



## SOUTHEAST FLORIDA GOVERNMENTAL PURCHASING COOPERATIVE

### **TO OUR PROSPECTIVE CONTRACTORS**

The attached invitation for Bid or Request for Proposal represents a cooperative procurement for the Southeast Florida Governmental Purchasing Cooperative.

For the past several years, approximately twenty-six (26) government entities have participated in Cooperative Purchasing in Southeast Florida. The Southeast Florida Governmental Purchasing Cooperative was formed in an effort to provide cost savings and cost avoidances to all entities by utilizing the buying power of combined requirements for common, basic items.

The Government Agencies participating in this particular procurement and their respective delivery locations are listed in the attached document.

### Southeast Florida Governmental Purchasing Cooperative Procurement Operational Procedures

- All questions concerning this procurement should be addressed to the Issuing agency, hereinafter referred to as the "lead agency". All responses are to be returned in accordance with the instructions contained in the attached document. Any difficulty with participating agencies referenced in this award must be brought to the attention of the lead agency.
- Each participating governmental entity will be responsible for awarding the contract, issuing its own purchase orders, and for order placement. Each entity will require separate billings, be responsible for payment to the Contractor(s) awarded this contract, and issue its own tax exemption certificates as required by the Contractor.
- The Contract/purchase order terms of each entity will prevail for the individual participating entity. Invoicing instructions, delivery locations and insurance requirements will be in accordance with the respective agency requirements.
- Any reference in the documents to a single entity or location will, in fact, be understood as referring to all participating entities referenced in the documents and cover letter unless specifically noted otherwise.
- The awarded Contractor(s) shall be responsible for advising the lead agency of those participants who fail to place orders as a result of this award during the contract period.
- The Contractor(s) shall furnish the Lead Agency a detailed Summary of Sales semi-annually during the contract period. Sales Summary shall include contract number(s), contractor's name, the total of each commodity sold during the reporting period and the total dollar amount of purchases by commodity.
- Municipalities and other governmental entities which are not members of the Southeast Florida Governmental Purchasing Cooperative are strictly prohibited from utilizing any contract or purchase order resulting from this bid award. However, other Southeast Florida Governmental Purchasing Cooperative members may participate in their contract for new usage, during the contract term, or in any contract extension term, if approved by the lead agency. New Southeast Florida Governmental Purchasing Cooperative members may participate in any contract on acceptance and approval by the lead agency.
- None of the participating governmental entities shall be deemed or construed to be a party to any contract executed by and between any other governmental entity and the Contractor(s) as a result of this procurement action.

"WORKING TOGETHER TO REDUCE COSTS"



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

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

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(954) 797-1000

February 27, 2012

### NOTICE TO BIDDERS

The Town of Davie is accepting sealed bids until 2:00 p.m. on Thursday, March 22, 2012, for the following:

#### HORTICULTURAL CHEMICALS, B-12-34

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". One original and 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, March 22, 2012, 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, CPPO, CPPB, FCPM, FCPA, FCCN  
Procurement Manager

## 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.

14. Insurance

The insurance requirements stated in this specification are the limits that will be required in order to be recommended for award. Bidders MUST submit a certificate of insurance with their bid submittal OR a letter from their insurance broker stating that the firm qualifies for the required limits should they be in a position to be recommended for award.

If a bidder provides the letter from their insurance broker, they will be required to submit a certificate of insurance with the required limits prior to beginning any work.

15. Local Vendor Preference

Definitions

Local Davie Vendor-a "local Davie vendor" shall mean a person or business entity which has maintained a permanent place of business with full-time employees within the Town limits for a minimum of six months prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box or a residence. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Town of Davie and have an address that the U.S. Postal Service recognizes as being a Davie address to be eligible.

Local Broward County Vendor- a "local Davie vendor" shall mean a person or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of six months prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box or a residence. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides and have an address that the U.S. Postal Service recognizes as being a Broward County address to be eligible.

Bid- A bid shall be any competitive solicitation by specification officially posted by the Town of Davie Purchasing staff on the Town's website where the award is determined by price.

Proposal-a proposal shall be any competitive solicitation by Request for Proposal (RFP) officially posted by the Town of Davie purchasing staff on the Town's website where the award is determined by qualifications.

#### Process

a) Competitive Bid- For bid evaluation purposes, vendors that meet the definition of "local Davie vendor" as detailed above shall be given a 5% evaluation credit. This shall mean that if a "local Davie vendor" submits a bid/quote that is within 5% of the lowest price submitted by any vendor, the "local Davie vendor" shall have an option to submit another bid which is at least 1% lower than the lowest responsive bid/quote. If the "local Davie vendor" submits a bid which is at least 1% lower than that lowest responsive bid/quote, then the award will go to the "local Davie vendor". If not, the award will be made to the vendor that submits the lowest responsive bid/quote. If the lowest responsive and responsible bidder IS a "local Davie vendor", the award will be made to that vendor and no other bidders will be given an opportunity to submit additional bids as described herein.

For bid evaluation purposes, vendors that meet the definition of "local Broward County vendor" as detailed above shall be given a 2.5% evaluation credit. This shall mean that if a "local Broward County vendor" submits a bid/quote that is within 2.5% of the lowest price submitted by any vendor, the "local Broward County vendor" shall have an option to submit another bid which is at least 1% lower than the lowest responsive bid/quote. If the "local Broward County vendor" submits a bid which is at least 1% lower than that lowest responsive bid/quote, then the award will go to the "local Broward County vendor". If not, the award will be made to the vendor that submits the lowest responsive bid/quote. If the lowest responsive and responsible bidder IS a "local Davie vendor", the award will be made to that vendor and no other bidders will be given an opportunity to submit additional bids as described herein.

