



Administration 954-797-1030
Budget & Finance 954-797-1050
Development Services 954-797-1111
Engineering 954-797-1113
Fire Department 954-693-1211
Human Resources 954-797-1100
Planning & Zoning 797-1103

Parks & Recreation 954-797-1145
Police Department 954-693-8200
Public Works 954-797-1240
Special Projects 954-797-1153
Technology & Information 954-797-1107
Town Clerks 954-797-1023
Utilities 954-433-4000

TOWN OF DAVIE 6591 Orange Drive, Davie, Florida 33314-3399

(954) 797-1000

March 20, 2009

NOTICE TO BIDDERS

**CONTRACT
COPY**

The Town of Davie is accepting sealed bids until 2:00 p.m. on Thursday, April 9, 2009, for the following:

HORTICULTURAL CHEMICALS, B-09-47

Complete bid specifications are enclosed. Any questions pertaining to this specification should be addressed to Herb Hyman, Procurement Manager, 6591 Orange Drive, Davie, Florida 33314. Phone (954) 797-1016.

Companies that do not wish to bid for this purchase, but would like to be notified of future bids, should submit a "NO BID" response.

Sealed bid envelopes should be marked with the company name, bid name and number and boldly marked "SEALED BID". Two (2) copies of all sealed bids should be delivered to the Purchasing Division, 6591 Orange Drive, Davie, Florida 33314. Bids will be opened on or about 2:00 p.m., Thursday, April 9, 2009, at the Davie Town Hall. Any bids received after the specified due date and time will be rejected and returned unopened. This will be a public bid opening.

The Town of Davie reserves the right to reject any and/or all bids.

Town of Davie
Herb Hyman, CPPB, FCPM, FCPA
Procurement Manager

An Equal Opportunity Employer

General Terms and Conditions

1. Submission and Receipt of Bids

It will be the sole source responsibility of the bidder to see that their bid is received prior to the specified time of bid opening as identified herein. Bids will be submitted in sealed envelopes showing the bidder's return address and clearly marked "Sealed Bid- (specify name of bid)". If bid is sent by mail, the bidder shall be responsible for its delivery to the office of the Purchasing Division by or prior to the hour and date shown herein for receipt of bids. Bids received after that hour and date will not be considered and will be returned unopened.

Bidders shall submit all pricing information on the proposal forms furnished. All quotations and proposals must be signed in those spaces provided with the firm name and by an officer or employee having the authority to bind the company or firm by his signature.

Bids having any erasures or corrections must be initialed by the bidder in ink. Bids shall be typewritten or written with pen and ink. Signatures must be in ink.

2. Delivery

Items shall be delivered F.O.B. destination (where applicable). The delivery costs and charges will be included in the bid price. Failure to do so may be cause for rejection of your bid.

3. Discounts

All discounts (prompt payment, overall award of all bid items, etc.) will be considered in evaluation to determine the lowest "net" cost to the Town.

4. Brand Names

Whenever materials or equipment are specified or described in the specification by using the name of a proprietary item or the name of a particular supplier, the naming of the item is intended to establish the type, function and quality required. The bidder will be required to submit sufficient information with his/her bid to allow the Town to determine that the material or equipment proposed is equivalent to that named. The Town will be the sole judge concerning the merits of proposed material or equipment.

5. Taxes

The Town of Davie is exempt from any taxes imposed by the State or Federal Government. Exemption certificates will be supplied upon request.

6. Signed Bid Considered an Offer

This signed bid shall be considered an offer on the part of the bidder, which offer shall be deemed accepted upon approval by the Town Council of the Town of Davie. In case of default on the part of the bidder after such acceptance, the Town may take such portion as it deems appropriate including legal action for damages or specific performance.

7. Reservations for Rejection and Award

The Town reserves the right to accept or reject any or all bids or parts of bids, to waive irregularities and technicalities, and to request rebids on required goods or services. The Town also reserves the right to award the contract on such goods or services the Town deems will best serve its interests.

8. Prices to be Firm

Bidder warrants by virtue of bidding that prices and terms and conditions in the bid will be firm for acceptance and will not be withdrawn for a period of ninety (90) days from the date of the bid opening. Prices shall be firm with no escalator clauses.

