

002251121 - Harvey E. Oyer Jr. Park Marina Boat Ramp Improvement Project

Opening Date: February 5, 2021 12:00 PM

Closing Date: March 11, 2021 2:30 PM

Vendor Details

Company Name: anzco inc
Does your company conduct business under any other name? If yes, please state: fl
Address: 9671 Carousel Circle S
Boca Raton , florida 33434
Contact: john zak
Email: jzak@anzcoinc.com
Phone: 561-699-3602
Fax: 954-532-2624
HST#: 20-8208440

Submission Details

Created On: Thursday March 11, 2021 11:49:47
Submitted On: Thursday March 11, 2021 14:13:04
Submitted By: john zak
Email: jzak@anzcoinc.com
Transaction #: 4b580057-36d3-47bd-a88c-d144816433ba
Submitter's IP Address: 173.162.121.194

Schedule of Prices

The Bidder hereby Bids and offers to enter into the Contract referred to and to supply and do all or any part of the Work which is set out or called for in this Bid, at the unit prices, and/or lump sums, hereinafter stated.

*Denotes a "MANDATORY" field

Do not enter \$0.00 dollars unless you are providing the line item at zero dollars to the Owner (unless otherwise specified).

If the line item and/or table is "NON-MANDATORY" and you are not bidding on it, leave the table and/or line item blank. Do not enter a \$0.00 dollar value.

BID PROPOSAL - HARVEY E. OYER, JR. PARK MARINA BOAT RAMP IMPROVEMENT PROJECT

BID PROPOSAL - Price Proposal Online Form

The Bidder declares that he/she has carefully examined the specifications and is thoroughly familiar with its provisions and with the quality, type and grade of service required.

The Bidder proposes to deliver the service in accordance with the specifications for "HARVEY E. OYER, JR. PARK MARINA BOAT RAMP IMPROVEMENT PROJECT"

Note:

The quantities shown may not reflect the actual amount required installed in the field. It is the contractor's responsibility to verify and provide a bid for the quantity of items needed to complete the job. Any discrepancies shall be brought to the attention of the Procurement Services.

DIVISION	DESCRIPTION	QUANTITY	UNIT	COST	TOTAL
01 - General Conditions	Mobilization / Demobilization	1	LUMP SUM	\$56,000.0000	\$ 56,000.00
	Insurance	1	LUMP SUM	\$5,600.0000	\$ 5,600.00
	Contractor's Supervision	1	LUMP SUM	\$36,000.0000	\$ 36,000.00
	Special Inspections	1	LUMP SUM	\$10,000.0000	\$ 10,000.00
	Permitting Fees	1	LUMP SUM	\$20,000.0000	\$ 20,000.00
	General Requirements	1	LUMP SUM	\$2,500.0000	\$ 2,500.00
02 - Existing Conditions and Site Work	Selective Site Demolition	1	LUMP SUM	\$47,000.0000	\$ 47,000.00
	Debris Removal and Dump Fees	1	LUMP SUM	\$5,000.0000	\$ 5,000.00
	Final Cleaning	1	LUMP SUM	\$2,500.0000	\$ 2,500.00
03 - Concrete	Cast in Place Ramps, Landings, Pads, Curbing and Sidewalks	1	LUMP SUM	\$403,740.0000	\$ 403,740.00
	Concrete Cutting & Coring	1	LUMP SUM	\$2,000.0000	\$ 2,000.00
10 - Specialties	(3) - 6" x 70" Floating Ramp Staging Piers	3	EACH	\$69,000.0000	\$ 207,000.00
	Aluminum Pile Guides	1	LUMP SUM	\$6,900.0000	\$ 6,900.00
	Miscellaneous - Cleats, Ladders, Gangways	1	LUMP SUM	\$3,400.0000	\$ 3,400.00
31 - Earthwork	(9) - New Concrete Pilings	9	EACH	\$1,822.0000	\$ 16,398.00
	General Site Excavation and Finished Grading	1	LUMP SUM	\$87,000.0000	\$ 87,000.00
	Site Fill	1	LUMP SUM	\$12,000.0000	\$ 12,000.00
32 - Exterior Improvements	Driveway Paving - Asphalt Overlay Only	1	LUMP SUM	\$8,000.0000	\$ 8,000.00
	Driveway Paving - Base and New Asphalt	1	LUMP SUM	\$17,000.0000	\$ 17,000.00
	Landscaping and Sodding	1	LUMP SUM	\$2,500.0000	\$ 2,500.00
	Miscellaneous, Curb Repair	1	LUMP SUM	\$2,000.0000	\$ 2,000.00
	Material and Compaction Testing Services	1	LUMP SUM	\$5,000.0000	\$ 5,000.00
	Surveying	1	LUMP SUM	\$10,000.0000	\$ 10,000.00

