



TO: Victoria Hernandez, Purchasing Agent
Purchasing Division
FROM: Anh Ton, Director
Highway and Bridge Maintenance Division
SUBJECT: Solicitation No.: S2115118B1
Vacuum Storm Water and Sewer Trucks

Recommended Vendor: GS Equipment, Inc. d/b/a Great Southern Equipment Company
Recommended Group(s)/Line Item(s): Line 1
Initial Award Amount: \$1,370,700.00 Potential Total Amount: \$1,370,700.00
Initial Contract Term: Fixed Purchase Contract Term, including Renewals: Fixed Purchase

CONCURRENCE:

The agency has reviewed Vendor's response(s) for specification compliance and Vendor responsibility. I have reviewed all documents including the Vendor Questionnaire and after careful evaluation, I concur with recommendation for award to the Vendor.

FINANCIAL BACKGROUND/D & B REPORT: (check one)

- I am satisfied with the Vendor's financial background and/or rating and payment performance.
- Not applicable Provide explanation if choosing this option

LITIGATION HISTORY: (check one)

- I have reviewed the Litigation History Form and there is no issue of concern.
- Refer to additional information from the Office of the County Attorney to address an issue/concern.

PAST PERFORMANCE: (check all that apply)

I have reviewed the Vendor's past Performance Evaluations in Contracts Central and:

- Vendor received an overall rating ≥ 2.59 on all evaluations.
- No evaluations within the past three years contained any items rated a score of 2 or less.
- Vendor received a rating ≤ 2.59 on an evaluation(s). Refer to additional information.
- Vendor received a score of ≤ 2 on an individual item(s). Refer to additional information.
- Past evaluations are not relevant to the scope of this contract.
- No past Performance Evaluations exist in Contracts Central.

AND

- Reference Verification Forms are attached.

OR

- Reference Verification Forms are not required: Commodity only purchase (less than \$250,000); Service less than \$50,000 and the Vendor has a Performance Evaluation within the past three years.

NON-CONCURRENCE:

- I do not concur. Detailed reason for non-concurrence is attached.

TYPED NAME OF SIGNER: Anh Ton, P.E TITLE: Director
(Individual authorized to administer the contract.)

SIGNATURE:  DATE: 9/14/17



Vendor Reference Verification Form

Broward County Solicitation No. and Title: Vacuum Storm Water and Sewer Trucks
 Reference for: (Name of Firm) Great Southern Equipment Company
 Organization/Firm Name providing reference: JTV Incorporated
 Contact Name/Title: Joyce T. Velitschkowski, President
 Contact E-mail: jtv@jtvinc.biz
 Contact Phone: 727-528-1998
 Name of Referenced Project: Sewer Cleaning Truck
 Contract No. N/A
 Contract Amount: \$489,000.00
 Date Services Provided: March 2016

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Sub-consultant/Sub-contractor
 Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:
Purchase of Combination Sewer Cleaning Truck.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

References Checked By
 Name: Angela Byers Title: Administrative Officer
 Division/Department: Highway and Bridge Maintenance/Public Date of Verification: September 06, 2017



Vendor Reference Verification Form

Broward County Solicitation No. and Title: Vacuum Storm Water and Sewer Trucks
 Reference for: (Name of Firm) Great Southern Equipment Company
 Organization/Firm Name providing reference: City of Port St. Lucie
 Contact Name/Title: Rick Perkins, Project Manager at Fleet and Facilities
 Contact E-mail: rperkins@cityofpsl.com
 Contact Phone: 772-370-4396
 Name of Referenced Project: Stormwater maintenance
 Contract No. N/A
 Contract Amount: \$331,420.00
 Date Services Provided: December 2014

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Sub-consultant/Sub-contractor
 Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:
Stormwater maintenance.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)
Very good people. I've been working with them for over 15 years. I'm very happy with their services.

References Checked By
 Name: Christ-El Beauvoir Title: Administrative Coordinator
 Division/Department: Public Works/Highway and Bridge Maint Date of Verification: 09/12/2017



Vendor Reference Verification Form

Broward County Solicitation No. and Title: Vacuum Storm Water and Sewer Trucks
 Reference for: (Name of Firm) Great Southern Equipment Company
 Organization/Firm Name providing reference: Citrus County, Road Maintenance Division
 Contact Name/Title: David Whitelaw, Director of Road Maintenance Division
 Contact E-mail: david.whitelaw@bocc.citrus.fl.us
 Contact Phone: 352-400-0602
 Name of Referenced Project: Purchase of Equipment
 Contract No. N/A
 Contract Amount: \$303,000.00
 Date Services Provided: November 2015

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Sub-consultant/Sub-contractor
 Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:
We ordered fleet services equipment from them as needed.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)
Great service. We've worked with them in the past and hope to order from them again in the near future.

References Checked By
 Name: Christ-El Beauvoir Title: Administrative Coordinator
 Division/Department: Public Works/Highway and Bridge Maint Date of Verification: 09/12/2017