9. Laws and Regulations

All applicable laws and regulations of the Federal Government, the State of Florida, and ordinances of the Town of Davie will apply to any resulting award. All occupational and health administration (O.S.H.A.) rules and/ or regulations will apply to any goods or services supplied as a result of this bid.

10. Public Entity Crimes Information

A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under contract with any public entity and may not transact business with any public entity in the excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

11. Discrimination

An entity or affiliate who has been placed on the discriminatory vendor list may not submit a bid on a contract to provide goods and services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not award or perform work as a contractor, supplier, subcontractor, or consultant under contract with any public entity and may not transact business with any public entity.

12. Conflicting Language

Should the specific terms and conditions conflict with the general terms and conditions, the specific terms and conditions shall prevail.

13. Payment

The Town's preferred method of payment is through use of its procurement card (Visa). Evaluation credit will be given to vendors who will accept this payment method.

All appropriately submitted invoices other than those paid with a procurement card will be paid in accordance with the Florida Prompt Payment Act.

I. NATURE OF BID

The Town of Davie is soliciting bids for an annual contract for the purchase of horticultural chemicals. This is a cooperative invitation to bid issued by the Town of Davie on behalf of the participating agencies referenced within the specifications, for the purchase of their estimated annual requirements. Any reference in the bid documents to a single entity shall apply to all participating entities referenced in the Invitation To Bid. The terms and conditions of the individual contracts and/or purchase orders including, but not limited to provisions regarding invoicing, individual delivery points, delivery instructions, and insurance requirements shall be established individually by each participating governmental entity prior to award.

MUNICIPALITIES AND OTHER GOVERNMENTAL ENTITIES WHICH ARE NOT MEMBERS OF THE SOUTHEAST FLORIDA GOVERNMENTAL CO-OPERATIVE PURCHASING GROUP ARE STRICTLY PROHIBITED FROM UTILIZING ANY CONTRACT OR PURCHASE ORDER RESULTING FROM THIS BID. HOWEVER, OTHER CO-OP MEMBERS MAY PARTICIPATE IN THIS CONTRACT DURING THE RENEWAL PERIOD PROVIDED IT IS ACCEPTABLE TO THE VENDOR(S).

Some of the co-op members may currently have a contract in place for the commodities listed herein. Those entities will participate in this bid at the expiration of their current contracts.

II. SCOPE OF WORK

The successful Contractor(s) will furnish all horticultural chemicals necessary for the day-to-day operations of all agencies participating in this cooperative bid. Contractor(s) will be required to make deliveries to locations as specified herein or to an alternate location as may be requested from time to time. **BIDDERS MUST SUBMIT A LABEL FOR ALL PRODUCTS THAT ARE BID TO INSURE COMPLIANCE WITH THE SPECIFICATIONS. NO SUBSTITUTIONS WILL BE ALLOWED ON THE PRODUCTS WITH THAT DESIGNATION. FAILURE TO PROVIDE LABELS MAY NULLIFY YOUR BID.**

III. TERM OF CONTRACT

The bidder will be quoting on a one (1) year contract commencing upon award by the Town Council of the Town of Davie. Prices shall remain firm for the entire length of the contract. This contract may be renewed for one (1) additional year by mutual agreement of the parties and the Town Council. The Town will issue a notification of intent to renew by mail ninety (90) days prior to the expiration date of the contract. The vendor shall be required to respond within thirty (30) days of receipt of notice. All terms and conditions of the original contract will remain unchanged for any contract extension.

The prices offered and accepted must remain firm for the first full year of the contract. Such costs for the second year are subject to an adjustment only if an increase occurs throughout the local industry, but any such increase may not exceed 5% per year. Any such increase must be documented and submitted in writing to the Town at least ninety (90) days prior to the contract anniversary date. The Town may, after examination, refuse to accept the adjusted costs if they are not properly documented or if they are considered by the Town to be excessive. In the event that the Town determines that the costs as submitted are not properly documented or are excessive and the matter can not be resolved to the satisfaction of the Town, the adjusted costs may be rejected and the contract will be rebid on its anniversary date.

IV. DELIVERY

The Contractor(s) assumes the responsibility of delivering all items ordered within ten (10) calendar days after receipt of order. The Contractor(s) shall advise the using department if any items ordered are non-stock items and identify the expected delivery date of those items. All containers must be labeled and Contractor(s) must supply MSDS sheets (as described in section V below) with each delivery in accordance with OSHA Hazard Communication (29 CFR 1910.1200).