Confirmation of Minority Owned Business

A requested form to be made a part of our files for future use and information. Please fill out and indicate in the appropriate spaces provided which category best describes your company. Return this form to make it an official part of with your Bid responses

Description	Response *	Comments *
Is your company a Minority Owned business?	Yes	SBE
Please select the appropriate response	Other	White
Do you possess a certification qualifying your business as a Minority Owned business?	Yes	Palm Beach County
Issuing organization name	Input response in comments box to the right	Palm Beach County *
Date of Issuance	Input response in comments box to the right	11/4/2018 *

Local Business Status Certification

I am an authorized representative of the business and, on behalf of the Business, request that it be deemed to be a local business for purposes of the City of Boynton Beach Local Preference Program. Answering yes to Question 1 and Question 2 below will qualify the business as a local business. In support of this request, I certify the following to be true and correct:

I understand that misrepresentation of any facts in connection with this request may be cause for removal from the certified local business list. I also agree that the business is required to notify the City in writing should it cease to qualify as a local business.

By checking the box that you are not submitting for "Local Business Status Certification" you declare that you are not a local business in the City of Boynton Beach.

☒ We will not be submitting for Local Business Status Certification

Is the business located within the City limits of Boynton Beach, Florida? *	Does the business have a business tax receipt issued in the current year? *	Is the business registered with the Florida Division of Corporations? *	Number of years in business *	Business license number *
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No		

Contractor Qualifications

Provide three (3) projects at a minimum of \$350,000.00 per project completed annually for each of the past three calendar years (2018, 2019, 2020). The firm must itemize this work using this form.

Contractor Qualifications:

- Contractor must be licensed as a General Contractor for five (5) years in the State of Florida.
- Contractor must be in business for the last five (5) years under the same name.

the Contractor must have an adequate organization, facilities, equipment and personnel to insure prompt and efficient service. The CITY reserves the right, before recommending any award, to inspect the facilities to determine ability to perform. The CITY reserves the right to reject bids where evidence submitted, investigation and/or evaluation, is determined to indicate inability of the Bidder to perform.

Work History	Project 1 - Minimum \$350K *	Project 2 - Minimum \$350K *	Project 3 - Minimum \$350K *
Work History - Calendar Year 2018	Bldg 29 Boca Raton Utilities 1401 Glades road Boca raton, Fl. 33431 842000.00	Bldg 25,33 & 52 1401 Glades Road Boca Raton, fl 33434 855000.00	Drying Bed 1401 Glades Road Boca Raton, Fl. 33431 365000
Work History - Calendar Year 2019	Daggerwing Park PBC County 376000	Turtle Run Dev 6601 Sample Coral Springs 720000.00	Turtle Run Sound Barrier Turtle Run Blvd Coral Springs, fl. 3065 366000.00
Work History - Calendar Year 2020	Fume Hoods Boca Raton Utilities 1401 Glades Road Boca Raton, Fl. 33431 487400.00	Bldg 27 & 48 Boca Raton Utilities 1401 Glades road Boca Raton, Fl. 33431 1515000.00	Boca Raton Airport 903 NW 35th Street Boca Raton, Fl. 33431 356000.00

References

Provide three (3) SIGNIFICANT PROJECTS current or completed in the last 3 years from customers that you have contracted with to provide Hardscape, Landscape and Irrigation Improvements.

The City is interested in learning of other experiences with your firm, as such; please do not list the City of Boynton as a reference.

Contact persons must be informed that they are being used as reference and that the City or their designee will be contacting them for information.

Procurement or designee will email and or call each reference up to three (3) times.

Description	Reference 1 - Current or Completed Project *	Reference 2 - Current or Completed Project *	Reference 3 - Current or Completed Project *
Name of Agency:	City of Boynton Beach 222 NE 9th Ave Boynton Beach, Fl. 33425	City of Coral Springs 9500 West Sample Road Coral Springs, Fl. 33065	City Of Boca Raton 1401 Glades Road Boca Raton, Fl. 33431
Agency Contact:	Gail Mootz	Glen Gordon Public Works Supt.	Rob Hunt PM
Contact Telephone Number:	561-307-2185	954-345-2219	561-338-7364
Email Address:	mootzg@bbfl.us	ggordon@coralsprings.org	rhunt@myboca.us
Name of Project:	Boynton Public Works	28th street	bldg 25,33 & 52
Project Description:	Public Works Canopy Construct concrete and steel structure for city	demolition, sidewalk construction and site restoration	Hurricane hardening concrete and steel
Project Address/Location:	222 NE 9th Ave Boynton Beach, Fl 33425	29th Street Coral Springs, Fl. 33065	Boca Raton Utilities 1401 Glades Road Boca Raton, Fl. 33431
Project Start Date:	9/2019	4/20	6/19
Project Completion Date:	1/2020	6/20	11/19

Subcontractors

The Bidder shall state all Subcontractor(s) and type of Work proposed to be used for this project. Bidders shall not indicate "TBD" (To Be Determined) or "TBA" (To Be Announced) or similar wording and shall not indicate multiple choices of Subcontractor names for any Subcontractor category in their list of Subcontractors.