If there is a "local Davie vendor" and a "local Broward County vendor" participating in the same bid solicitation and both vendors qualify to submit a second bid as detailed above, the "local Davie vendor" will be given first option. If the "local Davie vendor"

cannot beat the lowest bid received by at least 1%, an opportunity will be given to the "local Broward County vendor". If the "local Broward County vendor" cannot beat the lowest bid by at least 1%, then the bid will be awarded to the lowest bidder regardless of geographic location of the business.

If multiple "local Davie vendors" submit bids/quotes which are within 5% of the lowest bid/quote, then all vendors will be asked to submit a "best and final offer (BAFO)". The award will be made to the "local Davie vendor" submitting the lowest BAFO providing that that BAFO is at least 1% lower than the lowest bid/quote received in the original solicitation. If no "local Davie vendor" can beat the lowest bid/quote by at least 1%, then the process will be repeated with all "local Broward County vendors" who have submitted a bid/quote which is within 2.5% of the lowest bid/quote. If no "local Davie vendor" and no "local Broward County vendor" can submit a BAFO that is at least 1% lower than the lowest bid/quote submitted in the original solicitation, the award will be made to the lowest responsive bidder regardless of geographic location of the business.

b) Competitive Proposal- For evaluation purposes, "local Davie vendor" and "local Broward County vendor" shall be a criterion for award in any Request For Proposal unless specifically exempted by the Town Administrator or the Town Council.

c) Exceptions

1. No "local vendor" preference will be included in any competitive solicitation where the Town is the lead agency for the Southeast Florida Cooperative Purchasing Group.
2. Utilization of a State or other agency contract.
3. State or Federal law prohibits the use of local preference.
4. The work is funded in whole or in part by a governmental entity where the laws, rules, regulations or policies prohibit the use of local preferences.
5. Sole source or single source purchases.
6. The "local vendor" is either non-responsive or non-responsible.
7. All bids submitted exceed the budget amount for the project.
8. Emergency purchases.
9. The Town Administrator and/or the Town Council may exempt any competitive solicitation from the local vendor preference.

## 16. Bid Protest Policy

If a vendor feels that they have been treated unfairly with regards to the results of a solicitation, or the resulting recommendation for award, they may protest the Town's action as follows:

1. The vendor must submit a letter to the Procurement Manager detailing the nature of the protest along with two (2) cashier's checks within three (3) working days of the notice of intent to award. The first check will be in the amount of \$500 (hereinafter called "the administrative fee"). The second check will be in the amount of 1% of the bid amount (hereinafter called "the protest bond"). The Town's notices of intent to award are posted on the Town of Davie website.
2. If the Procurement Manager receives a bid protest letter along with the administrative fee and the protest bond as described above, the bid award process will be suspended and the protest will be referred to the Bid Protest Committee. However, if the project is needed to protect the health, safety, and/or welfare of the residents of the Town of Davie, the award of the project will proceed without interruption. The Bid Protest Committee shall consist of three (3) Town of Davie staff member to be selected by the Town Administrator. The Procurement Manager and the employee that wrote the recommendation for award may not sit as a member of the Bid Protest Committee. However, the Procurement Manager and the staff member that wrote the recommendation for award shall be present at the hearing of the Bid Protest Committee to answer any questions pertaining to the bid process or the evaluation process.
3. The Bid Protest Committee shall schedule a hearing within ten (10) working days of receipt of the protest letter. All parties having an interest in the outcome will be notified of the date and time of the hearing. If the bid protest is denied, the vendor will forfeit the protest bond. If the protest is upheld, the protest bond will be returned to the vendor. The administrative fee shall be non-refundable in all cases.
4. If the Bid Protest Committee denies the protest, the aggrieved vendor may appeal his/her case to the Davie Town Council. In order to appeal, the vendor must notify the Town Administrator within three (3) working days of the Bid Protest Committee's ruling. Upon notification, the Town Administrator will schedule the appeal as an agenda item on the next available Town Council agenda. All bidders will be notified of the agenda date.
5. Once the bid protest is resolved, the Town will proceed with the bid award. Except as exempted in 2 above.