Delivery requirements, delivery locations, and dates will be established with the Contractor(s) by each individual participating agency. Contractor(s) shall await release by the authorized contact person at each agency for all shipments. Contractor(s) must agree to accept "blanket" purchase orders, with verbal requests for partial shipments, if requested by the participating entities.

V. OCCUPATIONAL HEALTH AND SAFETY

In compliance with Chapter 442, Florida Statutes, any item delivered from a contract resulting from this bid must be accompanied by a MATERIAL SAFETY DATA SHEET (MSDS). The MSDS must be maintained by the user agency and must include the following information:

1. The chemical name and the common name of the toxic substance.
2. Hazards or other risks in the use of the toxic substance including:
 - a. The potential for fire, corrosiveness, and reactivity
 - b. The known acute and chronic health effect of risks from exposure, including the medical conditions which are generally recognized as being aggravated by exposure to the toxic substance.
3. The proper precautions, handling practices, necessary personal protection equipment, and other safety precautions in the use of or exposure to the toxic substances, including appropriate emergency treatment in the case of overexposure.
4. The emergency procedure for spills, fire, disposal, and first aid.

5. A description in lay terms of the known specific potential health risk posed by the toxic substance intended to alert any person reading this information.
6. The year and month, if available, that the information was compiled, and the name, address and emergency telephone number of the manufacturer responsible for preparing the information.

ANY QUESTIONS REGARDING THIS REQUIREMENT SHOULD BE DIRECTED TO:

Department of Labor and Employment Security
Bureau of Industrial Safety & Health
Toxic Waste Information Center
2551 Executive Center Circle West
Tallahassee, Florida 32301-5014
Telephone: 800-367-4378 or 904-488-3044

VI. PUBLIC ENTITY CRIMES INFORMATION

A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

VII. DISCRIMINATION

An entity or affiliate who has been placed on the discriminatory vendor list may not submit a bid on a contract to provide goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not award or perform work as a contractor, supplier, subcontractor, or consultant under contract with any public entity, and may not transact business with any public entity.

VIII. AWARD OF CONTRACT

The Town of Davie reserves the right to accept or reject any or all bids. The Town further reserves the right to award the contract on a split order basis, lump sum, or individual item basis, or such combination as shall best serve the interest of the Town.

Each participating agency will award the bid and execute its own contract with the Contractor(s) in accordance with their respective purchasing policies and procedures.

IX. QUANTITIES

No warranty or guarantee is given or implied as to the total amounts to be purchased resulting from this contract. The quantities stated in this bid are estimates of annual usage, to be used for bid comparison purposes only. All products will be ordered on an as needed basis.

X. PARTICIPATING AGENCIES

Town of Davie	City of Coral Springs
Broward County	City of Fort Lauderdale
City of Lauderhill	City of Pembroke Pines
City of Riviera Beach	City of Pompano Beach
City of Cooper City	City of Hollywood
City of Margate	City of Miami Gardens
City of Sunrise	Broward Community College
City of Deerfield Beach	City of Dania Beach
City of Coconut Creek	City of Miramar
City of Boca Raton	City of Lauderdale Lakes
Town of Palm Beach	City of Oakland Park
City of Palm Beach Gardens	City of Tamarac
City of Miami	

A complete list of all Co-op members has been included in this specification. Members who chose not to participate in the initial bid may participate pursuant to the provisions of Section I of this specification.

XI. CANCELLATION

The Town of Davie reserves the right to cancel this contract upon written notice should the bidder fail to reasonably supply goods as outlined herein.

XII. PRODUCTS

CATEGORY A (SELECTIVE HERBICIDES)

Item 1: MSMA 6.6 selective herbicide for post emergence weed control.

Active Ingredients:

Monosodium Acid Methanearsonate	51.0%
Inert Ingredients	49.0%
Total arsenic, all in water soluble form expressed as elements	23.6%

Approximate annual usage	1,600 gals.	
Preferred Packaging	2 1/2 gal. containers	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 2: Rodeo. A selective herbicide used in the control of weeds. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Isopropylamine salt of glyphosate	53.5%
Inert Ingredients	46.5%

Approximate annual usage	1600 gals.
Preferred Packaging	2 1/2 gal. container
Net Unit Price	\$ _____ /gal.
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 3: Sencor turf label or approved equal. A selective herbicide used in the control of goosegrass and some broadleaf weeds.