Subcontractors

The Bidder proposes the following major subcontractors for the major areas of work for the Project. The Bidder is further notified that all subcontractors shall be properly licensed, bondable and shall be required to furnish the City with a Certificate of Insurance in accordance with the contract general conditions. This page may be reproduced for listing additional subcontractors, if required.

Owner reserves the right to reject any subcontractors who has previously failed in the proper performance of an award, or failed to deliver on time contracts in a similar nature, or who is not responsible(financial capability, lack of resources, etc.) to perform under this award. Owner reserves the right to inspect all facilities of any subcontractors in order to make a determination as to the foregoing.

☐ By clicking here I confirm that there are no Subcontractor(s) and the Bidder shall perform the project with their "OWN FORCES"

Name	Address	Scope of work	license No	Contract Amount	Percentage (%) of Contract
Boat Lifts and Dock	989 NW 31st Ave Pompano Beach, Fl. 33069	piling, and installation of floating docks	scc147913115	31800.00	3.5%
Tetra Tech Inc.	1901 South Congress Ave Boynton Beach, Fl. 33426	Coral relocation and monitoring		70000.00	7.5%
3-D Paving	9315 W. Sample Road Coral Springs, Fl. 33065	Paving work	FDOT certified	25000.00	2.7%

Documents

Ensure your submission document(s) conforms to the following:

Documents should NOT have a security password, as City of Boynton Beach may not be able to open the file. It is your sole responsibility to ensure that the uploaded document(s) are not either defective, corrupted or blank and that the documents can be opened and viewed by City of Boynton Beach.

If you need to upload more than one (1) document for a single item, you should combine the documents into one zipped file. If the zipped file contains more than one (1) document, ensure each document is named, in relation to the submission format item responding to. For example, if responding to the Marketing Plan category save the document as "Marketing Plan."

If the attached file(s) cannot be opened or viewed, your Bid Call Document may be rejected.

- [Bidder Qualification Statement](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:28:57
- [Anti-Kickback Affidavit](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:29:33
- [Non-collusion Affidavit of Bidder](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:30:04
- [Confirmation of Minority Owned Business](#) - SBE certificate 10.26.18.pdf - Thursday March 11, 2021 14:11:44
- [Certification Pursuant to Florida Statute § 287.135](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:30:33
- [Submit current Florida Professional License, including evidence of possession of required licenses or business permits](#) - 2022 GC license 6.20.20.pdf - Thursday March 11, 2021 13:31:12
- [Submit proof of Professional Liability Insurance at the levels identified on the Insurance Advisory Form](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:32:30
- [Palm Beach County Local Business Tax Receipt, formerly Occupational License \(This or Proof of an active Certificate of Authority\)](#) - Palm Beach business tax 2021.pdf - Thursday March 11, 2021 13:33:48
- [Mandatory Site Visit Form](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 13:34:44
- [Company's Completed W-9](#) - w-9 3.11.21.pdf - Thursday March 11, 2021 13:43:37
- [Additional Document](#) - Scanned Bid Documents 3.11.21.pdf - Thursday March 11, 2021 14:12:45

Addenda & Declarations

The Bidder hereby acknowledges and agrees:

1. To provide all goods, services and construction, as more specifically set out and in accordance with the Owner's Bid Call Document, including but not limited to the scope of work, specifications, drawings, Addenda (if issued by the Owner), the terms and conditions, etc. stated therein, which are expressly acknowledged and made part of this Contract.
2. This Bid is made without any connections, knowledge, comparison of figures or arrangements with any other company, firm or person making a Bid for the same Work and is in all respects fair and without collusion or fraud.
3. I/WE do hereby Bid and offer to enter into a Contract to do all the Work as specified in the Bid Call Document(s) which shall include all costs but not limited to; freight, duty, currency, etc. in accordance with the prices and terms as submitted by the Bidder herein.
4. If I/WE withdraw this Bid before the formal Contract is executed by the Awarded Bidder for the said Work or One Hundred Twenty (120) Calendar Days, whichever event first occurs, the amount of the Bid Deposit accompanying this Bid (if applicable to this bid) shall be forfeited to the Owner.
5. I/WE acknowledge and agree that any issued Addendum/Addenda forms part of the Bid Call Document.
6. I/WE (including any related or affiliated entities and any principal thereof) have no unresolved litigation with the Owner.