SOUTHEAST FLORIDA GOVERNMENTAL PURCHASING CO-OP MEMBERS

Organization Name	Name	Address	City	State	Zip	Work Phone	Fax Number	Email Address
Atlanta, City of	Mo Thomson	280 Orange Tree Drive	Atlanta	FL	33462	661-965-1744	661-642-1806	mthomson@atlantafli.gov
Atlanta, City of	Jean Barbieri	280 Orange Tree Drive	Atlanta	FL	33462	661-965-1744	661-642-1806	barbieri@atlantafli.gov
Aventura, City of	Indira Sarli	19200 W. Country Club Dr	Aventura	FL	33180	(305) 466-8925	(305) 466-9336	ssarli@cityofventura.com
Boca Raton, City of	Bob Bolinski	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7873	(561) 383-7963	bbolinski@cityofboca-raton.fl.us
Boca Raton, City of	David Bolinski	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7873	(561) 383-7963	dbolinski@cityofboca-raton.fl.us
Boca Raton, City of	Lynn Kurkel	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7874	(561) 383-7963	lkurkel@cityofboca-raton.fl.us
Boca Raton, City of	Alicia Kelsch	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7875	(561) 383-7963	akelsch@cityofboca-raton.fl.us
Boca Raton, City of	Lenora Denton	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7875	(561) 383-7963	ldenton@cityofboca-raton.fl.us
Boca Raton, City of	Stephene Sells	201 W. Palmbeach Park Rd.	Boca Raton	FL	33432	(561) 383-7872	(561) 383-7963	ssells@cityofboca-raton.fl.us
Boca Raton, City of	Alex Dennis	225 E. Las Olas Blvd.	Boca Raton	FL	33301	(561) 389-7872	(561) 389-7963	adennis@broward.edu
Broward Community College- Purchasing Dept.	Beau Mitchell	225 E. Las Olas Blvd.	Fort Lauderdale	FL	33301	(954) 201-7465	(954) 201-7330	bmitchel@broward.edu
Broward Community College- Purchasing Dept.	Bob Petelano	225 E. Las Olas Blvd.	Fort Lauderdale	FL	33301	(954) 201-7465	(954) 201-7330	bpetelan@broward.edu
Broward Community College- Purchasing Dept.	Susan Gabriel	225 E. Las Olas Blvd.	Fort Lauderdale	FL	33301	(954) 201-7465	(954) 201-7330	sgabriel@broward.edu
Broward County Purchasing Dept.	John A. Korman	115 S. Andrews Ave.	Fort Lauderdale	FL	33301	(954) 357-6009	(954) 357-6535	jkorman@broward.org
Broward County Purchasing Dept.	Karen Walbridge	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	(954) 357-6046	(954) 357-6535	kwalbridge@broward.org
Broward County Purchasing Dept.	Kathy Davis	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	(954) 357-6087	(954) 357-6535	kdavis@broward.org
Broward County Purchasing Dept.	Anthony Carneau	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	954-357-6067	(888)81002-0879	acarneau@broward.org
Broward County Purchasing Dept.	Elizabeth Overholser	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	(954) 357-6076	(954) 357-6535	eoverholser@broward.org
Broward County Purchasing Dept.	Ilysa Valdeola	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	954-357-6078	(954) 357-6535	valdeola@broward.org
Broward County Purchasing Dept.	Christine Calhoun	115 S. Andrews Ave. Room 212	Fort Lauderdale	FL	33301	954-357-6085	9543575527	ccalhoun@broward.org
Broward County Purchasing Dept.	Yasmin Tala	980 NW 88th St	Oakland Park	FL	33309	(954) 537-2850	(954) 537-2855	yatala@broward.org
Broward County School Board	Carol Barker	7720 W. Oakland Park Blvd. Ste 323	Surfside	FL	33391	(754) 321-0906	(754) 321-0533	carolbarker@browardschools.com
Broward County School Board	Charles High	7720 W. Oakland Park Blvd. Ste 323	Surfside	FL	33391	(754) 321-0903	(754) 321-0534	charles.high@browardschools.com
Broward County School Board	Kay Lloyd	7720 W. Oakland Park Blvd. Ste 323	Surfside	FL	33391	(754) 321-0904	(754) 321-0534	kay.lloyd@browardschools.com
Broward County School Board	Mark Alan	7720 W. Oakland Park Blvd. Ste 323	Surfside	FL	33391	(754) 321-0907	(754) 321-0534	mark.alan@browardschools.com
Broward County School Board	Phyllis Ben-Asher	7720 W. Oakland Park Blvd. Ste 323	Surfside	FL	33391	(754) 321-0927	(754) 321-0533	pbhasher@browardschools.com
Broward County Sheriff - Purchasing	John Sallidopoulos	143 NW 23 Ter.	Fort Lauderdale	FL	33311	(954) 831-8273	(954) 831-8288	john_sallidopoulos@sheriff.org
Broward County Sheriff - Purchasing	Larry D. Strah	2801 W. Broward Blvd	Fort Lauderdale	FL	33312	(954) 321-4736	(954) 765-4006	larry_strah@sheriff.org
Broward County Sheriff - Purchasing	Rick Torres	2801 W. Broward Blvd.	Fort Lauderdale	FL	33312	(954) 831-8172	(954) 765-4006	rick_torres@sheriff.org
Broward County Sheriff - Purchasing	Michael Brady	2801 W. Broward Blvd.	Fort Lauderdale	FL	33312	(954) 831-8175	(954) 765-4006	Michael.Brady@sheriff.org
Broward County Sheriff - Purchasing	Aurel Gil	2801 W. Broward Blvd.	Fort Lauderdale	FL	33312	(954) 831-8173	(954) 765-4006	aurel_gil@sheriff.org
Broward County Sheriff - Purchasing	Jason Spaldie	2801 W. Broward Blvd.	Fort Lauderdale	FL	33312	954-321-4542	(954) 765-4006	Jason.Spaldie@sheriff.org
Broward County Sheriff - Purchasing	Rona Sandler	2801 W. Broward Blvd.	Fort Lauderdale	FL	33312	(954) 321-4551	(954) 765-4006	rona_sandler@sheriff.org
Broward Health (North Broward Hospital District) Children's Services Council of Palm Beach County	Steve Thompson	303 SE 17 St	Fort Lauderdale	FL	33316	954-468-8071	954-355-5109	sthompson@browardhealth.org
	Ranita Reef	2300 High Ridge Rd.	Bayton Beach	FL	33426	(561) 374-7574	(561) 833-1956	Ranita.Reef@csppbc.org