Active Ingredients:

Metribuzin	75.0%
Inert Ingredients	25.0%

Approximate annual usage	300 lbs.
Preferred Packaging	5 lb. container
Net Unit Price	\$ _____ /lb.
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 4: Roundup Pro. A non-selective herbicide used for the control or destruction of most herbaceous plants. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Isopropylamine salt of glyphosate	41.0%
Inert Ingredients	59.0%

Approximate annual usage	1,400 gals.
Preferred Packaging	2 1/2 gal container
Net Unit Price	\$ _____ /gal.
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 5: Roundup Pro. A non-selective herbicide used for the control or destruction of most herbaceous plants. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT. NOTE: Same as above item but different packaging.**

Active Ingredients:

Isopropylamine salt of glyphosate	41.0%
Inert Ingredients	59.0%

Approximate annual usage	900 gals.	
Preferred Packaging	30 gal drum	
Net Unit Price	\$ _____ / gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 6: Ranger Pro. A complete broad-spectrum postemergence professional herbicide for industrial, turf, and ornamental weed control. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Glyphosate, N-(phosphonomethyl) glycine, In the form of its isopropylamine salt	41.0%
Inert Ingredients (including surfactant)	59.0%

Approximate annual usage	200 gals.	
Preferred Packaging	2 1/2 gal container	
Net Unit Price	\$ _____ / gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 7: Ranger Pro. A complete broad-spectrum postemergence professional herbicide for industrial, turf, and ornamental weed control. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT. NOTE: Same as above item but different packaging.**

Active Ingredients:

Glyphosate, N-(phosphonomethyl) glycine, In the form of its isopropylamine salt	41.0%
Inert Ingredients (including surfactant)	59.0%

Approximate annual usage	300 gals.	
Preferred Packaging	30 gal drum	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 8: Garlon 3A or approved equal. A selective herbicide used for the control of weeds.

Active Ingredients:

Acetic acid, (triclopyr), butoxy ethyl ester	61.6%
Inert Ingredients	38.4%

Approximate annual usage	120 gals.	
Preferred Packaging	2 1/2 gal. container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 9: 2,4-D or approved equal. A selective herbicide used for the control of many broadleaf weeds.

Active Ingredients:

2,4-D Dimethoxyacetic Acid	47.4%
Inert Ingredients	52.6%

Approximate annual usage	550 gals.	
Preferred Packaging	2 1/2 gal container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 10: Three-Way or approved equal. Broad spectrum weed killer used for the control of weeds in Bermuda grass.

Active Ingredients:

Dimethylamine Salt of 2,4 dichlorophenoxyacetic acid	32.67%
Dimethylamine Salt of 2-propionic acid	16.36%
Dimethylamine Salt of Dicamba	2.82%
Inert Ingredients	48.15%

Approximate annual usage	400 gals.	
Preferred Packaging	2 1/2 gal. containers	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 11: Image or approved equal. A selective herbicide for use on Bermuda grass.

Active Ingredients:

Ammonium Salt of imazaquin	17.3%
Inert Ingredients	82.7%

Approximate annual usage	150 ozs.
Preferred Packaging	11.43 oz. bottles
Net Unit Price	\$ _____ /11.43 oz. bottle
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 12: Surflan or approved equal. A selective herbicide for use in controlling most annual grass and certain broadleaf weeds.

Active Ingredients:

Oryzalin	40.4%
Inert Ingredients	59.6%

Approximate annual usage	150 gals.
Preferred Packaging	2 1/2 gal. container
Net Unit Price	\$ _____ /gal.
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 13: Ronstar granular or approved equal. A selective herbicide for use on Bermuda and St. Augustine grass.

Active Ingredients:

Oxadiazon	2.0%
Inert Ingredients	98.0%

Approximate annual usage	36,000 lbs.
Preferred Packaging	50 lb. bags
Net Unit Price	\$ _____ /lb.
Packaging: container size	_____ # containers/carton

Manufacturer and Trade Name _____

Item 14: Barricade or approved equal. A selective herbicide used for the control of weeds.

