

REVISED SCHEDULE OF VALUES: Bid #17/18-30, OMEGA PARK IMPROVEMENTS

ITEM NUMBER	ITEM DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	Cost
1	Mobilization	1	LS	17,700 ⁰⁰	17,700 ⁰⁰
2	Site Preparation	1	LS	5,590 ⁰⁰	5,590 ⁰⁰
3	Erosion Control	1	LS	1,050 ⁰⁰	1,050 ⁰⁰
4	Demolish Restroom/Concession Building	1	LS	5,560 ⁰⁰	5,560 ⁰⁰
5	Remove Concrete Sidewalk/Pavement	130	SY	28 ⁰⁰	3,640 ⁰⁰
6	Remove Drainage Inlet/Manhole	5	EA	1,050 ⁰⁰	5,250 ⁰⁰
7	Remove Drainage Pipe	925	LF	18 ⁰⁰	16,650 ⁰⁰
8	New Restroom/Concession Building	1	LS	234,872 ⁰⁰	234,872 ⁰⁰
9	Construct Sidewalk (5")	184	SY	60 ⁰⁰	11,040 ⁰⁰
10	Reconstruct Crushcrete Stabilized Parking Area	770	SY	8.50	6,545 ⁰⁰
11	Area & Swale Re-grading	2212	SY	7 ⁰⁰	15,484 ⁰⁰
12	Ditch Re-grading	1190	SY	8.10	9,639 ⁰⁰
13	12" PVC (DR18)	132	LF	45 ⁰⁰	5,940 ⁰⁰
14	15" RCP	791	LF	43 ⁰⁰	34,013 ⁰⁰
15	18" RCP	348	LF	50 ⁰⁰	17,400 ⁰⁰
16	24" RCP	12	LF	136 ⁰⁰	1,632 ⁰⁰
17	Inlet Type "C"	5	EA	2,875 ⁰⁰	14,375 ⁰⁰
18	Inlet Type "E"	3	EA	3,420 ⁰⁰	10,260 ⁰⁰
19	MES (12")	6	EA	1,940 ⁰⁰	11,640 ⁰⁰
20	U-type Endwall (12")	2	EA	1,640 ⁰⁰	3,280 ⁰⁰
21	U-type Endwall (15")	3	EA	1,838 ⁰⁰	5,514 ⁰⁰
22	U-type Endwall (24")	1	EA	2,450 ⁰⁰	2,450 ⁰⁰
23	Plug Existing Drainage Structure	1	EA	145 ⁰⁰	145 ⁰⁰
24	Bahia Sod	3587	SY	5 ⁰⁰	17,935 ⁰⁰
25	Tifway Sod/Sprig	1106	SY	6 ⁰⁰	6,636 ⁰⁰
26	Reconnect Building Water Service (2" PVC)	1	LS	1,340 ⁰⁰	1,340 ⁰⁰
27	Bldg. San. Sewer Service (4" PVC w/ cleanouts)	1	LS	3,900 ⁰⁰	3,900 ⁰⁰
Total Base Bid Items =				\$ 469,480.00	

Total Base Bid written in words: FOUR HUNDRED SIXTY NINE THOUSAND FOUR HUNDRED EIGHTY EIGHT DOLLARS

Bids require a (5%) bid bond based on total above and may not be withdrawn after the scheduled opening time for a period of thirty (30) days.

COMPANY NAME: GARY S. BAILEY, INC.

Bid No. 17/18-30, OMEGA PARK IMPROVEMENTS

CORPORATE DETAILS

Failure to complete all fields may result in your bid being rejected as non-responsive.

COMPANY NAME: GARY S. BAILEY, INC.

ADDRESS: 5201 C.R. 218

MIDDLEBURG, FL 32068

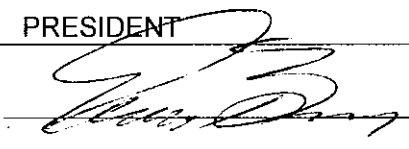
TELEPHONE: (904) 291-2291

FAX #: (904) 291-2464

E-MAIL: GSB162LEE@BELLSOUTH.NET

Name of Person submitting Bid: GARY BAILEY

Title: PRESIDENT

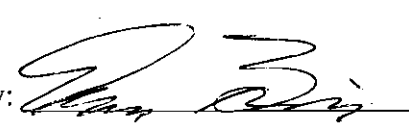
Signature: 

Date: 6-25-18

Area Representative Contact Information: GARY BAILEY (904) 291-2291

ADDENDA ACKNOWLEDGMENT:

Bidder acknowledges receipt of the following addendum:

Addendum No. 1 Date: 6-20-18 Acknowledged by: 

Addendum No. Date: Acknowledged by:

Addendum No. Date: Acknowledged by:

THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

Bid Bond

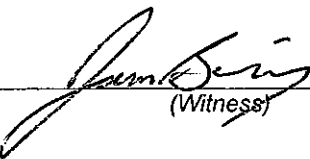
KNOW ALL MEN BY THESE PRESENTS, that Gary S. Bailey, Inc.
as Principal, hereinafter called the Principal, and FCCI Insurance Company
a corporation duly organized under the laws of the State of Florida
as Surety, hereinafter called the Surety, are held and bound unto Board of County Commissioners Clay
County
as Obligee, hereinafter called the Obligee, in the sum of

Five Percent of Bid Amount Dollars(5%)
for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind
ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by
these presents.

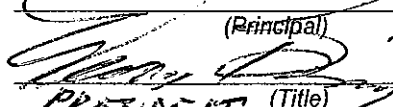
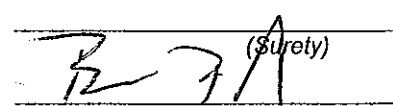
WHEREAS, the Principal has submitted a bid for Omega Park Improvements

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a
Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be
specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance
of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or
in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal
shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in
said bid and such larger amount for which the Obligee may in good faith contract with another party to
perform the Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full
force and effect.

Signed and Sealed this 25th day of June, 2018.


(Witness)


(Witness)

Gary S. Bailey, Inc.
(Principal) (Seal)

PRESIDENT (Title)
FCCI Insurance Company
(Surety) (Seal)

(Title)
Benjamin K. Powell, Attorney-In-Fact



More than a policy. A promise.

GENERAL POWER OF ATTORNEY

Know all men by these presents: That the FCCI Insurance Company, a Corporation organized and existing under the laws of the State of Florida (the "Corporation") does make, constitute and appoint:

Robert T Theus; Ben Powell; Susan W Jordan; Fitzhugh Powell Jr

Each, its true and lawful Attorney-In-Fact, to make, execute, seal and deliver, for and on its behalf as surety, and as its act and deed in all bonds and undertakings provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed the sum of (not to exceed \$7,500,000): **\$7,500,000.00**

This Power of Attorney is made and executed by authority of a Resolution adopted by the Board of Directors. That resolution also authorized any further action by the officers of the Company necessary to effect such transaction.

The signatures below and the seal of the Corporation may be affixed by facsimile, and any such facsimile signatures or facsimile seal shall be binding upon the Corporation when so affixed and in the future with regard to any bond, undertaking or contract of surety to which it is attached.

In witness whereof, the FCCI Insurance Company has caused these presents to be signed by its duly authorized officers and its corporate Seal to be hereunto affixed, this 25TH day of September, 2016.

Attest:

Craig Johnson
Craig Johnson, President
FCCI Insurance Company

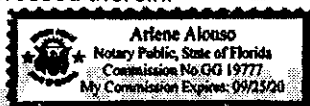


Thomas A. Koval
Thomas A. Koval Esq., EVP, Chief Legal Officer,
Government Affairs and Corporate Secretary
FCCI Insurance Company

State of Florida
County of Sarasota

Before me this day personally appeared Craig Johnson, who is personally known to me and who executed the foregoing document for the purposes expressed therein.

My commission expires: 9/25/2020



Arlene Alonso
Notary Public

State of Florida
County of Sarasota

Before me this day personally appeared Thomas A. Koval, Esq., who is personally known to me and who executed the foregoing document for the purposes expressed therein.

My commission expires: 9/25/2020



Arlene Alonso
Notary Public

CERTIFICATE

I, the undersigned Secretary of FCCI Insurance Company, a Florida Corporation, DO HEREBY CERTIFY that the foregoing Power of Attorney remains in full force and has not been revoked; and furthermore that the February 24, 2011 Resolution of the Board of Directors, referenced in said Power of Attorney, is now in force.

Dated this 25TH day of September, 2016

Thomas A. Koval
Thomas A. Koval, Esq., EVP, Chief Legal Officer,
Government Affairs and Corporate Secretary



**Certification Regarding Debarment, Suspension,
Ineligibility and Voluntary Exclusion Form**

Bid No. 17/18-30, OMEGA PARK IMPROVEMENTS

- (1) The prospective Vendor, GARY S. BAILEY, INC., certifies, by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency.
- (2) Where the Vendor is unable to certify to the above statement, the prospective Vendor shall attach an explanation to this form.