SOUTHEAST FLORIDA GOVERNMENTAL PURCHASING CO-OP MEMBERS

Organization Name	Name	Address	City	State	Zip Code	Work Phone	Fax Number	Email Address
Coconut Creek, City of	Linda Jeehan	4800 W. Copans Rd.	Coconut Creek	FL	33063	(954) 956-1438	(954) 973-6754	ljeehan@coconutcreek.net
Coconut Creek, City of	David Santucci	4800 W. Copans Rd.	Coconut Creek	FL	33063	(954) 956-1438	(954) 973-6754	dsantucci@coconutcreek.net
Cooper City, City of	Kent Amie Fisher	PO Box 290810	Cooper City	FL	33329	(954) 434-4300 Ext 298	(954) 434-0099	kent@coopercity.fl.gov
Coral Gables, City of	Joe Rodriguez	2920 SW 72 Avenue	Miami	FL	33195	(305) 460-5121	(305) 460-5116	correcps@coralgables.com
Coral Springs, City of	Angela Salamone	9551 W. Sample Road	Coral Springs	FL	33066	(954) 344-1100	(954) 344-1166	asalamone@coralsprings.org
Coral Springs, City of	Art Resnik	9551 W. Sample Road	Coral Springs	FL	33066	(954) 344-1101	(954) 344-1166	ajr@coralsprings.org
Coral Springs, City of	Gail Dixon	9551 W. Sample Road	Coral Springs	FL	33066	(954) 344-1104	(954) 344-1166	gdixon@coralsprings.org
Coral Springs, City of	Seochee	9551 W. Sample Road	Coral Springs	FL	33066	(954) 344-1102	(954) 344-1166	seochee@coralsprings.org
Coral Springs, City of	Tim Planco	4181 NW 11th Manor	Coral Springs	FL	33065	(954) 345-2235	(954) 345-2235	tim@coralsprings.org
Coral Springs Improvement District	Edward Shover	10390 NW 11th Manor	Coral Springs	FL	33071	(954) 752-7197 504 826-6800 ext. 3674	(954) 751-4550	es@csidistricts.com
Dania Beach, City of	Nanci Denny	100 W. Dania Beach Blvd.	Dania Beach	FL	33004	(954) 797-1015	(954) 797-1049	ndenny@daniebeach.fl.us
Dania, Town of	Elena Blackiston	6591 Orange Drive	Dania	FL	33314	(954) 797-1015	(954) 797-1049	elena_blackiston@danie-fl.gov
Dania, Town of	Herb Hyman	6591 Orange Drive	Dania	FL	33314	(954) 797-1016	(954) 797-1049	herb_hyman@danie-fl.gov
Dania, Town of	Angie Salinas	6591 Orange Drive	Dania	FL	33314	(954) 797-1062	(954) 797-1049	angelita_salinas@danie-fl.gov
Deerfield Beach, City of	Dorra Cournt	401 SW 4th St.	Deerfield Beach	FL	33441	(954) 480-4380	(954) 480-4388	dcournt@deerfield-beach.com
Deerfield Beach, City of	Jessica Gamble	401 SW 4th St.	Deerfield Beach	FL	33441	(954) 480-4418	(954) 480-4388	lgamble@deerfield-beach.com
Deerfield Beach, City of	Paul Cobeine	401 SW 4th St.	Deerfield Beach	FL	33441	(954) 480-4418	(954) 480-4388	pcobeine@deerfield-beach.com
Fort Lauderdale, City of	Andeiza Diaz	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5948	(954) 828-5576	adiaz@fortlauderdale.gov
Fort Lauderdale, City of	Carrie Keohane	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5141	(954) 828-5576	ckeohane@fortlauderdale.gov
Fort Lauderdale, City of	Robert Mckerny	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-7816	(954) 828-5576	rmckerny@fortlauderdale.gov
Fort Lauderdale, City of	James Hemphill	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5143	(954) 828-5576	hemphill@fortlauderdale.gov
Fort Lauderdale, City of	Kirk Bluffington	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5933	(954) 828-5576	kbluffin@fortlauderdale.gov
Fort Lauderdale, City of	Richard Eswell	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5138	(954) 828-5576	reswell@fortlauderdale.gov
Fort Lauderdale, City of	Michael Walker	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-5677	(954) 828-5576	mwalker@fortlauderdale.gov
Fort Lauderdale, City of	Rick Andrews	100 N. Andrews Ave. Room 619	Fort Lauderdale	FL	33301	(954) 828-4357	(954) 828-5576	randrews@fortlauderdale.gov
Greenacres, City of	Alyssa M. Mils	5800 Melrose Lane	Greenacres	FL	33463	(561) 642-2039	(561) 642-2037	amils@gof.greenacres.fl.us
Greenacres, City of	Monica Powery	5900 Melrose Lane	Greenacres	FL	33463	(561) 642-2030	(561) 642-2037	mpowery@gof.greenacres.fl.us
Hialeah Beach, City of	Aurora Lius	400 S. Federal Hwy	Hialeah	FL		(954) 457-1332	(954) 457-1342	alius@hialeahbeach.fl.us
Hialeah Beach, City of	Joann Wiggins	400 S. Federal Hwy	Hialeah	FL			(954) 457-1342	wiggins@hialeahbeach.fl.us
Hollywood, City of	Dianne Waterspoon	2600 Hollywood Blvd. Room 3030	Hollywood	FL	33020	(954) 921-3248	(954) 921-3086	dwaterspoon@hollywood.fl.us
Hollywood, City of	Jamie English	2600 Hollywood Blvd. Room 3030	Hollywood	FL	33020	(954) 921-3345	(954) 921-3086	jenglish@hollywood.fl.us
Hollywood, City of	K. Kilpatrick	2600 Hollywood Blvd.	Hollywood	FL	33020	(954) 921-3222	(954) 921-3086	kkilpatrick@hollywood.fl.us
Hollywood, City of	Ian Superville	2600 Hollywood Blvd. Room 303	Hollywood	FL	33020	954-921-3552	954-921-3086	isuperv@hollywood.fl.us
Hollywood, City of	Linda Silvey	2600 Hollywood Blvd. Room 303	Hollywood	FL	33020	(954) 921-3200	(954) 921-3086	lsilvey@hollywood.fl.us
Hollywood, City of	Ralph Dentis	2600 Hollywood Blvd. Room 303	Hollywood	FL	33020	(954) 921-3223	(954) 921-3086	rdentis@hollywood.fl.us

