



Public Works Department

**Facilities Management Division**

115 S. Andrews Avenue, Room 501 • Fort Lauderdale, Florida 33301 • 954-357-5500 • FAX 954-357-6136

## USER CONCURRENCE

**TO:** Amanda Simmens, Purchasing Division  
**FROM:** Scott Campbell, Director, Facilities Management Division  
**SUBJECT:** Solicitation No. T1144107B1, Job Order Contract (Non-Sheltered Market)

**CONCURRENCE:**

- ☒ The Facilities Management Division has reviewed the response(s) submitted for specification compliance and vendor responsibility. I have reviewed all documents including the Vendor Questionnaire and/or the Instructions to Bidders Supplement, and after careful evaluation, I concur with the recommendation for award to: LEE Construction Group, Inc. in the estimated annual amount of \$3,000,000 and the maximum three-year amount of \$9,000,000.
- ☒ I have reviewed the Vendor's financial background/D&B Report and am satisfied with the Vendor's rating and payment performance.
  - ☐ Not applicable:
- ☒ I have reviewed the response to the Vendor Questionnaire in regards to litigation history and there is no issue of concern.
  - ☐ A particular issue of concern was identified justifying additional information from the County Attorney's Office as attached.
- ☐ I have reviewed the Vendor's past Performance Evaluations in Contracts Central and:
  - ☐ The Vendor received an overall rating above 2.59 on all evaluations.
  - ☐ The Vendor received a rating 2.59 or less on one or more evaluations. Reasons for concurrence in light of this performance are attached.
  - ☐ The Vendor received a score of "2" or less on one or more individual items on past evaluations. Summary of discussion(s) with past Project Manager(s) is/are attached.
  - ☐ No evaluations within the past three (3) years contained any items rated a score of "2" or less.
  - ☐ Past evaluations are not relevant to the scope of this contract. Reference Verification Forms are attached.
  - ☐ The award amount exceeds the mandatory bid amount. Reference Verification Forms attached.

**OR**

- ☒ No past Performance Evaluations exist in Contracts Central; Reference Verification Forms attached.

Broward County Board of County Commissioners

Sue Gunzburger • Dale V.C. Holness • Kristin Jacobs • Martin David Kiar • Chip LaMarca • Stacy Ritter • Tim Ryan • Barbara Sharief • Lois Wexler  
[www.broward.org](http://www.broward.org)

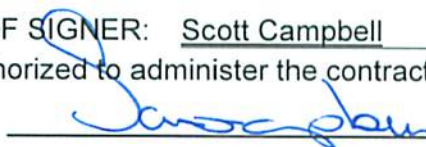
**NON-CONCURRENCE:**

☐ I do not concur. Reason for non-concurrence: [REDACTED]

TYPED NAME OF SIGNER: Scott Campbell  
(Individual authorized to administer the contract.)

TITLE: Director

SIGNATURE: \_\_\_\_\_



DATE

3/6/19

## Reference Verification Form

|  |   |   |
|--|---|---|
| Recommended Vendor Name:                                       | LEE Construction Group, Inc.  |   |
| Broward County<br>Project Title:                               | Job Order Contract ( Non-Sheltered Market)  |   |
| Broward County<br>Solicitation Number:                         | T1144107B1  |   |
| Reference Organization Project<br>Title:                       | Baptist Health Town and Country Security Control Center   |   |
| Name Of Firm/Reference<br>Organization Contact<br>Information: | Contact Name:   | Eric Jenssen<br>ericj@baptisthealth.net |
|  | Contact Company:  | Baptist Health South Florida            |
|  | Contact Title:  | Project Manager                         |
|  | Contact Telephone:  | 305.968.1076                            |
| Comments:  | <p><b>Please provide the total dollar value for this project.</b><br/>\$1,600,000</p> <p><b>Was project completed on a timely basis?</b> This project was completed two (2) weeks ahead of schedule.</p> <p><b>Was the project completed within the expected budget? (if applicable)</b> This project was completed \$44,000 under budget.</p> <p><b>Were you satisfied with the work performed by LEE Construction Group, Inc.?</b> Very satisfied; Lee Construction was very accommodating and professional during the entire project.</p> <p><b>Would your company use LEE Construction Group, Inc. again?</b> We are using them again. They were awarded two (2) other projects based on their performance.</p> |   |
| Date Contract Services Provided:                               | 5/2013 through 9/2013   |   |
| References Checked By:   | Name:   | Claudja Henry                           |
|  | Title:  | Contract/Grant Administrator            |
|  | Division/Department:  | Facilities Management Division          |
| Date Of Verification:  | February 20, 2014 via email   |   |