Vendor:

GARY S. BAILEY, INC.

By:


Signature

GARY BAILEY- PRESIDENT
Name and Title

5201 C.R. 218
Street Address

MIDDLEBURG, FL 32068
City, State, Zip

6-25-18
Date

Scrutinized Companies Certification
[Clay County Bid No. 17/18-30, OMEGA PARK IMPROVEMENTS]

Name of Company:¹ GARY S. BAILEY, INC.

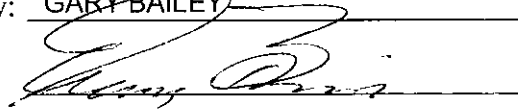
In compliance with subsection (5) of Section 287.135(5), Florida Statutes (the Statute), the undersigned hereby certifies that the company named above is not participating in a boycott of Israel as defined in subsection (1) of the Statute; is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List as referred to in subsection (2) of the Statute; and does not have business operations in Cuba or Syria as defined in subsection (1) of the Statute.

Insert Name of Company:

GARY S. BAILEY, INC.

(Seal)

By: GARY BAILEY



Its PRESIDENT

¹ "Company" means a sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, limited liability company, or other entity or business association, including all wholly owned subsidiaries, majority-owned subsidiaries, parent companies, or affiliates of such entities or business associations that exists for the purpose of making profit.

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Print or type.
See Specific Instructions on page 3.

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

GARY S. BAILEY, INC.

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

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its 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.) See instructions.

5201 C.R. 218

Requester's name and address (optional)

6 City, state, and ZIP code

MIDDLEBURGH, FLA. 32068

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

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

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

59-2856338

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 for Part II, later.

Sign
Here

Signature of
U.S. person

[Signature]

Date June 25, 2018

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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, later.

Southern-Owners Ins. Co.

Issued 10-18-2017

AGENCY INSURAMERICA OF FLORIDA INC
12-0326-00 MKT TERR 123Company POLICY NUMBER 022322-78627462-17
Bill 78-23-FL-0212

INSURED GARY S BAILEY INC

Term 12-20-2017 to 12-20-2018

55040 (11-87)

COMMERCIAL GENERAL LIABILITY COVERAGE

COVERAGE	LIMITS OF INSURANCE
General Aggregate (Other Than Products-Completed Operations)	\$2,000,000
Products-Completed Operations Aggregate	\$2,000,000
Personal Injury And Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000
COMMERCIAL GENERAL LIABILITY PLUS ENDORSEMENT	
Damage to Premises Rented to You (Fire, Lightning, Explosion, Smoke or Water Damage)	\$300,000 Any One Premises
Medical Payments	\$10,000 Any One Person
Hired Auto & Non-Owned Auto	\$1,000,000 Each Occurrence
Expanded Coverage Details See Form:	
Extended Watercraft	
Personal Injury Extension	
Broadened Supplementary Payments	
Broadened Knowledge Of Occurrence	
Additional Products-Completed Operations Aggregate	
Blanket Additional Insured - Lessor of Leased Equipment	
Blanket Additional Insured - Managers or Lessors of Premises	
Newly Formed or Acquired Organizations Extension	
Blanket Waiver of Subrogation	

Twice the "General Aggregate Limit", shown above, is provided at no additional charge for each 12 month period in accordance with form 55300.

AUDIT TYPE: Annual Audit

Forms that apply to this coverage:

59350 (01-15)	IL0017 (11-85)	55146 (06-04)	55188 (09-04)	55238 (06-04)
55300 (07-05)	55202 (12-04)	55371 (01-07)	CG2149 (09-99)	55296 (09-09)
55091 (10-08)	55531 (06-11)	CG0220 (03-12)	55513 (11-11)	IL0021 (07-02)
55592 (02-14)	55637 (09-14)	55719 (11-15)	55718 (11-15)	

GARY S. BAILEY, INC.
GENERAL CONTRACTORS
5201 COUNTY ROAD 218
MIDDLEBURG, FL 32068
(904) 291-2291 CBC018022

RECEIVED
PURCHASING DIVISION

2018 JUN 25 PM 3:39

CLAY COUNTY BOARD OF
COMMISSIONERS

Clay County Purchasing Division
477 Houston Street
PO Box 1366
Green Cove Springs, FL 32043

Receipt for Bid #: Bid 17/18-30

Company Name: GARY S. BAILEY, INC.

17/18-30 Omega Park Improvements
6-25-18 4:00 pm