SOUTHEAST FLORIDA GOVERNMENTAL PURCHASING CO-OP MEMBERS

Organization Name	Name	Address	City	State	Zip	Work Phone	Fax Number	Email Address
Lanaha, Town of	Clyde All		Lanaha	FL		(561) 540-5760	(561) 540-5769	walshbert@lanaha.org
Lauderdale by the Sea, Town of	Karla King	4301 Ocean Drive	Lauderdale by the Sea	FL	33308	954-776-0576	954-776-7910	kingk@lauderdalebysesea-fl.gov
Lauderdale-Lakes, City of	Edna St. Jean	4301 Ocean Drive	Lauderdale Lakes	FL	33308	954-776-0576	954-776-7910	edna@lauderdalelakes-fl.gov
Lauderdale-Lakes, City of	Diane LeRay	4300 NW 98 Street	Lauderdale Lakes	FL	33319	(954) 535-2743	(954) 733-3276	diane@lauderdalelakes.org
Lauderhill, City of	Geala Ramberry	4300 NW 98 Street	Lauderhill	FL	33319	(954) 535-2722	(954) 733-3276	geeda@lauderdalelakes.org
Lighthouse Point, City of	Gwendolyn Jones	3800 Inventory Blvd, Ste 209	Lighthouse Point	FL	33319	954-497-4708	(954) 730-3075	gjones@lighthousepoint-fl.gov
Marygrove, City of	Mary Pryde	2200 NE 38 St.	Marygrove	FL	33064	(954) 946-7366	(954) 946-7392	mpryde@lighthousepoint.com
Marygrove, City of	Corrie Guzzi	5790 Mangrove Blvd	Marygrove	FL	33063	(954) 972-6454	(954) 935-5258	guzzi@marygrovefl.com
Marygrove, City of	Pat Greenstein	5790 Mangrove Blvd	Marygrove	FL	33063	(954) 972-6454	(954) 935-5258	patgreenstein@marygrovefl.com
Marygrove, City of	Shantel Ray	5790 Mangrove Blvd	Marygrove	FL	33063	(954) 972-6454	(954) 935-5258	shantelray@marygrovefl.com
Miami Gardens, City of	Wm Garviseo	1515 NW 167 St. #200	Miami Gardens	FL	33169	(305) 622-4900	(305) 474-7285	wgarviseo@miamigardens-fl.gov
Miami Gardens, City of	Pam Thompson	1515 NW 167 St. #200	Miami Gardens	FL	33169	(305) 622-4900	(305) 474-7285	pthompson@miamigardens-fl.gov
Miami Gardens, City of	Elena Varona	1515 NW 167 St. #200	Miami Gardens	FL	33169	(305) 622-4900	(305) 474-7285	evarona@miamigardens-fl.gov
Miami, City of	A. Media	444 SW 2nd Ave, 6th Floor	Miami	FL	33130	(305) 416-1906	(305) 400-5338	amedia@miamifl.gov
Miami, City of	Glenn Marcos	444 SW 2nd Ave, 6th Floor	Miami	FL	33130	(305) 416-1906	(305) 400-5338	glennmarcos@miamifl.gov
Miami-Dade County	Andrew Zaworski	111 NW 1st Street	Miami	FL	33128	(305) 375-5663	(305) 375-2316	azawors@miamidade.gov
Miami-Dade County Schools	Kevin Mahony		Miami	FL		305-595-2350	305-523-3367	kmahony@schools.miamidade.gov
Miramar, City of	Luz Bartra	2300 Civic Center Place	Miramar	FL	33005	954-602-3065		luzbartra@miramar-fl.us
Miramar, City of	MaryKay Zamora	2300 Civic Center Place	Miramar	FL	33005	954-602-3064		mzamora@miramar-fl.us
North Lauderdale, City of	Ivelsa Guzman	704 SW 71 Ave	N Lauderdale	FL	33068	(954) 722-0900	(954) 720-2064	kguzman@lauderdale.org
North Miami Beach, City of	Yves Fontaine	Room 315	North Miami Beach	FL	33162	(305) 948-2946	(305) 957-3522	yves.fontaine@citynmb.com
North Miami Beach, City of	Brian O'Connor	Room 315	North Miami Beach	FL	33162	(305) 948-2946	(305) 957-3522	brian.oconnor@citynmb.com
North Miami Beach, City of	Donna Chung	Room 315	North Miami Beach	FL	33162	(305) 957-3609	(305) 957-3522	donna.chung@citynmb.com
North Miami, City of	Ruby Greenbaum-Johnson	776 NE 125 St	North Miami	FL	33161	(305) 895-9886	(305) 891-1015	rjohnson@northmiami.gov
North Springs Improvement District	Melroy Landau	9700 NW 52nd Street	North Springs	FL	33076	(954) 995-9886	(954) 891-1015	melroylandau@northspringsfl.gov
Oakland Park, City of	Maggie Turner	3650 NE 12 Avenue	Oakland Park	FL	33094	(954) 795-6604	(954) 755-7227	mturner@oaklandpark.org
Palm Beach County BCC	Theray Nun	60 So. Military Trl Ste 110	West Palm Bch	FL	33415	(561) 816-6835	(561) 242-6735	turner@pbcgov.com
Palm Beach Gardens, City of	Adis Pedraza	10500 North Military Trail	Palm Beach Gardens	FL	33410	(561) 804-7014	(561) 739-4134	apedraza@townofpalmbeach.com
Palm Beach, Town of	Lynnda Davis	951 Old Oceanbreeze Rd	West Palm Bch	FL	33401	(561) 804-7014	(561) 739-4134	ldavis@townofpalmbeach.com
Palm Beach, Town of	Yvette	951 Old Oceanbreeze Rd	West Palm Bch	FL	33401	(561) 838-5406	(561) 635-4688	yvettes@townofpalmbeach.com
Parkland, City of	Sarah Caserio	6600 University Drive	Parkland	FL	33067	(954) 757-4135	(954) 241-5161	scaserio@cityofparkland.org
Pembroke Park, Town of	Jeanne Peterson		Pembroke Park	FL		954-666-4600		jeannep@townofpembrokepark.com
Pembroke Park, Town of	Georgina Rodriguez		Pembroke Park	FL		954-666-4600		georginar@townofpembrokepark.com
Pembroke Pines, City of Public Services Dept	Bob Aquino	13975 Pembroke Road	Pembroke Pines	FL	33027	954-968-4800 x1222		baquino@pines.com

