

ADDENDUM #2 TO #21-B-727

TO: Potential Proposers

FROM: Joan Wheaton, Procurement Analyst

DATE: June 23, 2021

PLEASE NOTE THE FOLLOWING INFORMATION REGARDING BID #21-B-727

Esclation/De-escalation

The initial term of this bid shall be for a period of three years, beginning October 1, 2021. Pricing for this bid will remain in effect for the three-year period. There is an option of renewal for an additional two-year period at which time pricing can be reviewed based upon the current Consumer Price Index (CPI). The increase/decrease in price would have to be agreed upon by all parties in order to renew the bid. Any proposed price increase must be requested by the vendor prior to June 1, 2024.

Please return the signed original of this Addendum #2 with your BID package for Bid #21-B-727 have read and understand the Addendum to:
Signature
Firm Angelos Recycled Materials
Typed Name and Title DOMINIC JAFRATE - PRESIDENT

IT IS BIDDERS RESPONSIBILITY TO CHECK <u>www.demandstar.com</u> for ADDENDUMS BEFORE SUBMITTAL



ADDENDUM #1 TO #21-B-727

TO: Potential Proposers
FROM: Joan Wheaton, Procurement Analyst
DATE: June 2, 2021
PLEASE NOTE THE FOLLOWING INFORMATION REGARDING BID #21-B-727
ATTACHED REVISED BID FORM
REMINDER: This bid is a cooperative bid for the listed municipalities included in the bid specifications
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~
Please return the signed original of this Addendum #1 with your BID package for Bid #21-B-727
I have read and understand the Addendum to.
Signature
Firm Angelo'S RECYCLED MATERIALS  Typed Name and Title DOMINIC IAFRATE - PRESIDENT
Typed Name and Title DOMINIC IAFRATE - PRESIDENT

IT IS BIDDERS RESPONSIBILITY TO CHECK <u>www.demandstar.com</u> for ADDENDUMS BEFORE SUBMITTAL

### CITY OF LARGO, FLORIDA REVISED BID FORM FOR

# YARD TRASH, CLASS III & CONSTRUCTION DEMOLITION DEBRIS DISPOSAL BID #21-B-727

	Price
	<u>Per Ton</u>
Pure Construction-Demolition Debris	\$ 42.00
Yard Waste - Clean	\$ 42.00
Yard Waste - Clean w/ material in bags	\$ 42.00
Class III/Select Compactor Roll-offs	\$ 42.00
List holidays when business is closed: <u>A</u> TULY 9TH, LABOE DAY,  Round Trip Driving Distance from each Citie	THANKSUIVING CHRISTITAS
	is facility to the disposal facility:
	Largo, FL 33771 - To Bidders Disposal Site
5 MILES	
City of Dunedin: Solid Waste Yard, 1070 Virginia St., Dunedii	•
City of Clearwater: Solid Waste Department, 1701 N. Hercules	s Avenue, Clearwater, FI 33765 -To Bidders Disposal
City of Treasure Island: Public Works, 108 th Ave., Treasure Island, F 22 MILES	L 33706 – To Bidders Disposal Site

# CITY OF LARGO, FLORIDA REVISED BID FORM FOR

### YARD TRASH, CLASS III & CONSTRUCTION DEMOLITION DEBRIS DISPOSAL BID #21-B-727 PAGE 2

Location of Disposal Site (address)	: Hilgelos Kecycled L'atterials
	1755 ZOTH AVE. SE
	LARGO FC 33771
The undersigned bidder does her accordance with the Specifications the price indicated.	reby agree to furnish the City of Largo, Florida, the items listed in shown by the Invitation to Bid to be delivered to the specified site for
IT IS BIDDERS F FOR FINAL DOCU	RESPONSIBILITY TO CHECK www/demandstar.com JMENTS AND ADDENDUMS BEFORE SUBMITTAL
THIS BID MUST BE SIGNED B HIS/HER OWN NAME.	Y A PERSON AUTHORIZED TO ACT FOR THE COMPANY IN
BIDDER NAME:	Hngelo's Aggregate Materials  DBA Angelo's Recycled Materials
	DBA Angelo's Recycled Materials
ADDRESS:	855 28TH ST. S. ST. PETE 33712
PURCHASE ORDER ADDRESS:	855 28714 ST. S. ST. PETE 33712
PHONE NUMBER:	1727) 581-1544
COMPANY CONTACT (REP):	DOMINIC JAFRATE (727) 919-4702
EMAIL ADDRESS(REP):	DATAFRATE & ANGELOS RM. COM
SIGNATURE:	14