Active Ingredients:
Prodiamine 65.0%
Inert Ingredients 35.0%

Approximate annual usage 700 lbs.
Preferred Packaging 10 lb. bag
Net Unit Price \$ _____ /lb.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 15: Basagran or approved equal. A selective herbicide used for the post emergence control of many broadleaf weeds.

Active Ingredients:
Bentazon 42.0%
Inert Ingredients 58.0%

Approximate annual usage 150 gals.
Preferred Packaging 1 gal. container
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 16: Pre-M or approved equal. Pre-emergent weed killer used for the control of weeds in Bermuda grass.

Active Ingredients:
Pendimethalin 60.0%
Inert Ingredients 40.0%

Approximate annual usage 200 lbs.
Preferred Packaging 10 lb. bags
Net Unit Price \$ _____ /lb.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 17: Pre-M or approved equal. Pre-emergent weed killer used for the control of weeds in Bermuda grass. **NOTE: Same as above item but different packaging.**

Active Ingredients:

Pendimethalin	60.0%
Inert Ingredients	40.0%

Approximate annual usage	4,000 lbs.	
Preferred Packaging	40 lb. bags	
Net Unit Price	\$ _____ /lb.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 18: Reward (formerly diquat) or approved equal. A selective herbicide used for the control of many aquatic weeds.

Active Ingredients:

Dibromide	35.3%
Inert Ingredients	64.7%

Approximate annual usage	650 gals.	
Preferred Packaging	2 1/2 gal. containers	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 19: Sedgehammer or approved equal. Selective herbicide used for the control of nutsedge and other weeds in turfgrass.

Active Ingredients:

Methyl5-[(4,6-dimethoxy-2-pyrimidinyl) amino] carbonylamino-sulfonyl -3-chloro-1-methyl-1-H-pyrazole-4-carboxylate	75.0%
Inert Ingredients	25.0%

Approximate annual usage	250 ozs.	
Preferred Packaging	1 1/3 oz. container	
Net Unit Price	\$ _____ /1 1/3 oz. container	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 20: Trimec Plus or approved equal. A selective herbicide.

Active Ingredients:

Monosodium Acid Methanearsonate	18.00%
Dimethylamine Salt of 2,4-Dichlorophenoxyacetic Acid	5.83%
Dimethylamine Salt of 2-(2-methyl-4 chlorophenoxy) Propionic Acid	5.86%
Dimethylamine Salt of Dicambia (3,6 Dichloro-O-anisic acid)	1.46%
Inert Ingredients	68.85%

Approximate annual usage 150 gals.
Preferred Packaging 2 1/2 gal. containers
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 21: Illoxan 3EC or approved equal. A selective herbicide for postemergence control of goosegrass.

Active Ingredients:

Diclofop-methyl 2-[4-(2, 4-dichlorophenoxy) phenoxy] propanoate	35.49%
Inert Ingredients	64.51%

Approximate annual usage 50 gals.
Preferred Packaging 1 gal. containers
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 22: Asulox or approved equal. A selective herbicide for postemergent weed control in turf, ornamentals, reforestation areas and non-cropland.

Active Ingredients:

Sodium salt of asylum (methyl sulfanyl carbarnate)	36.27%
Inert Ingredients	63.73%

Approximate annual usage 50 gals.
Preferred Packaging 2 1/2 gal. containers
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 23: Finale or approved equal. A non-selective water soluble herbicide for application as a foliar spray for control of a broad spectrum of emerged annual and perennial grass and broadleaf weeds.

Active Ingredients:

Glufosinate-ammonium 11.33%

Inert Ingredients 88.67%

Approximate annual usage 50 gals.
Preferred Packaging 2 1/2 gal. containers
Net Unit Price \$ _____ / gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 24: Pendulum 3.3 EC or approved equal. A selective herbicide for control of most annual grasses and certain broadleaf weeds in non-cropland areas.

Active Ingredients:

Pendimethalin 37.4%

Inert Ingredients 62.6%

Approximate annual usage 50 gals.
Preferred Packaging 2 1/2 gal. containers
Net Unit Price \$ _____ / gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 25: Dismiss or approved equal. A selective weed control in turf sites including residential and institutional lawn, athletic fields, commercial sod farms, golf course fairways and roughs.