561-807-7001

SOUTHEAST FLORIDA GOVERNMENTAL PURCHASING CO-OP MEMBERS

Organization Name	Name	Address	City	State	ZIP Code	Work Phone	Fax Number	Email Address
Plantation, City of	Larry Dismanting	400 NW 73 Avenue	Plantation	FL	33317	(954) 797-2705	(954) 797-2720	ldismanting@plantation.org
Plantation, City of	Erzard "Charles" Spencer	400 NW 73 Avenue	Plantation	FL	33317	(954) 797-2705	(954) 797-2720	espencc@plantation.org
Pompano Beach, City of	Leeta Hardin Tammy	1199 NE 3rd Ave, Bldg C	Pompano Beach	FL	33060	(954) 786-4098	(954) 786-4168	leeta.hardin@coptb.com
Pompano Beach, City of	Thomphs	1199 NE 3rd Ave, Bldg C	Pompano Beach	FL	33060	(954) 786-4098	(954) 786-4168	tammy.thomphs@coptb.com
Riviera Beach, City of	Bertram Guy	608 West Blue Heron Blvd.	Riviera Beach	FL	33404	(561) 845-4180	(561) 842-5105	bguy@rivierabch.com
Riviera Beach, City of	Gloriana Williams	600 West Blue Heron Blvd.	Riviera Beach	FL	33404	(661) 845-4180	(561) 842-5105	gwilliams@rivierabch.com
Riviera Beach, City of	Pamela Daley	600 West Blue Heron Blvd.	Riviera Beach	FL	33404	(561) 845-4180	(561) 842-5105	pdaley@rivierabch.com
Riviera Beach, City of	Pierre Wilson	600 West Blue Heron Blvd.	Riviera Beach	FL	33404	(561) 845-4180	(561) 842-5105	pwilson@rivierabch.com
SERRA/TRI-RAIL	V. Martin Kelly	800 NW 33rd St, Suite 100	Pompano Beach	FL	33064	(954) 788-7913	(954) 788-7983	kellyv@strna.fl.gov
SERRA/TRI-RAIL	Christopher Cross	800 NW 33rd St, Suite 100	Pompano Beach	FL	33064	(954) 788-7911	(954) 788-7983	brussc@strna.fl.gov
South Central Regional Water Center Treatment & South Central Regional Wastewater (row 527,09)	Margi Woodall Lori Osborn							mwodall@scwtrd.org losborn@scwtrd.org
Southwest Ranches	Cheryl Williams Shawn Shannon Galvez	19070 Collings Avenue, 3rd Floor	Sunny Isles Beach	FL	33190	305-792-1773	305-792-1614	cmilliams@southwestranches.org shannon@stbll.net
Sunrise, City of Purchasing	Dick Cummings	10770 W. Oakland Park Blvd.	Sunrise	FL	33351	(954) 572-2274	(954) 572-2278	dcummings@cityofsunrise.org
Sunrise, City of Purchasing	A. Potter	10770 W. Oakland Park Blvd.	Sunrise	FL	33351	(954) 572-2274	(954) 572-2278	apotter@cityofsunrise.org
Sunrise, City of Purchasing	Holly Rapphelson	10770 W. Oakland Park Blvd.	Sunrise	FL	33351	(954) 572-2202	(954) 572-2278	hrapphelson@cityofsunrise.org
Sunrise, City of Purchasing	Wendy Lorenzo	10770 W. Oakland Park Blvd.	Sunrise	FL	33351	(954) 572-2274	(954) 572-2278	wlorenzo@cityofsunrise.org
Tamarac, City of Purchasing Div.	Keith Glaze Steven Baermeister	7525 NW 88th Ave. 7525 NW 88th Ave.	Tamarac	FL	33321	(954) 597-3567	(954) 597-3565	keithg@tamarac.org stevenk@tamarac.org
Village of Palm Springs	Don Ray							dray@villageofpalm Springs.org
Village of Wellington	Bill M. Atkins	14000 Greenbriar Blvd	Wellington	FL	33414	(561) 791-4794	(561) 793-2548	bmatkins@cityofwellington.fl.us
Village of Wellington	Jim Volkman	14000 Greenbriar Blvd	Wellington	FL	33414	(561) 791-4101	(561) 793-2548	jvolkman@cityofwellington.fl.us
Weston, City of	Brad Keane	2599 South Post Road	Weston	FL	33331	(954) 385-2600	(954) 385-2610	bkeane@westonfl.org
Weston, City of	Andrianauskevich	2599 South Post Road	Weston	FL	33331	(954) 385-2600	(954) 385-2610	amatuskevich@westonfl.org
West Palm Beach, City of	A. Karl Hansen	401 Clematis Street	West Palm Beach	FL	33401	(561) 822-2106	(561) 822-1554	ahansen@wpb.org
West Palm Beach, City of	Diana	401 Clematis Street	West Palm Beach	FL	33401	(561) 822-2103	(561) 822-1554	dianaweston@wpb.org
Wilson Manors, City of	Darron, Garrabak	524 NE 21 Court	Wilson Manors	FL	33305	(954) 390-2141	(954) 390-2198	dgarrabak@wilsonmanors.com
Wilson Manors, City of	Fernando Sartz	524 NE 21 Court	Wilson Manors	FL	33305	(954) 390-2130	(954) 390-2199	fsartz@wilsonmanors.com
Wilson Manors, City of	Ebert Whains	524 NE 21 Court	Wilson Manors	FL	33305	(954) 610-7979	(954) 390-2199	whains@wilsonmanors.com
Revised 6/17/2010								

