

Public Works Department
SOLID WASTE AND RECYCLING SERVICES
1 N. University Drive, Suite 400 • Plantation, Florida 33324 • 954-765-4999 • FAX 954-577-2391

USER CONCURRENCE

TO: Amanda Simmens, Purchasing Division
FROM: Elliot Auerhahn, Director, Solid Waste and Recycling Services
SUBJECT: Solicitation No. T1247309B1, Temporary Debris Management Site Services

CONCURRENCE:

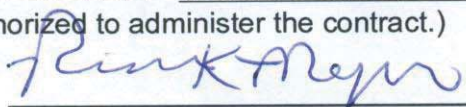
- Solid Waste and Recycling Services has reviewed the response(s) submitted for specification compliance and vendor responsibility. I have reviewed all documents including the Vendor Questionnaire and after careful evaluation, I concur with the recommendation for award to: Bergeron Emergency Services, Inc.
- 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.

NON-CONCURRENCE:

- I do not concur. Reason for non-concurrence:

TYPED NAME OF SIGNER: Richard K. Meyers TITLE: Solid Waste and Recycling Services, Program Manager
 (Individual authorized to administer the contract.)
 SIGNATURE:  DATE 10/20/14

Reference Verification Form

Recommended Vendor Name:	Bergeron Emergency Services, Inc.	
Broward County Project Title:	Temporary Debris Management Site Services	
Broward County Solicitation Number:	T1247309B1	
Reference Organization Project Title:	Vegetative Waste Disposal	
Name Of Firm/Reference Organization Contact Information:	Contact Name:	Elliot Auerhahn
	Contact Company:	Broward County, Solid Waste and Recycling Services
	Contact Title:	Director
	Contact Telephone:	954-577-2332
Comments:	See attached questionnaire for responses from this reference.	
Date Contract Services Provided:	4/2010 through 4/2011	
References Checked By:	Name:	Jennifer Domenech
	Title:	Contracts/Grants Administrator
	Division/Department:	Solid Waste and Recycling Services
Date Of Verification:	October 1, 2014	

Broward County's Reference Verification Questions

Contractor: Bergeron Emergency Services, Inc.

Please type your responses in red ink.

1. What was the title of your organizations project/contract with the referenced contractor (if titles are not specifically assigned to your company's contracts, please provide a brief description of work)? **Vegetative Waste Disposal**
2. Did the contractor serve as the Prime Contractor or Subcontractor on this project? **Prime**
3. What was the scope of work? **Processing, removal and disposition of yard waste piles located at the Broward Interim Contingency (BIC) Landfill.**
4. What key activities/functions did the contractor perform on this project? **Processed, removed and disposed of yard waste.**
5. Did this contractor operate at least two debris management sites simultaneously, each of which processed at least 100,000 cubic yards of disaster debris? **no**
6. Was this contractor a Prime Contractor for debris clearing and removal activities exceeding 100,000 cubic yards of disaster debris? **Debris clearing was not an element of this contract. Contractor processed and removed approximately 235,000 cubic yards of debris, but not specifically disaster debris.**
7. What was the approximate total cost of the services provided?
Approximately \$888,000
8. Were there any claims filed against the project? [YES/NO] **Not aware of any.**
9. What was the date the services were provided? **[Enter Begin Date month/year] 4/2010**
through **[Enter Completion Date month/year] 4/2011** **OR**
Since **[Enter Begin Date month/year]** _____ to current.
10. If there were any problems during the implementation, did the contractor resolve the issues in a satisfactory manner (Scale of 1-5) (5 being the highest, please give a brief description of your rating) **Contractor received an evaluation score of 4.1 out of 5**
11. According to the contract requirements, scope, terms, and conditions, did the contractor meet your expectations? **yes**
12. Overall, would you enter into a contract with this contractor again? **yes**
13. Person filling out form:
 - a. What is your title? **Director, Solid Waste and Recycling Services**
 - b. What is your name? **Elliot Auerhahn**
 - c. What is your contact number? **954/577-2332**

Reference Verification Form

Recommended Vendor Name:	Bergeron Emergency Services, Inc.	
Broward County Project Title:	Temporary Debris Management Site Services	
Broward County Solicitation Number:	T1247309B1	
Reference Organization Project Title:	<ol style="list-style-type: none"> 1. US ARMY CORPS OF ENGINEERS, NEW YORK, Emergency Stump Removal/ W9120S-13-C-0018 Superstorm Sandy 2. Nassau County Emergency Debris Management Contract Superstorm Sandy 	
Name Of Firm/Reference Organization Contact Information:	Contact Name:	Kristian Agoglia
	Contact Company:	Looks Great Services, Inc.
	Contact Title:	President
	Contact Telephone:	516-369-8445
Comments:	See attached questionnaire for responses from this reference.	
Date Contract Services Provided:	11/2012 through 5/2013	
References Checked By:	Name:	Jennifer Domenech
	Title:	Contracts/Grants Administrator
	Division/Department:	Solid Waste and Recycling Services
Date Of Verification:	September 16, 2014	

Looks Great Services, Inc.'s Reference Verification Questions

Contractor: Bergeron Emergency Services, Inc.

Please type your responses in red ink.