Active Ingredients:

Sulfentrazone 39.6%

Inert Ingredients 60.4%

Approximate annual usage 50 gals.
Preferred Packaging 1 pt. containers
Net Unit Price \$ _____ / pt.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 26: Revolver or approved equal. A herbicide for the control of annual and perennial grasses in bermudagrass, zoysiagrass, and buffalograss.

Active Ingredients:

foramsulfuron	2.34%
Inert Ingredients	97.66%

Approximate annual usage	300 gals.	
Preferred Packaging	1 qt. containers	
Net Unit Price	\$ _____ /qt.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 27: Certainty or approved equal. A selective herbicide for the control of annual and perennial grasses and broadleaf weeds in highly managed turf sites.

Active Ingredients:

Sulfosulfuron	75.00%
Inert Ingredients	25.00%

Approximate annual usage	50 oz.	
Preferred Packaging	1.25 oz. bottles	
Net Unit Price	\$ _____ /1.25 oz. bottle	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 28: Cutless 0.33G or approved equal. A systemic landscape growth regulator for terminal growth suppression in woody ornamental plants and perennial ground covers, resulting in a more compact growth form and reduced trimming.

Active Ingredients:

Flurprimidol: (1-methylethyl) {(4-trifluoromethoxy) Phenyl}-5-pyrimidinemethanol	0.33%
Inert Ingredients	99.67%

Approximate annual usage	450 lbs.	
Preferred Packaging	21 lb. bucket	
Net Unit Price	\$ _____ /lb.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 29: Hydrothol 191 or approved equal. A liquid concentrate soluble in water that is a highly effective aquatic herbicide and algicide.

Active Ingredients:

Mono (N, N-dimethylalkylamine) salt of endothall 53.0%
Inert Ingredients 47.0%

Approximate annual usage 1100 gal.
Preferred Packaging 2 ½ gal containers
Net Unit Price \$ _____ / gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 30: Snapshot 2.5 TG or approved equal. A selective preemergence herbicide for control of certain broadleaf weeds and annual grasses.

Active Ingredients:

Trifluralin: trifluoro-2,6-dinitro-N, 2.0%
N-dipropyl-p-toluidine
Isoxaben: N-[3-(1-ethyl-1-methylpropyl)-5-
Isoxazolyl]-2,6-dimethoxybenzamide and isomers 0.5%
Inert Ingredients 97.5%

Approximate annual usage 2000 lbs.
Preferred Packaging 50 lb. bags
Net Unit Price \$ _____ / lb.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 31: Ronstar Flo or approved equal. Preemrgence herbicide for the control of annual grasses and broadleaf weeds in turf and ornamnetals.

Active Ingredients:

Oxadiazon [2-tert-butyl-4-(2,4-dichloro-5-
Isopropoxyphenyl)-1,3,4-oxzdiazolin-5-one] 34.1%
Inert Ingredients 65.9%

Approximate annual usage 100 gal.
Preferred Packaging 2 ½ gal containers
Net Unit Price \$ _____ / gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

CATEGORY B (INSECTICIDES/PESTICIDES)

Item 1: Orthene .97 or approved equal. An insecticide used for the control of mole crickets.

Active Ingredients:

Acephate	75.0%
Inert Ingredients	25.0%

Approximate annual usage	800 lbs.	
Preferred Packaging	7.73 lb. bag	
Net Unit Price	\$ _____ /lb.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 2: Sevin SL or approved equal. An insecticide used for the control of sod webworms, armyworms, grassloopers, white grubs and billbugs.

Active Ingredients:

Carbaryl	43.0%
Inert Ingredients	57.0%

Approximate annual usage	100 gals.	
Preferred Packaging	2 ½ gal. container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 3: Top Choice mole cricket bait. An insecticide used for the control of Southern Chinch Bugs, sod webworms, armyworms, grassloopers and mole crickets. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Friponil	10.0%
Inert Ingredients	90.0%

Approximate annual usage	51,500 lbs.	
Preferred Packaging	50 lb. bag	
Net Unit Price	\$ _____ /lb.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 4: Malathion 5Ec or approved equal. Insecticide used for the control of grass scales.