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 bidding on a two (2) year contract commencing upon award by the Town Council of the Town of Davie. The Town realizes that price increases may occur during the term of this contract. Vendors will be permitted to submit any requests for price increase once every six (6) months. All requests must be submitted with any supporting documentation. The Town will review any such requests for price increases and advise the vendor within fourteen (14) calendar days of the status of the request. If a vendor asks for a price increase and that price increase puts their bid above the price of the next lowest bidder, the Town will contact that next lowest bidder. If that next lowest bidder agrees to keep the original bid price firm, the Town reserves the right to transfer the award to the vendor keeping their price firm (making them the new lowest bidder). In all cases, the Town reserves the right to accept or reject any request for a price increase.

#### 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. UNIT OF MEASURE

Bidders MUST bid on the unit of measure requested on the pricing pages regardless of the packaging size. No changes to the units of measure will be accepted. **Should a bidder change the unit of measure on a particular product, his/her bid for that product WILL NOT be evaluated.**

XI. PARTICIPATING AGENCIES

Town of Davie	City of Coral Springs
City of Hallandale Beach	City of Fort Lauderdale
City of Lauderhill	City of Pembroke Pines
City of Riviera Beach	City of Pompano Beach
City of Miami	City of Hollywood
City of Margate	City of Miami Gardens
City of Sunrise	City of North Miami Beach
City of Deerfield Beach	City of Dania Beach
City of Coconut Creek	City of Miramar
City of Boca Raton	City of Tamarac
Town of Palm Beach	City of Oakland Park

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.

XII. INSURANCE

It shall be the responsibility of the successful vendor(s) to maintain all required insurance during the term of this contract. Insurance certificates must be furnished to each co-op agency upon request.

Comprehensive General Liability with minimum limits of Five Hundred Thousand (\$500,000.00) per occurrence combined single limit for bodily injury liability and property damage liability.

Workers' Compensation Insurance in accordance with statutory requirements. Employer's Liability Insurance with minimum limits of  
\$100,000.00 for each accident,  
\$500,000 disease (policy limit) and  
\$100,000 disease (each employee).

Business Automobile Liability with minimum limits of  
(\$500,000.00) per occurrence combined single limit  
for bodily injury liability and property damage.

The successful vendor(s) must provide the co-op agencies with thirty (30)  
days written notice of any change or cancellation to these policies.

Vendor(s) must comply with any additional insurance requirements that  
may be required by any of the co-op agencies.

### XIII. 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.

XIV. PRODUCTS

CATEGORY A (SELECTIVE HERBICIDES)

**Item 1:** Drive XLR8 selective herbicide for the control of many broadleaf and grass weeds.

Active Ingredients:

Quinclorac: 3,7-dichloro-8-quinolinecarboxylic acid 15.93%

Inert Ingredients 84.07%

Approximate annual usage 200 gals.

Preferred Packaging 1/2 gal. containers

Net Unit Price \$ \_\_\_\_\_ /1/2 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 ProMax. A non-selective herbicide used for the control or destruction of most herbaceous plants. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:  
Glyphosate, N-(phosphonomethyl) glycine 48.7%  
In the form of its potassium salt  
Inert Ingredients 51.3%

Approximate annual usage 800 gals.  
Preferred Packaging 1.67 gal container  
Net Unit Price \$ \_\_\_\_\_ /gal.  
Packaging: container size \_\_\_\_\_ # containers/carton

Manufacturer and Trade Name \_\_\_\_\_

**Item 5:** Roundup ProMax. 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:  
Glyphosate, N-(phosphonomethyl) glycine 48.7%  
In the form of its potassium salt  
Inert Ingredients 51.3%

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 450 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	550 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	60 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	600 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	20,000 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 800 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 250 gals.  
Preferred Packaging 2 ½ gal. container  
Net Unit Price \$ \_\_\_\_\_ /gal.  
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.

Active Ingredients:

Pendimethalin	60.0%
Inert Ingredients	40.0%

Approximate annual usage	8,500 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	1,800 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	450 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      100 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      100 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 asyllum (methyl sulfanilyl 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 2,500 ozs.  
Preferred Packaging 6 oz. bottles  
Net Unit Price \$ \_\_\_\_\_ /6 oz. bottle  
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 11,000 ozs.  
Preferred Packaging 87 oz. containers  
Net Unit Price \$ \_\_\_\_\_ /oz.  
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 300 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 100 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 1,500 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 200 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. Preemergence herbicide for the control of annual grasses and broadleaf weeds in turf and ornamentals.

