will immediately notify the City of Clearwater in writing, no later than five (5) calendar days after any of its principals are placed on the Scrutinized Companies that Boycott Israel List, or engaged in a boycott of Israel.

David LaPorte

Authorized Signature

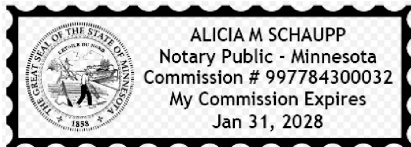
David LaPorte

Printed Name

Principal

Title Innovative Masonry Restoration LLC

Name of Entity/Corporation



STATE OF MN

COUNTY OF Dakota

The foregoing instrument was acknowledged before me by means of physical presence or online notarization on, this 14 day of October, 20 25, by David LaPorte (name of person whose signature is being notarized) as the Principal (title) of Innovative Masonry Restoration LLC (name of corporation/entity), personally known, or produced driver's license (type of identification) as identification, and who did/did not take an oath.

Alicia Schaupp

Notary Public

Alicia Schaupp

Printed Name

My Commission Expires: 1/31/28
NOTARY SEAL ABOVE

## Compliance with Anti-Human Trafficking Laws

Pursuant to Section 787.06 (13), Florida Statutes, this form must be completed by an officer or representative of a non-governmental entity when a contract is executed, renewed, or extended between the non-governmental entity and the City of Clearwater.

The undersigned, on behalf of the entity listed below ("Entity"), hereby attests under penalty of perjury that:

Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes.

The undersigned is authorized to execute this form on behalf of Entity.

Date: 10/14, 2025      Signed: David LaPorte  
Entity: Innovative Masonry Restoration LLC      Name: David LaPorte  
Title: Principal

**PROPOSAL/BID BOND**

(Not to be filled out if a certified check is submitted)

**KNOWN ALL MEN BY THESE PRESENTS:** That we, the undersigned, Innovative Masonry Restoration LLC as Contractor, and Granite Re, Inc. as Surety, whose address is 14001 Quailbrook Dr. Oklahoma City, OK 73134, are held and firmly bound unto the City of Clearwater, Florida, in the sum of Ten Percent of Bid Amount (10% of bid amount) Dollars (\$XXX) (being a minimum of 10% of Contractor's total bid amount) for the payment of which, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, executors, administrators, successors and assigns.

The condition of the above obligation is such that if the attached Proposal of Innovative Masonry Restoration LLC as Contractor, and Granite Re, Inc. as Surety, for work specified as: Project No. 21-0017-UT, NE WRF Clarifier Splitter Box Rehab

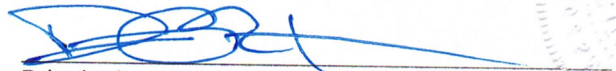
all as stipulated in said Proposal, by doing all work incidental thereto, in accordance with the plans and specifications provided herefor, all within Pinellas County, is accepted and the contract awarded to the above named bidder, and the said bidder shall within ten days after notice of said award enter into a contract, in writing, and furnish the required Public Construction Bond with surety or sureties to be approved by the City Manager, this obligation shall be void, otherwise the same shall be in full force and virtue by law and the full amount of this Proposal/Bid Bond will be paid to the City as stipulated or liquidated damages.

Principal must indicate whether:

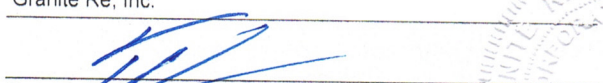
       Corporation,        Partnership,         Company, or        Individual

Signed this 13th day of October, 2025.

Innovative Masonry Restoration LLC  
Contractor

  
Principal

By: Dave LaPorte, Principal  
Title

Granite Re, Inc.  
  
Surety Troy Staples, Attorney-in-Fact

The person signing shall, in his own handwriting, sign the Principal's name, his own name, and his title; where the person is signing for a Corporation, he must, by Affidavit, show his authority to bind the Corporation – **provide Affidavit.**

**AFFIDAVIT**

(To be filled in and executed if the bidder is a corporation) *N/A*

STATE OF FLORIDA )

COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_, being duly sworn, deposes and says that he/she is Secretary of \_\_\_\_\_ a corporation organized and existing under and by virtue of the laws of the State of Florida, and having its principal office at:

\_\_\_\_\_  
(Street & Number) (City) (County) (State)

Affiant further says that he is familiar with the records, minute books and by-laws of

\_\_\_\_\_  
(Name of Corporation)

Affiant further says that \_\_\_\_\_ is \_\_\_\_\_  
(Officer's Name) (Title)

of the corporation, is duly authorized to sign the Proposal for \_\_\_\_\_

or said corporation by virtue of \_\_\_\_\_

(state whether a provision of by laws or a Resolution of Board of Directors. If by Resolution give date of adoption).

