



TO: John Torrenga, Purchasing Agent
Purchasing Division
FROM: Jeff Turpin, Interim Director
Solid Waste and Recycling Services
SUBJECT: Solicitation No.: G2113717B1
Yard Waste Processing and Disposal at Broward County Landfill

Recommended Vendor: Treecycle Land Clearing, Inc.
Recommended Group(s)/Line Item(s): Group 1
Initial Award Amount: \$476,000 Potential Total Amount: \$924,000
Initial Contract Term: One Year Contract Term, including Renewals: Three Years

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

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: Richard Meyers TITLE: Program Manager, Solid Waste and Recycling Services
(Individual authorized to administer the contract.)

SIGNATURE:  DATE: 4/17/17



Vendor Reference Verification Form

Broward County Solicitation No. and Title: G2113717B1 - Yard Waste Processing and Disposal at Broward County Landfill

Reference for: (Name of Firm) Treecycle Land Clearing, Inc.
 Organization/Firm Name providing reference: City of St. Cloud
 Contact Name/Title: Michael Johnson, Solid Waste Lead Transfer Station
 Contact E-mail: mjohnson@stcloud.org
 Contact Phone: (407) 957-7262
 Name of Referenced Project: Mulching and Disposal Services for Vegetative Waste
 Contract No. ITB # 2014-108-TLP
 Contract Amount: \$210,000 Per Annum
 Date Services Provided: 12/2015 to Current
 (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:
 Vendor comes to our site on a 3 month cycle or earlier if needed, to provide a brush grinding and removal of product from our site.

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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)
 Treecycle is very professional, they have invested in new equipment and are very efficient.

References Checked By
 Name: Marjorie Roberts Title: CGA II
 Division/Department: Solid Waste and Recycling Services Date of Verification: April 3, 2017



Vendor Reference Verification Form

Broward County Solicitation No. and Title: G2113717B1 - Yard Waste Processing and Disposal at Broward County Landfill

Reference for: (Name of Firm) Treecycle Land Clearing, Inc.
 Organization/Firm Name providing reference: City of Stuart
 Contact Name/Title: Greg Schommer/Sanitation Team Leader III
 Contact E-mail: gschommer@ci.stuart.fl.us
 Contact Phone: (772) 600-1210
 Name of Referenced Project: Processing and Disposal of Yard Waste
 Contract No. 2016-300
 Contract Amount: \$150,000 Per Annum
 Date Services Provided: 12/2015 to Current
 (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:
 The City of Stuart currently has a Yard Waste Processing Facility where we dump City generated yard trash. Our current contractors primary function of this contract is to grind, haul and dispose of this vegetation.

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)
 Treecycle Land Clearing has responded in a timely manner and operates a very efficient operation when called upon for these services.

References Checked By
 Name: Marjorie Roberts Title: CGA II
 Division/Department: Solid Waste and Recycling Services Date of Verification: April 6, 2017



Vendor Reference Verification Form

Broward County Solicitation No. and Title: G2113717B1 - Yard Waste Processing and Disposal at Broward County Landfill

Reference for: (Name of Firm) Treecycle Land Clearing, Inc.

Organization/Firm Name providing reference: Waste Management, Pompano Landfill-Sun 7

Contact Name/Title: Casey Hojara-WM Sun 7 Site Manager

Contact E-mail: chojara@wm.com

Contact Phone: (561)350-8070

Name of Referenced Project: Processing of Vegetative Waste

Contract No. 101016sc

Contract Amount: \$11.50 per inbound ton

Date Services Provided: 1/7/16 - current

(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:

Grinding of vegetation and C&D wood

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

References Checked By

Name: Marjorie Roberts

Title: CGAII

Division/Department: Solid Waste and Recycling Services

Date of Verification: April 12, 2017