

ANASTASIA MOSQUITO CONTROL DISTRICT
OF ST. JOHNS COUNTY

120 EOC DRIVE, ST. AUGUSTINE, FLORIDA 32092
TELEPHONE: 904-471-3107

**REQUEST FOR QUOTE FOR PURCHASE & INSTLLATION OF THREE REPLACEMENT GATES
& GATE CONTROLLER SYSTEMS**

RFQ # 24/25-2

RFQ SOLICITATION START DATE: 8 A.M. MAY 5, 2025

RFQ SOLICITATION END DATE: 4 P.M. MAY 30, 2025

RFQ OPENING BY STAFF DATE: 8 A.M. JUNE 3, 2025

RFQ CONSIDERATION: BOARD OF COMMISSIONERS' REGULAR MEETING

AT 5 P.M. JUNE 12, 2025

SPECIFICATIONS

PROJECT NAME: Provide and install three (3) replacement gates and gate controllers at 120 EOC Drive, gates one, two and three (1, 2, & 3)

PROJECT LOCATION: 120 EOC Drive, St. Augustine FL 32092 gates one, two and three (1, 2, & 3)

GENERAL STATEMENT: Anastasia Mosquito Control District (hereafter referred to as "AMCD") is seeking quotes to Provide and install three (3) replacement gates and gate controllers. This document is intended to provide a clear, definitive scope of the requirements for interested parties submitting a bid.

REQUIREMENTS: Provide and install three (3) replacement gates and gate controllers.

SCOPE OF WORK:

- All work will be done while the district is open for business gates secured at night during installation work.
- Remove and replace: Three (3), six (6) foot high galvanized, chin link slide gate.
- Gate style:
 - Cantilever with center rib support.
 - Three (3) strands of barbed wire.
 - FS-8000 cantilever gate rollers with covers.
 - One (1) 4" X 12' X LG40 gate post, post to be set in concrete footer.
- Gate sizes:
 - Gate 1: 24' 3" opening.

- Gate 2: 26' 9" opening.
- Gate 3: 27' 0" opening.
- Remove and replace three (3) gate controller units.
- New gate controllers will be Viking H10 1 HP slide gate operators (three (3)) and will include:
 - Three (3) Photocell reflectors (safety).
 - Six (6) Rubber bump edge (safety).
 - Three (3) 120-volt high voltage surge protection.
 - Three (3) Ground rods.
 - Six (6) Chain brackets and bolts.
 - All new drive chains.
- Contractor will use all of the districts current card readers, knox fire safety boxes and accessories.
- Installation will include all electrical connections.
- Installation will include network connections to the key card access system already in place.
- Any damage to AMCD property or other structures or items will be repaired by contractor.
- Contractor will remove and dispose of old gates and gate controllers.
- Site can be viewed Monday through Friday 7:00 AM to 5:00 PM.

SPECIAL CONDITIONS:

- AMCD is tax exempt, no sales tax should be included in the quote.
- Please provide an alternate quote (a second quote) based on this change: In the Scope of Work **change** Three (3), six (6) foot high **galvanized**, chin link slide gate to Three (3), six (6) foot high **aluminum**, chin link slide gate.

INSURANCE AND INDEMNIFICATION REQUIREMENTS:

Without limiting its liability under this Contract, Contractor shall at all times during the term of this Contract procure prior to commencement of work and maintain at its sole expense during the life of this Contract (and Contractor shall require its, subcontractors, laborers, materialmen and suppliers to provide, as applicable), insurance of the types and limits not less than amounts stated below:

Insurance Coverages

Schedule	Limits	
Worker's Compensation		Florida Statutory Coverage
General Commercial Liability	\$500,000	General Aggregate
	\$500,000	Each Occurrence
	\$50,000	Fire Damage
	\$5,000	Medical Expenses

Such insurance shall be no more restrictive than that provided by the most recent version of the standard Commercial General Liability Form (ISO Form CG 00 01) as filed for use in the State of Florida without any restrictive endorsements other than those reasonably

required by the District. An Excess Liability policy or Umbrella policy can be used to satisfy the above limits.

Public Liability and Property Damage Insurance (including Independent Contractor's Liability, Owner's Protection Insurance, Contractual Liability and Completed Operations Insurance)

\$1,00,000 (One person in any one accident)

\$1,00,000 (Two or more persons in any one

accident)

\$500,000 (Property Damage in any one accident)

Such insurance shall be no more restrictive than that provided by the most recent version of the standard Public Liability and Property Damage Insurance as filed for use in the State of Florida without any restrictive endorsements other than those reasonably required by the District. An Excess Liability policy or Umbrella policy can be used to satisfy the above limits.

Automobile Liability

\$500,000 Combined Single Limit (Coverage for all automobiles, owned, hired or non-owned used in performance of the Services)

Such insurance shall be no more restrictive than that provided by the most recent version of the standard Business Auto Coverage Form (ISO Form CA0001) as filed for use in the State of Florida without any restrictive endorsements other than those which are required by the State of Florida, or equivalent manuscript form, must be attached to the policy equivalent endorsement as filed with ISO (i.e., mandatory endorsement).