\_\_\_\_\_

\_\_\_\_\_  
Affiant

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Type/print/stamp name of Notary

\_\_\_\_\_  
Title or rank, and Serial No., if any

**NON-COLLUSION AFFIDAVIT**

Minnesota

STATE OF ~~FLORIDA~~ )

COUNTY OF Dakota )

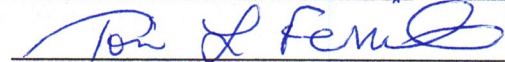
Dave LaPorte being, first duly sworn, deposes and says that he is

Principal of Innovative Masonry Restoration LLC, the party making the foregoing Proposal or Bid; that such Bid is genuine and not collusive or sham; that said bidder is not financially interested in or otherwise affiliated in a business way with any other bidder on the same contract; that said bidder has not colluded, conspired, connived, or agreed, directly or indirectly, with any bidders or person, to put in a sham bid or that such other person shall refrain from bidding, and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference, with any person, to fix the bid price or affiant or any other bidder, or to fix any overhead, profit or cost element of said bid price, or that of any other bidder, or to secure any advantage against the City of Clearwater, Florida, or any person or persons interested in the proposed contract; and that all statements contained in said proposal or bid are true; and further, that such bidder has not directly or indirectly submitted this bid, or the contents thereof, or divulged information or data relative thereto to any association or to any member or agent thereof.



\_\_\_\_\_  
Affiant

Sworn to and subscribed before me this 13th day of October, 2025.



\_\_\_\_\_  
Notary Public



**PROPOSAL**

(2)

Attached hereto is a bond or certified check on \_\_\_\_\_  
Bond - Granite RE, Inc as Surety \_\_\_\_\_ Bank, for the sum of \_\_\_\_\_  
Ten Percent of Bid Amount (10% of bid amount) \_\_\_\_\_ (\$ \_\_\_\_\_)  
(being a minimum of 10% of Contractor's total bid amount).

The full names and residences of all persons and parties interested in the foregoing bid are as follows:

(If corporation, give the names and addresses of the President and Secretary. If a firm or partnership, the names and addresses of the members or partners. The Bidder shall list not only his name but also the name of any person with whom bidder has any type of agreement whereby such person's improvements, enrichment, employment or possible benefit, whether sub-contractor, materialman, agent, supplier, or employer is contingent upon the award of the contract to the bidder).

NAMES:	ADDRESSES:
Jim Dolby	6160 150th St Prior Lake MN 55372
David LaPorte	16264 Lakeside Ave SE Prior Lake MN 55372
_____	_____
_____	_____

Signature of Bidder: 

The person signing shall, in his own handwriting, sign the Principal's name, his own name and his title. Where the person signing for a corporation is other than the President or Vice President, he must, by affidavit, show his authority, to bind the corporation.

Principal: David LaPorte

By:  Title: Principal

Company Legal Name: Innovative Masonry Restoration LLC

Doing Business As (if different than above): \_\_\_\_\_

Business Address of Bidder: 16264 Lakeside Ave SE

City and State: Prior Lake MN Zip Code 55372

Phone: 612-548-5589 Email Address: dave@imrestoration.com

Dated at 2:00pm, this 14 day of October, A.D., 2025

**CITY OF CLEARWATER**  
**ADDENDUM SHEET**

PROJECT: 21-0017 UT

Acknowledgment is hereby made of the following addenda received since issuance of Plans and Specifications.

Addendum No. _____	Date: _____	N/A	No Addendums Issued
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		
Addendum No. _____	Date: _____		

Innovative Masonry Restoration LLC  
(Name of Bidder)



\_\_\_\_\_  
(Signature of Officer)

Principal  
(Title of Officer)

10/14/25  
(Date)

# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the requester. Do not send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

<b>Print or type.</b> See Specific Instructions on page 3.	<p><b>1</b> Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p><b>Innovative Masonry Restoration LLC</b></p>	
	<p><b>2</b> Business name/disregarded entity name, if different from above.</p>	
	<p><b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor    <input type="checkbox"/> C corporation    <input type="checkbox"/> S corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input checked="" type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>S</b></p> <p><b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions)</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p><b>3b</b> If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . <input type="checkbox"/></p>	
	<p><b>5</b> Address (number, street, and apt. or suite no.). See instructions.</p> <p><b>16264 Lakeside Ave SE</b></p>	<p>Requester's name and address (optional)</p>
	<p><b>6</b> City, state, and ZIP code</p> <p><b>Prior Lake MN 55372</b></p>	
	<p><b>7</b> List account number(s) here (optional)</p>	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									
4	6	-	4	3	2	0	5	8	5

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	<i>Alicia Schaupp</i>	Date
			1/15/2025

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**What's New**

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).