## Reference Verification Form

|  |   |  |
|--|---|--|
| Recommended Vendor Name:                                       | LEE Construction Group, Inc.  |  |
| Broward County<br>Project Title:                               | Job Order Contract ( Non-Sheltered Market)  |  |
| Broward County<br>Solicitation Number:                         | T1144107B1  |  |
| Reference Organization Project<br>Title:                       | IDIQ Task Order – Jackson Health Systems  |  |
| Name Of Firm/Reference<br>Organization Contact<br>Information: | Contact Name:   | Kevin Guhl<br><a href="mailto:Kevin.guhl@jhs-miami.org">Kevin.guhl@jhs-miami.org</a> |
|  | Contact Company:  | Jackson Memorial Hospital  |
|  | Contact Title:  | Senior Procurement Specialist  |
|  | Contact Telephone:  | 305.585.7829   |
| Comments:  | <p><b>Please provide the total dollar value for this project.</b><br/>\$1,458,000</p> <p><b>Was project completed on a timely basis?</b> On-going.</p> <p><b>Was the project completed within the expected budget? (if applicable)</b> Yes, satisfactory evaluations.</p> <p><b>Were you satisfied with the work performed by LEE Construction Group, Inc.?</b> Yes.</p> <p><b>Would your company use LEE Construction Group, Inc. again?</b> Yes, they are performing on-going job orders and continue to be engaged for work.</p> |  |
| Date Contract Services Provided:                               | 5/2009 through current  |  |
| References Checked By:   | Name:   | Claudja Henry  |
|  | Title:  | Contract/Grant Administrator   |
|  | Division/Department:  | Facilities Management Division   |
| Date Of Verification:  | February 20, 2014 via email   |  |

## Reference Verification Form

|  |  |   |
|--|--|---|
| Recommended Vendor Name:                                 | LEE Construction Group, Inc.   |   |
| Broward County<br>Project Title:                         | Job Order Contract ( Non-Sheltered Market)   |   |
| Broward County<br>Solicitation Number:                   | T1144107B1   |   |
| Reference Organization Project Title:                    | EMD Generators Ventilation Improvements at Alexander Orr Water Treatment Plant and Forthcoming Transfer Pump Station   |   |
| Name Of Firm/Reference Organization Contact Information: | Contact Name:  | Joaquin Roa<br><a href="mailto:jroa@miamidade.gov">jroa@miamidade.gov</a> |
|  | Contact Company:   | Miami-Dade Water & Sewer Department Construction Division                 |
|  | Contact Title:   | Construction Project Supervisor   |
|  | Contact Telephone:   | 786.552.4063  |
| Comments:  | <p><b>Please provide the total dollar value for this project.</b><br/>\$247,470</p> <p><b>Was project completed on a timely basis?</b> On time.</p> <p><b>Was the project completed within the expected budget? (if applicable)</b> Project was completed on within the budget.</p> <p><b>Were you satisfied with the work performed by LEE Construction Group, Inc.?</b> WASD was absolutely satisfied with the work performed.</p> <p><b>Would your company use LEE Construction Group, Inc. again?</b> We already have.</p> |   |
| Date Contract Services Provided:                         | 1/2012 through 5/2012  |   |
| References Checked By:                                   | Name:  | Claudja Henry   |
|  | Title:   | Contract/Grant Administrator  |
|  | Division/Department:   | Facilities Management Division  |
| Date Of Verification:                                    | March 5, 2014 via email  |   |