59-3448428

TAX ID# SSN or EIN:

# CITY OF LARGO, FLORIDA REFERENCE INFORMATION FOR YARD TRASH, CLASS III & CONSTRUCTION DEMOLITION DEBRIS DISPOSAL BID #21-B-727

Organization	ITY OF CARLO		
Contact Person/	TICHAEL GOEDON	2	
Address			
City	State	Zip	Phone Number (727) 587 - 676
Project Cost		Date	Performed
Organization(	CITY OF CLEARU	ATER	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	_ 4 0		
Address			
City	State	Zip	Phone Number (727) 562 - 4990
Project Cost		Date	Performed
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Contact Person /	3111 PILVEUM		
City	Ct-t-		
Project Cost	State		Phone Number (<u>727)</u>
~~~~~~~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date	Performed
Organization			
Contact Person		1	
Address			
City	State	Zip	Phone Number ()
			Performed
Address			
City	State	Zin	Phone Number ()
	- Giale		
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Representative Type	d Name/Title DOITIAN	IAFO	ATT - PRESIDENT
Representative Sign	atura	$\sum_{i=1}^{n}$	Firm ANGELOS
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CITY OF LARGO, FLORIDA STATEMENT OF NO BID FOR

YARD TRASH, CLASS III & CONSTRUCTION DEMOLITION DEBRIS DISPOSAL BID #21-B-727

IF YOU DO NOT INTEND TO BID ON THIS REQUIREMENT, PLEASE COMPLETE AND RETURN THIS FORM PRIOR TO DATE SHOWN FOR RECEIPT OF BIDS TO:
City of Largo, Office of Performance and Budget, Post Office Box 296, Largo, FL 33779-0296.
OR EMAIL to iwheaton@largo.com

OR EMAIL to j	Office of Performance and Budget, Post Office Box 296, Largo, FL 33779-0296. iwheaton@largo.com
WE, THE UNE	DERSIGNED, HAVE DECLINED TO BID FOR THE FOLLOWING REASON(S):
····	WE DO NOT OFFER THIS PRODUCT OR EQUIVALENT.
	SPECIFICATIONS ARE TOO "TIGHT", I.E. GEARED TOWARD ONE BRAND OR MANUFACTURER ONLY (PLEASE EXPLAIN BELOW).
	UNABLE TO MEET SPECIFICATIONS (PLEASE EXPLAIN BELOW).
	SPECIFICATIONS UNCLEAR (PLEASE EXPLAIN BELOW).
	INSUFFICIENT TIME TO RESPOND TO INVITATION TO BID.
	OUR PRODUCT SCHEDULE WOULD NOT PERMIT US TO PERFORM.
	UNABLE TO MEET BOND REQUIREMENTS.
	OTHER (PLEASE SPECIFY BELOW).
REMARKS: _	
WE UNDERST NAME MAY BI FOR FUTURE	FAND THAT IF THE "NO BID" LETTER IS NOT EXECUTED AND RETURNED, OUR E DELETED FROM THE LIST OF QUALIFIED BIDDERS FOR THE CITY OF LARGO PROJECTS.
Typed Name a	and Title
Signature	
Company nam	e
Address	
City	State Zip Code
Telephone Nur	mber () Fax ()

INSURANCE REQUIREMENTS CHECKLIST FOR BID #21-B-727

Items marked "X" must be provided

_X	General Liability	Minimum Limits Required		
	x Commercial General Liability	\$_2.000.000 General Aggregate		
	X Occurrence Form	\$ 1.000,000 Product/Complete Operations Agg.		
		\$ 1,000,000 Personal & Advertising Injury		
		\$_1,000,000 Each Occurrence		
		\$		
_X	Automobile Liability			
	Owned, Hired & Non-Owned	\$ _1.000,000 Combined Single Limit per Occurrence		
_X	Worker's Compensation	Statutory		
	and Employer's Liability	\$100,000 Each Accident		
		\$ 500,000 Disease - Policy Limit		
		\$ 100,000 Disease - Each employee		
	Professional Liability - Errors & Omissions (*To be o	completed by Bidder)		
	* Deductible: \$			
	Claims Made (Y/N):	\$ Aggregate \$ Each Claim		
	* Occurrence (Y/N):			
	* Defense included in Limits (Y/N):			
	Builder's Risk/Installation Floater	(* To be completed by Bidder)		
	* Flood Included \$ Limit	\$100% of Completed or Installed Value		