Palm Beach County Inspector General Acknowledgement

The Consultant is aware that the Inspector General of Palm Beach County has the authority to investigate and audit matters relating to the negotiation and performance of this Consultant Agreement, and in furtherance thereof may demand and obtain records and testimony from the Consultant and its sub-consultants and lower tier sub-consultants.

The Consultant understands and agrees that in addition to all other remedies and consequences provided by law, the failure of the Consultant or its subconsultants or lower tier sub-consultants to fully cooperate with the Inspector General when requested may be deemed by the municipality to be a material breach of this contract justifying its termination.

Confirmation of Drug Free Workplace

Preference shall be given to businesses with drug-free workplace programs. Whenever two or more submittals which are equal with respect to price, quality, and service are received by the City of Boynton Beach or by any political subdivision for the procurement of commodities or contractual services, a submittal received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie submittals will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.

Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.

Give each employee engaged in providing the commodities or contractual services that are under submittal a copy of the statement specified in subsection (1).

In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under submittal, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or- plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than 5 days after such conviction.

Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by, any employee who is so convicted.

Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

☒ I/We have the authority to bind the Company and submit this Bid on behalf of the Bidder. - John Zak, President, Anzco Inc.
The bidder shall declare any potential or actual conflict of interest that could arise from Bidding on this Bid. Do you have a conflict of interest?

☒ Yes ☐ No

The Bidder acknowledges and agrees that the addendum/addenda below form part of the Bid Document

Please check the box in the column "I have reviewed this addendum" below to acknowledge each of the addenda.

File Name	I have reviewed the below addendum and attachments (if applicable)	Pages
Addenda No 1 - Harvey E Oyer Jr. Marina Boat Ramp Improv Tue March 9 2021 09:43 AM		2



**BIDDER'S QUALIFICATION STATEMENT
TO BE COMPLETED ONLINE**

The undersigned certifies under oath the truth and correctness of all statements and of all answers to questions made hereinafter:

1. BIDDER'S True, exact, correct and complete Name, Principal Address, Phone, Email Address:

AIRCO INC.

9671 CAROUSEL CIRCLE SOUTH BOCA RATON, FL. 33430

1009 NW 31ST AVE BOYNTON BEACH, FL. 33069

561-699-3602 J2AK@AIRCO INC. COM

2. How many years has your organization been in business under its present business name? 14

3. Under what other former names has your organization operated?

NONE

4. Names and titles of all officers, partners or individuals doing business under trade name:

JOHN P. ZAH

PRESIDENT / TREASURER

CAROL L. ZAH

VP / SEC

5. The business is a: Sole Proprietorship ☐ Partnership ☐ Corporation ☒

6. Name, address, and telephone number of surety company and agent who will provide the required bonds on this contract:

FCCI INSURANCE COMPANY 6300 UNIVERSITY PARKWAY SARASOTA, FL. 34230

JCA SURETY GROUP 123 ZELMA STREET SUITE A ORLANDO, FL. 32803

7. What is the last project of this nature that you have completed?

DAGGELLING PARK

8. Have you ever failed to complete work awarded to you. If so, when, where and why?

NO

THIS PAGE TO BE SUBMITTED ALONG WITH BID FOR
PACKAGE TO BE CONSIDERED COMPLETE AND ACCEPTABLE

9. List the pertinent experience of the key individuals of your organization (continue on insert sheet, if necessary).

JOHN D. ZAH CIVIL ENGINEER

10. Indicate registration, License Numbers or Certificate Numbers for the business or professions, which are the subject of this Bid. Attach Certificate of Competency and or State Registration.

CGC 1519065

11. Will you sublet any part of this WORK? If so, give details.

YES DOCK INSTALL & ASPHALT RESTORATION

12. State the name and address of Attorney, if any, for the business.

DO NOT HAVE ONE

13. State the names and addresses of all businesses and/or individuals who own and interest of more than five percent (5%) of the Bidder's business and indicate the percentage owned of each such business and/or individual:

NONE

14. State the names, addresses and the type of business of all firms that are partially or wholly owned by bidder:

NONE

15. Has the Bidder or any principals of the Firm failed to qualify as a responsible Bidder, refused to enter into a contract after an award has been made, failed to complete a contract during the past five (5) years, or been declared to be in default in any contract in the last five (5) years? If yes, please explain below:

NO

16. What will be your turnaround time for written responses to the City's inquiries?

3 DAYS

17. Is the financial statement submitted with your bid (if applicable) for the identical organization name for Question #1?