1. What was the title of your organizations project/contract with the referenced contractor (if titles are not specifically assigned to your company's contracts, please provide a brief description of work)?

Answer:

- US ARMY CORPS OF ENGINEERS, NEW YORK, Emergency Stump Removal/
W9120S-13-C-0018 Superstorm Sandy
- Nassau County Emergency Debris Management Contract Superstorm Sandy

2. Did the contractor serve as the Prime Contractor or Subcontractor on this project?

Answer: Prime Subcontractor

3. What was the scope of work?

Answer:

- Site management
- Safety systems and management
- Regulatory Compliance with USDA, USDOT, USEPA, NYSDEC, NYCDOT,
- Stump Removal and back fill
- Transport and disposal of material.
- Maintenance and protection of traffic.
- Administer QC/QA program

4. What key activities/functions did the contractor perform on this project?

Answer: Contractor was responsible for the completion of 100% of said project. Responsibilities included mobilization of all assets and personnel, daily management of all operations including direct interaction with the Core of Engineers, management of QCQA computerized programs.

5. Did this contractor operate at least two debris management sites simultaneously, each of which processed at least 100,000 cubic yards of disaster debris?

Answer: Yes

6. Was this contractor a Prime Contractor for debris clearing and removal activities exceeding 100,000 cubic yards of disaster debris?

Answer: Yes

7. What was the approximate total cost of the services provided?

Answer: \$3,000,000.00

8. Were there any claims filed against the project? [YES/NO]

Answer: Claims were filed but none as a result of Bergeron's workmanship or performance. Any claims filed have been resolved or dismissed to the satisfaction of the client

9. What was the date the services were provided? 11/15/2012 through 5/29/2013

10. If there were any problems during the implementation, did the contractor resolve the issues in a satisfactory manner (Scale of 1-5) (5 being the highest, please give a brief description of your rating)

Answer: Yes. Scale of 5. Bergeron is one of the most professionally managed organizations that we have worked with in our 25 of business. They have consistency demonstrated their ability to manage complex and diverse operations. They have consistently excelled when confronted with obstacles to overcome, while maintaining peak performance and production.

11. According to the contract requirements, scope, terms, and conditions, did the contractor meet your expectations?

Answer: Yes- exceeded.

12. Overall, would you enter into a contract with this contractor again?

Answer: Yes, we look forward to the opportunity to do so

13. Person filling out form:

- a. What is your title? President
- b. What is your name? Kristian Agoglia
- c. What is your contact number? Cell- 516-369-8445

Reference Verification Form

Recommended Vendor Name:	Bergeron Emergency Services, Inc.	
Broward County Project Title:	Temporary Debris Management Site Services	
Broward County Solicitation Number:	T1247309B1	
Reference Organization Project Title:	Accepting Vegetative Debris at Bergeron Park of Commerce	
Name Of Firm/Reference Organization Contact Information:	Contact Name:	Edward Consaul
	Contact Company:	City of Plantation
	Contact Title:	Public Works Director
	Contact Telephone:	954-452-2537
Comments:	See attached questionnaire for responses from this reference.	
Date Contract Services Provided:	10/2005 through 5/2006	
References Checked By:	Name:	Jennifer Domenech
	Title:	Contracts/Grants Administrator
	Division/Department:	Solid Waste and Recycling Services
Date Of Verification:	October 8, 2014	

**City of Plantations's Responses to Reference
Verification Questions**

**Contractor: Bergeron Emergency Services, Inc. Please
type your responses in red ink.**

1. What was the title of your organizations project/contract with the referenced contractor (if titles are not specifically assigned to your company's contracts, please provide a brief description of work)? **Accepting Vegetative Debris at Bergeron Park of Commerce**
2. Did the contractor serve as the Prime Contractor or Subcontractor on this project?
Prime
3. What was the scope of work? **Provide final resting place for debris generated by declared emergencies.**
4. What key activities/functions did the contractor perform on this project? **Documentation for FEMA with regards to the disposal of debris**
5. Did this contractor operate at least two debris management sites simultaneously, each of which processed at least 100,000 cubic yards of disaster debris? **All of our debris went to Site 1 at Commerce Park, which was well in excess of 100,000 Yards**
6. Was this contractor a Prime Contractor for debris clearing and removal activities exceeding 100,000 cubic yards of disaster debris? **No just the receiver of the debris**
7. What was the approximate total cost of the services provided? **\$3,250,000**
8. Were there any claims filed against the project? [YES/NO] **Not to my knowledge**
9. What was the date the services were provided? [Enter Begin Date month/year] **10/05**
through [Enter Completion Date month/year] **5/06** **OR**
Since [Enter Begin Date month/year] _____ to current.
10. If there were any problems during the implementation, did the contractor resolve the issues in a satisfactory manner (Scale of 1-5) (5 being the highest, please give a brief description of your rating) **5, everything went very smoothly and any additional documentation FEMA needed was quickly provided.**
11. According to the contract requirements, scope, terms, and conditions, did the contractor meet your expectations? **Yes**
12. Overall, would you enter into a contract with this contractor again? **Yes, we have currently and have had a contract in place with Bergeron Emergency Services**
13. Person filling out form:
 - a. What is your title? **Public Works Director**
 - b. What is your name? **Edward Consaul**
 - c. What is your contact number? **954-452-2537**