	* Transportation Included \$Limit	All-Risk Form		
	* Storage Included \$ Limit			
	City Must Be A Named Insured. Copy of Policy Will E	Be Required.		
	<u>Other</u>			
		Φ.		
_		\$		
_		\$ <u></u>		
_X	The Certificate of Insurance must show "The City of I	argo, its elected officials and employees" as an additional insured.		
	The Certificate shall bear the requisite endorsements	providing that the City is an additional insured and providing for		
	waiver of subrogation by the Vendor/Subcontractor w	hen applicable.		
v				
	Vendor/Subcontractor shall provide immediate notice	of any Vendor/Subcontractor initiated cancellation, non-renewal or		
	shall immediately forward to the City any notice it re-	d or maintained pursuant to this RFP/Bid. Vendor/Subcontractor		
	that is initiated by a policy provider(s).	eives of cancellation, non-renewal or adverse change to any policy		
	and to made by a policy provider (s).			
_X	Certificates must identify bid number and bid title.			
	Subcontractors must carry same Insurance limits.			
	Insurance Carrier should be A rated.			
	The City reserves the right to request any additional information it deems necessary, and at a frequency it			
	deems necessary, to confirm the requisite insurance remains in effect, at the required levels, for the duration of			
	any contractual agreement entered into pursuant to this RFP/Bid and/or any Purchase Order issued in			
	accordance with this RFP/Biid	no Fit 17530 and of any Fallonage Order Issued In		
Statomor	nt of Diddory 100 understand the way			
Jalemen	nt of Bidder: We understand the requirements r	requested and agree to comply fully.		
7	()			
Bidder/-	Authorized Signature			
U		py of this form with original signature must accompany bid.		
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DEBARMENT, SUSPENSION

VENDOR RESPONSIBILITY CERTIFICATION FORM

The Vendor certifies that neither the Vendor nor any person associated with the Vendor in the capacity of owner, partner, director, officer, principal, investigator, project director, manager, auditor, or position involving the administration of public funds:

- (a) is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from government transactions by any federal, state or local governmental entity;
- (b) is presently on the Scrutinized Companies that Boycott Israell List or that is engaged in a boycott of Israel;
- (c) has within a three-year period preceding this certification been convicted of or had a civil judgment rendered against it for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or public contract; violation of federal or state antitrust statutes; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (d) is presently indicted for or otherwise criminally or civilly charged by a federal, state, or local governmental entity with commission of any of the offenses enumerated in paragraph (b) of this certification; or
- (e) has within a three-year period preceding this certification had one or more federal, state, or local government public transactions terminated for cause or default.

The Bidder certifies that it shall not knowingly enter into any transaction with any subcontractor, material supplier, or vendor about which any of the foregoing paragraphs (a) through (d) are true.

_A	NGELO 3	RECYCLED	MATERIALS
	r Name		
D	1	\leq	
Ву:	Signature		
	-	IAFRATE	
	Printed Name		
As its:	PRESI	DENT	