Active Ingredients:

Malathion	57.0%
Xylene range aromatic solvent	37.0%
Inert Ingredients	6.0%

Approximate annual usage	50 gals.	
Preferred Packaging	2 1/2 gal. container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 5: Merit WSP or approved equal. Wettable powder for foliar and systemic insect control in turfgrass, landscape ornamentals and plantscapes.

Active Ingredients:

Imidacloprid, 1-(6-chloro-3-pyridiacyl) methyl)-N-nitro-2, imidazolidinimine	75.0%
Inert Ingredients	25.0%

Approximate annual usage	300 ozs.	
Preferred Packaging	2 oz. containers	
Net Unit Price	\$ _____ /oz.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 6: Cygon or approved equal. Used for the control of insects.

Active Ingredients:

Dimethoate	23.0%
Inert Ingredients	77.0%

Approximate annual usage	50 gals	
Preferred Packaging	2 1/2 gal. container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 7: Demand CS or approved equal. Insecticide used for the control of adult mole crickets in turfgrass.

Active Ingredients:

Lambda Cyhalothrin	12.0%
Inert Ingredients	88.0%

Approximate annual usage	50 lbs.	
Preferred Packaging	1 qt. container	
Net Unit Price	\$ _____ /qt.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 8: Talstar or approved equal. Flowable insecticide/miticide for agricultural and commercial uses.

Active Ingredients:

Bifenthrin (2-methyl [1,1-biphenyl]-3-yl) methyl-3-(2-chloro-3,3-trifluoro-1-propenyl)-2,2-dimethylcyclopropane carboxylate	7.9%
Inert Ingredients	92.1%

Approximate annual usage	250 gals.	
Preferred Packaging	1 gal. container	
Net Unit Price	\$ _____ / gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 9: Talstar granular or approved equal. Granular insecticide/miticide for agricultural and commercial uses.

Active Ingredients:

Bifenthrin (2-methyl [1,1-biphenyl]-3-yl) methyl-3-(2-chloro-3,3-trifluoro-1-propenyl)-2,2-dimethylcyclopropane carboxylate	7.9%
Inert Ingredients	92.1%

Approximate annual usage	14,500 lbs.	
Preferred Packaging	50 lb. bags	
Net Unit Price	\$ _____ / lbs.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 10: Merit 0.5G granular or approved equal. Granular systemic insect control in turfgrass and landscape ornamentals.

Active Ingredients:

Imidacloprid, 1-((6-chloro-3-pyridinyl) methyl)-N-nitro-2-imidazolidinimine	0.5%
Inert Ingredients	99.5%

Approximate annual usage	700 lbs.	
Preferred Packaging	30 lb. bags	
Net Unit Price	\$ _____ / lbs.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 11: Dylox 6.2 granular or approved equal. Granular control of white grubs, mole crickets, sod webworms and cutworms, and other pests of turfgrass.

Active Ingredients:

Trichlorfon, Dimethyl (2,2,2-trichloro-1-hydroxy-ethyl) phosphonate 6.2%
Inert Ingredients 93.8%

Approximate annual usage 1,000 lbs.
Preferred Packaging 30 lb. bags
Net Unit Price \$ _____ /lbs.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

CATEGORY C (FUNGICIDES)

Item 1: Daconil wether stick or approved equal. Fungicide used for the control of diseases in turf grass.

Active Ingredients:

Chlorothalonil (Tetrachloroisophthalonitrile) 54.0%
Inert Ingredients 46.0%

Approximate annual usage 250 gals.
Preferred Packaging 2 1/2 gal. container
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 2: Subdue or approved equal. Fungicide used to control pythium blight and pythium root rot.

Active Ingredients:

Metalaxyl 25.1%
Inert Ingredients 74.9%

Approximate annual usage 100 gals.
Preferred Packaging 1 gal. container
Net Unit Price \$ _____ /gal.
Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 3: Mancozeb or approved equal. Used for the control of fungus and algae.

Active Ingredients:

Mancozeb	75.0%
Inert Ingredients	25.0%

Approximate annual usage	220 gals.	
Preferred Packaging	2 1/2 gal. container	
Net Unit Price	\$ _____ /gal.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 4: Alliette powder or approved equal. Used for the control of fungus and algae.