Professional Liability \$1,000,000 per Claim and Aggregate (Including Medical Malpractice when applicable)

Any entity hired to perform professional services as a part of this contract shall maintain professional liability coverage on an Occurrence Form or a Claims Made Form with a retroactive date to at least the first date of this Contract and with a three year reporting option beyond the annual expiration date of the policy.

Additional Insurance Provisions

- A. Contractor's Insurance Primary. The insurance provided by the Contractor shall apply on a primary basis to, and shall not require contribution from, any other insurance or self-insurance maintained by the District or any District members, officials, officers, employees and agents.
- B. Deductible or Self-Insured Retention Provisions. All deductibles and self-insured retentions associated with coverages required for compliance with this Contract shall remain the sole and exclusive responsibility of the named insured Contractor. Under no circumstances will the District and its members, officers, directors, employees, representatives, and agents be responsible for paying any deductible or self-insured retentions related to this Contract.

- C. Certificates of Insurance. Contractor shall provide the District Certificates of Insurance at Contract execution. The certificates of insurance shall be mailed to the Anastasia Mosquito Control District (Attention: Chief Financial Officer), 120 EOC Drive, St. Augustine, Florida 32092.
- D. Carrier Qualifications. The above insurance shall be written by an insurer holding a current certificate of authority pursuant to Chapter 624, Florida Statutes, or a company that is declared as an approved Surplus Lines carrier under Chapter 626, Florida Statutes. Such Insurance shall be written by an insurer with an A.M. Best Rating of A- VII or better.
- E. Notice. The Contractor shall provide an endorsement issued by the insurer to provide the District thirty (30) days prior written notice of any change in the above insurance coverage limits or cancellation, including expiration or non-renewal. If such endorsement is not available by the insurer, then the Contractor shall provide said thirty (30) days written notice of any change in the above coverages or limits, coverage being suspended, voided, cancelled, including expiration or non-renewal.
- F. Survival. Anything to the contrary notwithstanding, the liabilities of the Contractor under this Contract shall survive and not be terminated, reduced or otherwise limited by any expiration or termination of insurance coverage.
- G. Special Provisions. Prior to executing this Agreement, Contractor shall present this Contract, including this Exhibit D, to its insurance agent (“Agent”) affirming: 1) that the Agent has personally reviewed the insurance requirements of the Contract Documents, and (2) that the Agent is capable (has proper market access) to provide the coverages and limits of liability required on behalf of Contractor.

Indemnification

Contractor and its subcontractors (the “Indemnifying Party”) shall hold harmless, indemnify, and defend the District and their respective members, officers, officials, employees and agents (collectively the “Indemnified Parties”) from and against, without limitation, any and all claims, suits, actions, losses, damages, injuries, liabilities, fines, penalties, costs and expenses of whatsoever kind or nature, which may be incurred by, charged to or recovered from any of the foregoing Indemnified Parties for:

- 1. General Tort Liability, for any negligent act, error or omission, recklessness or intentionally wrongful conduct on the part of the Indemnifying Party that causes injury (whether mental or corporeal) to persons (including death) or damage to property, whether arising out of or incidental to the Indemnifying Party’s performance of the Agreement, operations, services or work performed hereunder; and

2. Environmental Liability, to the extent this Agreement contemplates environmental exposures, arising from or in connection with any environmental, health and safety liabilities, claims, citations, clean-up or damages whether arising out of or relating to the operation or other activities performed in connection with the Agreement; and

3. Intellectual Property Liability, to the extent this Agreement contemplates intellectual property exposures, arising directly or indirectly out of any allegation that the Services provided under this Agreement (the "Service(s)"), any product generated by the Services, or any part of the Services as contemplated in this Agreement, constitutes an infringement of any copyright, patent, trade secret or any other intellectual property right. If in any suit or proceeding, the Services, or any product generated by the Services, is held to constitute an infringement and its use is permanently enjoined, the Indemnifying Party shall, immediately, make every reasonable effort to secure within sixty (60) days, for the Indemnified Parties, a license, authorizing the continued use of the Service or product. If the Indemnifying Party fails to secure such a license for the Indemnified Parties, then the Indemnifying Party shall replace the Service or product with a non-infringing Service or product or modify such Service or product in a way satisfactory to the District, so that the Service or product is non-infringing.

If an Indemnified Party exercises its right under this Agreement, the Indemnified Party will (1) provide reasonable notice to the Indemnifying Party of the applicable claim or liability, and (2) allow Indemnifying Party, at its own expense, to participate in the litigation of such claim or liability to protect its interests. The scope and terms of the indemnity obligations herein described are separate and apart from, and shall not be limited by, any insurance provided pursuant to the Agreement or otherwise. Such terms of indemnity shall survive the expiration or termination of the Agreement.