YES ☒ NO ☐

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18. If not, explain the relationship and financial responsibility of the organization whose financial statement is provided (e.g., parent-subsidiary).

19. List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Bidder, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description, the disposition of each petition.

NONE

20. List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Bidder or its predecessor organization(s) during the last five (5) years. The list shall include all case names, case arbitration or hearing identification numbers, the name of the project which the dispute arose, and a description of the subject matter of the dispute.

NONE

21. Is the Bidder currently in default on any loan agreement or financing agreement with any bank, financial institution, or other entity? If yes, specify in details the circumstances and prospects for resolution.

NO

22. Bank References (include name, job title, address and telephone number of contact person) – Minimum 1

BANK UNITED 4101 TURTLE CREEK DRIVE
CORAL SPRINGS, FL. 33067 954-341-1091 JULIE MALIKOW

23. Annual Average Services Revenue of the Proposer for the last three years as follows:

		Revenue Index Number
a.	Government Related Work	4
b.	Non-Governmental Related Work	0
	Total Work (a + b):	4

Services Revenue Index Number

1.	Less than \$100,000
2.	\$100,000 to less than \$250,000
3.	\$250,000 to less than \$500,000
4.	\$500,000 to less than \$1 million
5.	\$1 million to less than \$2 million
6.	\$2 million to less than \$5 million
7.	\$5 million to less than \$10 million
8.	\$10 million to less than \$25 million
9.	\$25 million to less than \$50 million
10.	\$50 million or greater

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24. Provide description of policies and methods for project monitoring and budgeting control as well as adherence to project schedule.

FULL TIME SUDT & FOLINA

25. Provide description of quality assurance/quality control management methods.

FLOLQA TESTING & ENGINEERING - SPECIAL INSPECTOR

The BIDDER acknowledges and understands that the information contained in response to this Qualification's Statement shall be relied upon by CITY in awarding the contract and such information is warranted by BIDDER to be true. The discovery of any omission or misstatement that materially affects the BIDDER'S qualifications to perform under the contract shall cause the CITY to reject the Bid, and if after the award, to cancel and terminate the award and/or contract.

The BIDDER also acknowledges that all information listed above may be checked by the CITY and authorizes all entities or persons listed above to answer any and all questions. BIDDER hereby indemnifies the CITY and persons or entities listed above and hold them harmless from any claim arising from such authorization or the exercise thereof, including the dissemination of information requested above.

(Signed) _____

(Title) _____

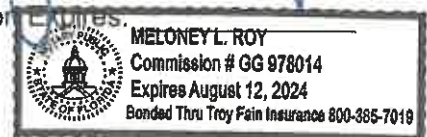
PRESIDENT

Subscribed and sworn to before me

This 10 day of MARCH, 2021

Notary Public (Signature) _____

My Commission Expires _____



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**INVITATION TO BID
FOR
HARVEY E. OYER JR. PARK MARINA BOAT RAMP IMPROVEMENT PROJECT**

BID No.: 002-2511-21/RW

**BID FORM
TO BE COMPLETED AND UPLOADED ONLINE**

The work under this project consists of but not limited to: Services from a qualified Contractor to provide pricing for labor, parts, and materials for the maintenance and repairs to its emergency diesel/propane power generators both portable and stationary and by-pass pumps located throughout the City of Boynton Beach.

Submitted By: ANZCO INC
(BIDDER)

Date: 3/11/2021

To furnish and deliver all materials and to do and perform all WORK in accordance with the Bid Documents, as follows:

1. The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into an Contract with the CITY to perform and furnish all WORK as specified herein for the Contract Price and within the Contract Period indicated in this Bid.
2. This Bid will remain subject to acceptance for ninety (90) days after the day of Bid opening. BIDDER will sign and submit the necessary documents required by the CITY within ten (10) days after the date of CITY's Award Letter.
3. In submitting this Bid, BIDDER represents, as more fully set forth in the Contract, that
 - a. BIDDER has examined the Bid Documents, including addenda.
Receipt of all of which is hereby acknowledged;
 - b. BIDDER has familiarized itself with the nature and extent of the Bid Documents, locality, and all local conditions and laws and regulations that in any manner may affect cost, progress, performance or furnishing of the WORK.
 - c. BIDDER has given the CITY written notice of all conflicts, errors or discrepancies that it has discovered in the Bid Documents and the written resolution thereof by the CITY is acceptable to BIDDER.
4. BIDDER proposes to furnish the WORK in conformity with the drawings and specifications listed below. The Bid Prices quoted have been checked and certified to be correct. Such Bid Prices are fixed and firm and shall be paid to BIDDER for the successful completion of its obligation as specified in the Bid Documents.