Active Ingredients:

Oxadiazon [2-tert-butyl-4-(2,4-dichloro-5-  
Isopropoxyphenyl)-1,3,4-oxdiazolin-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 \_\_\_\_\_

**Item 32:** Pennant Magnum or approved equal. Weed control in nurseries, turf, and landscape plantings.

Active Ingredients:  
5-metolachlor 83.7%  
Inert Ingredients 16.3%

Approximate annual usage 50 gal.  
Preferred Packaging 1 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	35,000 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	2,400 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 qts.	
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	20,000 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	3,300 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 12,000 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 100 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 50 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 100 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 60 ozs.  
Preferred Packaging 3 oz. container  
Net Unit Price \$ \_\_\_\_\_ /oz.  
Packaging: container size \_\_\_\_\_ # containers/carton

Manufacturer and Trade Name \_\_\_\_\_

**Item 6:** Eagle 20EW. A systemic protectant and curative fungicide for disease control in established turfgrass, landscape ornamentals, and greenhouse and nursery ornamentals. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Myclobutanil: a-butyl-a-(chlorophenyl)-1H-1, 2,4, triazole-1-propanenitrite 19.7%  
 Inert Ingredients 80.3%

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

Manufacturer and Trade Name \_\_\_\_\_

**Item 7:** Fore 80WP. A fungicide used on golf courses. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Mancozeb: A coordination product of zinc ion and Manganese ethylene bisdithiocarbamate 80.0%  
 In which the ingredients are:  
 Manganese 16.0%  
 Zinc 2.00%  
 Ethylene bisdithiocarbamate ion 62.0%  
 Inert Ingredients 20.0%

Approximate annual usage 50 lbs.  
 Preferred Packaging 1.5 lb. container  
 Net Unit Price \$ \_\_\_\_\_ /lb.  
 Packaging: container size \_\_\_\_\_ # containers/carton

Manufacturer and Trade Name \_\_\_\_\_

**Item 8:** Heritage TL. A broad spectrum fungicide for control of plant disease. **NO SUBSTITUTIONS WILL BE ACCEPTED FOR THIS PRODUCT.**

Active Ingredients:

Azoxystrobin: methyl (E)-2-(2-{6-(2-cyanophenoxy)  
Pyrimidin-4-yloxy]-3-methoxyacrylate 8.8%  
Inert Ingredients 91.2%

Approximate annual usage 50 gals.  
Preferred Packaging 1 gal. container  
Net Unit Price \$ \_\_\_\_\_ /gal.  
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 2,500 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:

Phenoxycarb	1.0%
Inert Ingredients	99.0%

Approximate annual usage	1,000 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-butoxyethanol, polyoxyethylene, polypropoxypanol, silicone defoamer	87.6%
Inert Ingredients	12.4%

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:** 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-butoxyethanol, polyoxyethylene, polypropoxypanol, silicone defoamer	87.6%
Inert Ingredients	12.4%

Approximate annual usage	200 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 150 qts.  
Preferred Packaging 1 qt. container  
Net Unit Price \$ \_\_\_\_\_ /qt.  
Packaging: container size \_\_\_\_\_ # containers/carton

Manufacturer and Trade Name \_\_\_\_\_

BIDDER \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

BY \_\_\_\_\_

Signature

\_\_\_\_\_  
Please Type or Print Signature Name Here

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

**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.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <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	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____	
	<input type="checkbox"/> Other (see Instructions) ▶ _____	
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 the "Name" line 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.

Social security number	
-	

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

Employer identification number	
-	

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below).

**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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

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

#### 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.

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:

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

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**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,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

#### Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

#### Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

#### Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

#### Specific Instructions

##### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Partnership, C Corporation, or S Corporation.** Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

**Disregarded entity.** Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

**Note.** Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

**Limited Liability Company (LLC).** If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

**Exempt Payee**

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
  2. The United States or any of its agencies or instrumentalities,
  3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
  4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
  5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
  7. A foreign central bank of issue,
  8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
  9. A futures commission merchant registered with the Commodity Futures Trading Commission,
  10. A real estate investment trust,
  11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
  12. A common trust fund operated by a bank under section 584(a),
  13. A financial institution,
  14. A middleman known in the investment community as a nominee or custodian, or
  15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

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

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

**Part II. Certification**

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

**Signature requirements.** Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>3</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor <sup>4</sup>
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records from Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-368-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

**Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3405, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

**Town of Davie  
Vendor/Bidder Disclosure**

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: \_\_\_\_\_  
Signature of Affiant

Date: \_\_\_\_\_

\_\_\_\_\_  
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 : \_\_\_\_\_

**BID SUBMITTAL COMPLETION CONFIRMATION for ITB's:**

\_\_\_\_\_ I, the Bidder, have completed and signed (preferably in blue ink) all required bid document pages.

\_\_\_\_\_ I, the Bidder, have submitted my bid on the bid sheets provided, and acknowledge that bids not submitted on bid sheets provided may be rejected.

\_\_\_\_\_ I, the Bidder, have filled in all spaces on the pricing page as noted, and acknowledged that bids with spaces left blank on the pricing page may be rejected.

\_\_\_\_\_ I, the bidder, have included all information, certificated, licenses and additional documentation as required by the Town in this bid document.

\_\_\_\_\_ I, the Bidder, have checked for any addendums to this bid, and will continue to check for any addendums up to the due date and time of this bid.

\_\_\_\_\_ I, the Bidder, have included on the face of the envelope, my company name and return address, the date and time of the bid opening, and the bid name and number.

\_\_\_\_\_ I, the Bidder, have submitted one (1) original and two (2) copies of the entire bid document and addendums.

\_\_\_\_\_ I, the Bidder, have read and completed the Vendor/Bidder Disclosure Form.

\_\_\_\_\_ I, the Bidder, have read and completed the W-9 Form.

\_\_\_\_\_ I, the Bidder, am aware that a Notice of Intent to Award this bid shall be posted on the Town's website at [www.davie-fl.gov](http://www.davie-fl.gov) and on the Town Hall bulletin board in the front lobby at Town Hall, and that it is my responsibility to check for this posting.

N/A \_\_\_\_\_ I, the Bidder, have submitted all supporting documentation for local preference eligibility, which must be received with the bid package prior to the bid opening date and time.

\_\_\_\_\_ I, the Bidder, have completed this checklist and it is included with my submittal.

**NAME OF COMPANY:** \_\_\_\_\_

**BIDDER'S NAME:** \_\_\_\_\_

**BIDDER'S AUTHORIZED SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_