In the event that any portion of the scope or terms of this indemnity is in derogation of Section 725.06 or 725.08 of the Florida Statutes, all other terms of this indemnity shall remain in full force and effect. Further, any term which offends Section 725.06 or 725.08 of the Florida Statutes will be modified to comply with said statutes.

FORMAT AND ORDER OF RESPONSES TO THE RFQ: All proposals will be presented as 8 1/2 X 11 sheets of paper.

1. **QUOTE SHEET:** Should include: cost of parts and labor, quote number, date, quote expiration date, contact person, phone number, scope proposed, inclusions & exclusions (if any), warranty, terms of payment.

RANKING OF THE RFQ: All the quote submittals will be reviewed to make sure all AMCD policies and procedures were followed and all qualifications were met. The lowest

qualified quote will be recommended by the review committee (AMCD staff), and the Director and presented to the Board of Commissioners.

The above is in compliance with AMCD policies and procedures.

SUBMITTAL PROCEDURE: A particular procedure for submitting a quote to our Board is necessary, following the District's Policies and Procedures.

ASSIGNED RFQ NUMBERS: Bid numbers will be assigned as: "REQUEST FOR QUOTES FY 24/25-2, **(your company name)**" Purchase & installation of three replacement gates & gate controller systems.

RFQ SUBMITTAL: Original bid shall be submitted **with eight (8) copies for a total of 9**, in a sealed envelope or box, and are to be identified in the **lower, left-hand corner** of the envelope or box with **your assigned bid number** (see above) and the words, **"SEALED RFQ"** (written or typed) directly under the bid number.

Hand delivery, US Postal service, Parcel services (UPS or Federal Express) and couriers are acceptable methods of delivering your bid.

As per the advertisement, no bids will be accepted after 4:30 PM May 30, 2025. Do not be late. You must be in compliance with the above submittal procedure. Proposers seeking clarifications shall direct all communications in writing to Dena Oliva at Anastasia Mosquito Control District, 120 EOC Drive, St. Augustine Florida 32092, e-mail: doliva@amcdf.org, clarifications or modifications of this bid document will be by addendum only. Addenda and other documents will be delivered by mail, e-mail or messenger to bid document holders of record at the mailing address, e-mail address or location provided by bid document holders. The district may amend the bid, as it sees fit, at any time, and may cancel the bid at any time.

Deadline for submission of proposals: Friday May 30, 2025.

Opening by staff on: Thursday, May 2, 2024 8 A.M. at 120 EOC Drive, St. Augustine, Florida 32092

Bids for the gates and gate controller systems will be considered by the AMCD Board of Commissioners at their meeting on Thursday, June 12, 2025 at 5 PM.

AMCD advertised for this project in the St. Augustine Record, Legal Notices, in the May 4, 2025 edition, prior to the May 12, 2025, meeting, and providing **"Reasonable notice"** for advertisement as per Florida Statutes.

CONFLICT OF INTEREST FORM:

Proposers and any corporate shareholder (if a corporation), its members (if a joint venture) and its partners (if a partnership or limited liability company) shall submit a completed Potential Conflict of Interest form (included in bid package) and indicate that they are unaware of any actual or potential conflicts of interest or identify and describe, in detail, actual or potential conflicts of interest. For purposes of this certification, the Commission includes, but is not limited to, its commissioners, employees and representatives.

Proposers shall refrain from contracting, either directly or indirectly, staff or District commissioners about the bid, selection process or anything related thereto. **The signed and notarized "Conflict of Interest" Form must be included with your bid proposal.**

The Board may reject any submittals in whole or part with or without cause.

Dr. Rui-De Xue
Director

CONFLICT OF INTEREST & CLEAN HANDS DISCLOSURE FORM

I HEREBY CERTIFY that

1. I (*printed name*) _____ am the (*title*) _____ and the duly authorized representative of the firm of (*firm name*) _____ whose address is _____, and that I possess the legal authority to make this affidavit on behalf of myself and the firm for which I am acting; and,
2. Except as listed below, no employee, officer, or agent of the firm have any conflicts of interest, real or apparent, due to ownership, other clients, contracts, or interests associated with this project; and,
3. Neither the business nor any authorized representative or significant stakeholder of the business has been determined by judicial or administrative board action to be in noncompliance with or in violation of any provision of the Anastasia Mosquito Control District nor has any outstanding past due debt to the Anastasia Mosquito Control District: and
4. This proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a proposal for the same services, and is in all respects fair and without collusion or fraud.

Signature: _____

Printed Name: _____

Firm Name: _____

Date: _____

Sworn to and subscribed before me this _____ day of _____ 20_____.

Personally known _____

OR Produced identification _____ Notary Public-State of _____

My Commission expires _____

(Type of Identification) _____

(Printed, typed or stamped commissioned name of Notary Public)