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5. Communications concerning this Bid shall be as follows:

Contact Person JOHN D. ZAK
Business Address 9671 CAROUSEL CIRCLE SOUTH
City, State, Zip Code BOCA RATON, FL. 33434
Business Phone Number 754 - 222-6697
Email Address JZAK@AD201X.CO
Cell Phone Number 561-699-3602

6. Other pertinent information is as follows:

License Number
(Please Attach Copy) CGC1518065
Federal Tax ID# 20-8208440
Federal Employment ID # _____

Submitted on this 11 day of MARCH, 2021.

a. (If an individual, partnership, or non-incorporated organization)

Signature of
BIDDER _____

By _____

b. (If a corporation)
(Affix Seal)

Signature of BIDDER _____

By JOHN D. ZAK

Attested by
Secretary _____

Incorporated under the laws of the State of FLORIDA

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**ANTI-KICKBACK AFFIDAVIT
TO BE COMPLETED AND UPLOADED ONLINE**

STATE OF FLORIDA)
) SS
COUNTY OF PALM BEACH)

I, the undersigned hereby duly sworn, depose and say that no portion of the sum herein submitted will be paid to any employees of the City of Boynton Beach as a commission, kickback, reward of gift, directly or indirectly by me or any member of my integrator or by an officer of the corporation.

By: _____

NAME - SIGNATURE

Sworn and subscribed before me

this 11 day of MARCH, 2021

Printed Information:

JOHN D. ZAK

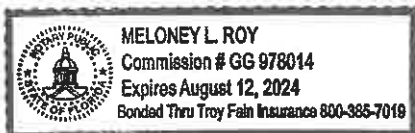
NAME

PRESIDENT

TITLE

Meloney L. Roy
NOTARY PUBLIC, State of Florida
at Large

ANZCO INC.
COMPANY



"OFFICIAL NOTARY SEAL" STAMP

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24. Provide description of policies and methods for project monitoring and budgeting control as well as adherence to project schedule.

FULL TIME Supt & Foreman

25. Provide description of quality assurance/quality control management methods.

Florida Testing & Engineering - Special Inspector

The BIDDER acknowledges and understands that the information contained in response to this Qualification's Statement shall be relied upon by CITY in awarding the contract and such information is warranted by BIDDER to be true. The discovery of any omission or misstatement that materially affects the BIDDER'S qualifications to perform under the contract shall cause the CITY to reject the Bid, and if after the award, to cancel and terminate the award and/or contract.

The BIDDER also acknowledges that all information listed above may be checked by the CITY and authorizes all entities or persons listed above to answer any and all questions. BIDDER hereby indemnifies the CITY and persons or entities listed above and hold them harmless from any claim arising from such authorization or the exercise thereof, including the dissemination of information requested above.

(Signed) _____

(Title) _____

Subscribed and sworn to before me

This 10 day of MARCH, 2021

Notary Public (Signature) _____

My Commission Expires _____



THIS PAGE TO BE SUBMITTED ALONG WITH BID FOR
PACKAGE TO BE CONSIDERED COMPLETE AND ACCEPTABLE



BIDDER'S SITE INSPECTION CONFIRMATION

Check One:

☐ NON-MANDATORY

☒ MANDATORY

BID TITLE: HARVEY E. OYER, JR. PARK MARINA BOAT RAMP IMPROVEMENT PROJECT

BID NO.: 002-2511-21/RW

ANAIOS FERNANDES - OFFICE MGR as an authorized representative of:
(Name and Title of Representative)

AUZCO INC (hereinafter called the bidder) located at
(Name of Company)

9671 CANOVEL CIRCLE SOUTH BOCA RATON, FL. 33434 and that said
Company Address

bidder has visited the site of the work and has carefully examined the plans and specifications for said project and checked them in detail before submitting his bid or proposal.

2/11/2021

DATE OF INSPECTION

Riistera Pinto

CITY OF BOYNTON BEACH

TITLE
PURCHASING

OWNER'S REPRESENTATIVE

SIGNATURES FOR MANDATORY SITE INSPECTION

THIS PAGE TO BE SUBMITTED ALONG WITH BID FOR
PACKAGE TO BE CONSIDERED COMPLETE AND ACCEPTABLE



**CITY OF BOYNTON BEACH
E-VERIFY FORM UNDER SECTION 448.095, FLORIDA STATUTES**

TO BE COMPLETED AND UPLOADED ONLINE

Project Name: **HARVEY E. OYER, JR. PARK MARINA BOAT RAMP IMPROVEMENT PROJECT**
Solicitation No.: **002-2511-21/RW**

1. Definitions:

"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. "Contractor" includes, but is not limited to, a vendor or consultant.

"Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

"E-Verify system" means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.

2. Effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:

- a) All persons employed by a Contractor to perform employment duties within Florida during the term of the contract; and
- b) All persons (including sub-vendors/sub-consultants/sub-contractors) assigned by Contractor to perform work pursuant to the contract with the City of Boynton Beach. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Boynton Beach; and
- c) Should vendor become the successful Contractor awarded for the above-named project, by entering into the contract, the Contractor shall comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes, but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with,

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an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

3. Contract Termination

- a) If the City has a good faith belief that a person or entity with which it is contracting has knowingly violated s. 448.09 (1) Fla. Stat., the contract shall be terminated.
- b) If the City has a good faith belief that a subcontractor knowingly violated s. 448.095 (2), but the Contractor otherwise complied with s. 448.095 (2) Fla. Stat., shall promptly notify the Contractor and order the Contractor to immediately terminate the contract with the subcontractor.
- c) A contract terminated under subparagraph a) or b) is not a breach of contract and may not be considered as such.
- d) Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination.
- e) If the contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

Company Name:	<u>ANZCO INC</u>
Authorized Signature:	<u>[Signature]</u>
Print Name:	<u>JOHN B. ZAK</u>
Title	<u>PRESIDENT</u>
Date:	<u>3/10/21</u>
Phone:	<u>561-699-3602</u>

STATE OF FLORIDA)
COUNTY OF DADE)

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this 10 day of MARCH, 2021, by JOHN B. ZAK on behalf of ANZCO. He/she is personally known to me or has produced _____ as identification.

Meloney L. Roy
NOTARY PUBLIC
MELONEY L. ROY
Commission # GG 978014
(Name of Notary Public) Expire Date 12/2026 Stamped)
Bonded Thru Troy Fain Insurance 800-385-7019

Title or Rank

Serial number, if any

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**NON-COLLUSION AFFIDAVIT OF BIDDER
TO BE COMPLETED AND UPLOADED ONLINE**

State of FLORIDA)

County of PALM BEACH)

_____, being first duly sworn, deposes and says that:

- 1) He is PRESIDENT of ANZCO INC, the bidder that
(Title) (Name of Corporation or Integrator)
has submitted the attached BID:
- 2) He is fully informed respecting the preparation and contents of the attached submittal and of all pertinent circumstances respecting such submittal;
- 3) Said BID is genuine and is not a collusive or sham BID;
- 4) Further, the said bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Bidder, integrator or person to submit a collusive or sham BID in connection with the Contract for which the attached BID has been submitted or to refrain from bidding in connection with such Contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communications or conference with any other bidder, integrator or person to fix the price or prices in the attached BID or of any other bidder, or to fix any overhead, profit or cost element of the BID, or to fix any price, or to fix any advantage against the City of Boynton Beach or any person interested in the proposed Contract; and
- 5) The price or prices quoted in the attached bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the bidder or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

(Signed) [Signature] JOE B. ZAK

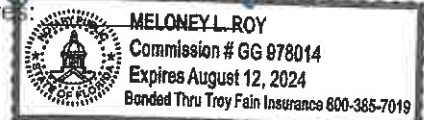
(Title) PRESIDENT

Subscribed and sworn to before me

This 11 day of MARCH, 2021

[Signature]
Notary Public (Signature)

My Commission Expires:



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**CERTIFICATION PURSUANT TO FLORIDA
STATUTE § 287.135**

TO BE COMPLETED AND UPLOADED ONLINE

I, JOHN B. ZAK PRESIDENT, on behalf of ANZCO INC certify
Print Name and Title Company Name

that ANZCO INC. does not:
Company Name

1. Participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel List; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum
Energy Sector List; and
5. Has not engaged in business operations in Syria.

Submitting a false certification shall be deemed a material breach of contract. The City shall provide notice, in writing, to the Consultant of the City's determination concerning the false certification. The Consultant shall have ninety (90) days following receipt of the notice to respond in writing and demonstrate that the determination of false certification was made in error. If the Consultant does not demonstrate that the City's determination of false certification was made in error then the City shall have the right to terminate the contract and seek civil remedies pursuant to Florida Statute § 287.135.

