

**March 25, 2019**  
**BOARD OF COUNTY COMMISSIONERS**  
**ORANGE COUNTY, FLORIDA**  
**INVITATION FOR BID (IFB) Y19-1047-AH; ADDENDUM NO. 1**

**PEST CONTROL SERVICES FOR THE**  
**ORANGE COUNTY CONVENTION CENTER**

This Addendum is hereby incorporated into the bid documents of the project referenced above. The following items are clarifications, corrections, additions, deletions, and/or revisions to and shall take precedence over the original documents. Additions are indicated by **underlining** and deletions via ~~strikethrough~~.

**CLARIFICATIONS**

- A. The Bid Opening Date remains Tuesday, April 16, 2019 at 2:00PM.**
- B. Bid Package Requirements, Pages 43-44, is deleted in its entirety and replaced by the attached pages 43A-44A.**
- C. The References form, Pages 49-50, is deleted in its entirety and replaced by the attached pages 49A-50A.**

**QUESTIONS AND ANSWERS**

**A. Questions and Answers**

- 1. Question:** Is prior pricing available for this contract?

**Answer:** The current contract can be viewed by accessing the following link:

<http://apps.ocfl.net/OrangeBids/Termcontracts/listtermcontract.asp?ID=127181&CT=application/pdf&FN=Y14-143.pdf>

**ACKNOWLEDGEMENT OF ADDENDA**

- A.** The bidder shall acknowledge receipt of this addendum by completing that applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned no later than the date and time for receipt of the bid.
- B.** All other terms and conditions of the IFB remain the same.
- C.** Receipt acknowledge by:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Firm

## **BID PACKAGE REQUIREMENTS:**

This bid will be awarded to a responsible, responsive bidder, qualified by experience to provide the work specified. Failure to submit the below requested information may be cause for rejection of your bid.

The determination on whether a bidder is responsible or not shall be at the sole discretion of the County. Although the County may request the submission of a minimum number of contracts similar to the requirements of this solicitation with certain minimum dimensions, quantities, dollar values, etc., the County's determination of a bidder's responsibility shall not be solely based on the number of similar procurements the bidder provides but the entirety of the bidder's qualifications.

The Bidder shall submit the following information with the bid:

- [ ] 1. Bidder shall list and provide a brief description of work substantially similar in scope and magnitude satisfactorily completed within the past five (5) years with location, dates of contract, names, addresses, email addresses and telephone numbers of owners by completing the attached reference sheets.

Two (2) references shall be for pest control for a facility with at least 200,000 square feet where food is prepared and served, and two (2) references with at least 600,000 square feet in a multi-purpose facility. Some acceptable facilities may include major resorts, major hospitals, colleges, shopping malls, airports and major theme parks. **At least two (2) of the references must be term contracts in which the bidder has performed services for more than (1) one year of term. Your reference sheet must identify the square footage that meets or exceeds the requirement listed above.**

- [ ] 2. Bidder shall provide a list of personnel, by name and title, contemplated to perform the work.
- a. Include a current copy of the resume and certification for the contractor's Entomologist.
  - b. Personnel performing work shall be appropriately trained and certified in pest management in any and all categories or subcategories as identified by the State of Florida to perform the work specified in this document. Technicians shall have a minimum of three (3) years of field experience in Pest Control Services. Copies of current certificates and licenses shall be provided for all employees assigned to service this contract.

- [ ] 3. Bidder shall submit proof, in the form of a business tax receipt, a current Occupational License for Pest Control Services from a County or Municipality in the State of Florida, or any other incorporation document that demonstrates that the company has been in business providing pest control services for at least the last five (5) years.

- [ ] 4. Bid Response Form

- 5. Authorized Signatories/Negotiators
- 6. Drug-Free Workplace
- 7. Schedule of Sub-contracting
- 8. Conflict/Non-Conflict of Interest Form
- 9. E-Verification Certification
- 10. Current W-9
- 11. Relationship Disclosure Form (Notarized)
- 12. Orange County Specific Project Expenditure Report (Notarized)
- 13. Agent Authorization Form (if Applicable)
- 14. Leased Employee Affidavit (if Applicable)
- 15. Information for determining Joint Venture Eligibility
- 16. Contract Y19-1047, Counterpart (1), signed without exception to terms and conditions. Counteroffers shall not be allowed.

**Failure to submit the above requested information may be cause for rejection of your bid.**

## REFERENCES

List four (4) clients during the past five (5) years for which you provided a comparable amount of goods or services substantially similar to those specified in the solicitation in the spaces provided below. Provide the Company name, contact person, address, email address, telephone number, and date services were performed, as described. Two (2) references shall be for pest control for a facility with at least 200,000 square feet where food is prepared and served, and two (2) references with at least 600,000 square feet in a multi-purpose facility.

1. Company Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Description of goods or services provided: \_\_\_\_\_  
\_\_\_\_\_

Contract Amount: \_\_\_\_\_

Square Footage Serviced: \_\_\_\_\_

Start and End Date of Contract: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

2. Company Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Description of goods or services provided: \_\_\_\_\_  
\_\_\_\_\_

Contract Amount: \_\_\_\_\_

Square Footage Serviced: \_\_\_\_\_

Start and End Date of Contract: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\_\_\_\_\_

Email Address: \_\_\_\_\_

3. Company Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Description of goods or services provided: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Square Footage Serviced: \_\_\_\_\_

Start and End Date of Contract: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

4. Company Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Description of goods or services provided: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Square Footage Serviced: \_\_\_\_\_

Start and End Date of Contract: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_