Active Ingredients:

Aluminum tris (0-ethyl phosphonate)	80.0%
Inert Ingredients	20.0%

Approximate annual usage	50 lbs.	
Preferred Packaging	5 lb. container	
Net Unit Price	\$ _____ /lb.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

Item 5: Armada or approved equal. For control of certain foliar, stem, and root diseases of turfgrass.

Active Ingredients:

Trifloxystrobin (CAS No. 141517-21-7)	8.33%
Triadimefon (CAS No. 43121-43-3)	41.67%
Inert Ingredients	50.00%

Approximate annual usage	200 ozs.	
Preferred Packaging	3 oz. container	
Net Unit Price	\$ _____ /oz.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

CATEGORY D (FIRE ANT APPLICATIONS)

Item 1: Amdro or approved equal. Insecticide used in the control of fire ants.

Active Ingredients:

Hydramethalone 1.02%

Inert Ingredients 98.98%

Approximate annual usage 5,150 lbs.

Preferred Packaging 25 lb. bag

Net Unit Price \$ _____ /lb.

Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 2: Amdro or approved equal. Insecticide used in the control of fire ants.

NOTE: Same as above item but different packaging.

Active Ingredients:

Hydramethalone 1.02%

Inert Ingredients 98.98%

Approximate annual usage 100 lbs.

Preferred Packaging 3 lb. bag

Net Unit Price \$ _____ /lb.

Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 3: Logic/ Award or approved equal. Insecticide used in the control of fire ants.

Active Ingredients:

Phenoxy carb 1.0%

Inert Ingredients 99.0%

Approximate annual usage 1,500 lbs.

Preferred Packaging 25 lb. bag

Net Unit Price \$ _____ /lb.

Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

CATEGORY E (WETTING AGENTS)

Item 1: A generic wetting agent used to increase water efficiency. Product may not contain any alcohol or petroleum and must have a low photo toxicity.

Active Ingredients:

2-butoxyelthanol, polyoxyethylene, polypropoxypanol, silicone defoamer 87.6%

Inert Ingredients 12.4%

Approximate annual usage 400 gals.

Preferred Packaging 2 1/2 gal. container

Net Unit Price \$ _____ /gal.

Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

Item 2: A generic wetting agent in granular form used to increase water efficiency. Product may not contain any alcohol or petroleum and must have a low photo toxicity.

Active Ingredients:

2-butoxyelthanol, polyoxyethylene, polypropoxypanol, silicone defoamer 87.6%

Inert Ingredients 12.4%

Approximate annual usage 1,300 lbs.

Preferred Packaging 50 lb. bags

Net Unit Price \$ _____ /lb.

Packaging: container size _____ # containers/carton

Manufacturer and Trade Name _____

CATEGORY H (DEFOAMERS)

Item 1: Foam buster or approved equal. A silicone defoamer for use in aqueous solutions.

Active Ingredients:

Dimethylpolysiloxane	10.0%
Constituents ineffective as adjuvants	90.0%

Approximate annual usage	300 pts.	
Preferred Packaging	1 pt. container	
Net Unit Price	\$ _____ / pt.	
Packaging: container size	_____	# containers/carton

Manufacturer and Trade Name _____

BIDDER _____

ADDRESS _____

BY _____

Signature

Please Type or Print Signature Name Here

TITLE _____

DATE _____

PHONE _____

Will your firm accept payment via Town of Davie Visa procurement card? Please circle one YES NO

You must submit a completed W-9 Form and a completed Bidder/Vendor Disclosure Form with you bid.

Request for Taxpayer Identification Number and Certification

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

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: Individual/Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.) **Requester's name and address (optional)**

City, state, and ZIP code

List account number(s) here (optional)

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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number										
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td> </tr> </table>										
OR										
Employer identification number										
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td> </tr> </table>										

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. person (including a U.S. resident alien).

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 on page 4.)

Sign Here Signature of U.S. person Date

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding.
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States.
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity.

I, _____, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the
Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: _____

Address: _____

FEIN _____

State and date of incorporation _____

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
_____	_____	_____%
_____	_____	_____%
_____	_____	_____%
_____	_____	_____%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

BY: _____

Date: _____

Signature of Affiant

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this _____ day of
_____ 200____, by _____, he/she is
personally known to me or has presented _____ as
identification.

Notary Public, State of Florida at Large

Print or Stamp of Notary

Serial Number

My Commission Expires : _____