Section 287.135, Florida Statutes, prohibits the City from:

- 1) Contracting with companies for goods or services if at the time of bidding on, submitting a proposal for, or entering into or renewing a contract if the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, F.S. or is engaged in a boycott of Israel; and
- 2) Contracting with companies, for goods or services that are on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector list, created pursuant to s. 215.473, or are engaged in business operations in Syria.

As the person authorized to sign on behalf of the Consultant, I hereby certify that the company identified above in the section entitled "Consultant Name" does not participate in any boycott of Israel, is not listed on the Scrutinized Companies that Boycott Israel List, is not listed on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Syria. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject the company to civil penalties, attorney's fees, and/or costs. I further understand that any contract

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with the City for goods or services may be terminated at the option of the City if the company is found to have submitted a false certification or has been placed on the Scrutinized Companies with Activities in Sudan list or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

ANZCO INC
COMPANY NAME


SIGNATURE

JOHNSON. ZAK
PRINT NAME

PRESIDENT
TITLE

3/10/21
DATE

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Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES



ZAK, JOHN BRUNO

ANZCO INC
1009 NW 31ST AVE
POMPANO BEACH FL 33069

LICENSE NUMBER: CGC1518065

EXPIRATION DATE: AUGUST 31, 2022

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

Palm Beach County
Office of Small Business Assistance

Certifies That

Anzco, Inc.

Vendor #VC0000128796

*is a Small Business Enterprise as prescribed by section 2-80.21 – 2-80.35 of the
Palm Beach County Code for a three year period from
November 4, 2018 to November 3, 2021*

The following Services and/or Products are covered under this certification:

**Construction, Curb & Gutter (Includes Maintenance, Repair & Removal)
Construction, Sidewalk and Driveway (Includes Pedestrian and Handicap Ramps)
Masonry, Concrete and Stucco Maintenance, Finishing and Repair (Includes Inside
Concrete Sawing and Grouting Work)
Wall and Ceiling Repair and Replacement (Including Drywalling)**

Palm Beach County Board of County Commissioners



Melissa McKinlay, Mayor
Mack Bernard, Vice Mayor
Hal Valeche
Paulette Burdick
Dave Kerner
Steven L. Abrams
Mary Lou Berger

County Administrator
Verdenia C. Baker


Allen F. Gray, Manager

10/26/2018



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County
Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

9671 CAROUSEL CIR S
BOCA RATON, FL 33434-3926

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0051 GENERAL CONTRACTOR	ZAK JOHN B	CGC1518065	B20.596294 - 09/24/20	\$27.50	B40133085

This document is valid only when receipted by the Tax Collector's Office.

STATE OF FLORIDA
PALM BEACH COUNTY
2020/2021 LOCAL BUSINESS TAX RECEIPT

LBTR Number: 201013321
EXPIRES: SEPTEMBER 30, 2021



6-9
3033

ANZCO INC
ANZCO INC
9671 CAROUSEL CIR S
BOCA RATON FL 33434-3926



This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and **MUST** be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/23/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
W.F. Roemer Insurance
3775 NW 124 Avenue
Coral Springs FL 33065

CONTACT NAME: Certificate Department

PHONE (A/C, No, Ext): 954-731-5566

FAX (A/C, No): 954-731-8438

E-MAIL: wfr.certificates@acordia.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: American Builders Insurance Co

11240

INSURER B: Evanston Insurance Company

35378

INSURER C: Travelers Casualty Insurance Company of America

19046

INSURER D: James River Insurance Co

12203

INSURER E:

INSURER F:

INSURED
Anzco, Inc.
9671 Carousel Circle South
Boca Raton FL 33434

ANZCO-1

COVERAGES

CERTIFICATE NUMBER: 1975963860

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBROGATION	POLICY NUMBER	POLICY EFF DATE	POLICY EXP DATE	LIMITS
D	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	001130850	2/22/2021	2/22/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY		BA-3P526990-20-42-G	11/18/2020	11/18/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> RETENTION \$ <input type="checkbox"/> CLAIMS-MADE		MPXS3001937	2/22/2021	2/22/2022	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	WCV 0088831 10	7/21/2020	7/21/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The interest of City of Boynton Beach is included as Additional Insured when required by written contract subject to policy terms and conditions.

CERTIFICATE HOLDER

City of Boynton Beach
100 E Ocean Ave
Boynton Beach FL 33425

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Request for Taxpayer Identification Number and Certification

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Anzco Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
☐ Individual/sole proprietor or single-member LLC
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
9671 Carousel Circle South

6 City, state, and ZIP code
Boca Raton, FL 33434

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
				-				

or

Employer identification number								
2	0	-	8	2	0	8	4	0

Part II Certification

Under penalties of perjury, I certify that:

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

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶  Date ▶ **3/11/21**

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- 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, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.