# Three-Question Matrix and Reference Checks RLI Number: TEC2115809R1 RLI Name: EOC Communications Modernization Project

Ranking (Not Alphabetical)	1	2	3	4
Firm Name	Pro Sound, Inc. d/b/a Pro Sound & Video	Audio Visual Innovations, Inc.	Encore Broadcast Equipment Sales, Inc. d/b/a Encore Broadcast Solutions	Pioneer Construction Management Services, Inc.
Questions				
Have the vendors taken any exceptions to the County's Standard Terms and Conditions?	NO EXCEPTIONS	NO EXCEPTIONS	NO EXCEPTIONS	NO EXCEPTIONS
2. Do the vendors have comparable government experience?	Broward County- Commission Chambers, Aviation Department (Rental Car Center, Terminals United States General Services Administration City of Pembroke Pines City of Houston, Texas City of Miramar Miami Dae County United States Airforce City of Miami Beach	North Carolina State University City of Minneapolis Los Angeles County Metropolitan Transportation Authority Los Angeles Fire Department St. Lucie County Cooke County Center for Disease Control Rialto Unified School District University of Toledo	Lee County Lee County School District Hillsborough School District Polk County City of Port St. Lucie Indian River	Overtown Community Center Miami Dade County Public School City of West Park
3. Have the vendors' references been checked?	YES (Attached)	YES (Attached)	YES (Attached)	YES (Attached)

Broward County Board of County Commissioners



## **Vendor Reference Verification Form**

Broward County Solicitation No. and Title: TEC2115809R1 - EOC Communications Modernization Project Reference for: AVI-SPL Organization/Firm Name providing reference: City of Pompano Beach Fire Rescue - Emergency Management Contact Name: Kimberly Spill-Cristiano Title: Emergency Manage Reference date: 02/20/2018 Contact Phone: 954-242-0565 Contact Email: Kimberly.spill-cristiano@copbfl.com Name of Referenced Project: FOC mod Contract No. Date Services Provided: Project Amount: 02/20/2018 11/01/2012 to creation & now maint/svc Vendor's role in Project: ✓ Prime Vendor Subconsultant/Subcontractor Would you use this vendor again? No If No, please specify in Additional Comments (below). √ Yes Description of services provided by Vendor: EOC design and maintenance since 2012. Their expertise was exceptionally valuable and reliable. Martin Lois is excellent and has provided quality service and modernization recommendations. Needs Satisfactory Excellent Not Please rate your experience with the Improvement **Applicable** referenced Vendor: Vendor's Quality of Service Responsive b. Accuracy Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover Timeliness of: a. Project b. Deliverables 4. Project completed within budget Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies) Additional Comments: (provide on additional sheet if needed) AVI-SPL has provided excellence in every aspect. Alex Porter would even reach out when a disaster was approaching to make sure the EOC was fully functional. Our new Representative has also been very responsive \*\*\*THIS SECTION FOR COUNTY USE ONLY\*\*\*

Verified via: X EMAIL VERBAL Verified by: Multi- Division: OPC Date: 2/26/126/18

Broward County Board of County Commissioners



#### **Vendor Reference Verification Form**

Broward County Solicitation No. and Title: TEC2115809R1 - EOC Communications Modernization Project Reference for: AVI-SPL Organization/Firm Name providing reference: Fort Lauderdale Police Department Contact Name: Michael Gregory Title: Assistant Police Chi Reference date: 02/20/2018 Contact Email: mgregory@fortlauderdale.gov Contact Phone: 954-828-5587 Name of Referenced Project: Real Time Crime Center - HiperWall, Equip, Furniture Installation Contract No. Date Services Provided: Project Amount: PP160622 12/08/2015 to 11/08/2016 \$ 503,763.05 Vendor's role in Project: 

✓ Prime Vendor Subconsultant/Subcontractor Would you use this vendor again? If No, please specify in Additional Comments (below).  $\mathsf{No}$ Description of services provided by Vendor: Project planning, design and implementation. AVI-SPL installed and configured 2 video walls/furniture in the RTCC, Large display in the RTCC Conf Rm, Displays in the Chief's Conference Rm & Displays in the 2nd Flr Classroom. All rooms are tied into HiperWall. Needs Satisfactory Excellent Not Please rate your experience with the Improvement **Applicable** referenced Vendor: 1. Vendor's Quality of Service a. Responsive b. Accuracy c. Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover 3. Timeliness of: a. Project b. Deliverables 4. Project completed within budget 5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) Regulatory Agency(ies)

Additional Comments: (provide on additional sheet if needed)

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Verified via:	X_EMAIL	VERBAL	Verified by: M	rilo Op	Division: OPC	Date: 2/20	12018



**EMAIL** 

Verified via:

#### Vendor Reference Verification Form

Broward County Solicitation No. and Title: Bid# TEC2115809R1 - EOC Communications Modernization Project Reference for: Encore Broadcast Equipment Sales, Inc. d/b/a Encore Broadcast Solutions Organization/Firm Name providing reference: Seminole Government Television Contact Name: Paul Louis Reference date: Title: Operations Mgr. 02/14/2018 Contact Phone: 407-665-1173 Contact Email: plouis@seminolecountyfl.gov Name of Referenced Project: EOC Switcher Installation Contract No. Date Services Provided: Project Amount: to 01/26/2018 \$ 1,850.00 01/26/2018 Vendor's role in Project: 

✓ Prime Vendor Subconsultant/Subcontractor Would you use this vendor again? No If No, please specify in Additional Comments (below). Description of services provided by Vendor: Remove old analog video switcher, install new digital video switcher, re-route wiring as required to accommodate new equipment installation. Needs Satisfactory Excellent Not Please rate your experience with the Improvement Applicable referenced Vendor: Vendor's Quality of Service a. Responsive b. Accuracy c. Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover 3. Timeliness of: a. Project b. Deliverables 4. Project completed within budget 5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) Regulatory Agency(ies) Additional Comments: (provide on additional sheet if needed) We have been working with Encore for many years on a variety of projects, including our latest automatic playback system installation (which was a much larger project than referenced above). They continue to be a vendor/systems integrator of choice for SGTV.

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Verified by

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Division:



## **Vendor Reference Verification Form**

Broward County Solicitation No. and Title:

	115809R1 -	EOC Comm	unications N	/lodernizatio	n Project		
Reference for:	Encore Broadca	st Equipment Sal	es, Inc. d/b/a Enc	ore Broadcast So	olutions		
Organization/Fi		ding reference: ter Services Di	vision				
Contact Name:	Adam Willian	ns Ti	tle: Network T	echnician Refe	rence date:	02/14/2018	
Contact Email:	adamdw@com	cast.net		Con	tact Phone:	772-226-1984	
		Indian River Co	unty BOCC A	/ Upgrade			
Contract No.		Date Services	Provided:		Project A	mount:	
80260-00		02/22/2018	to 03/02/	2018	\$ 212,423	.85	
Vendor's role in	Project: 🔽 Pri	me Vendor	Subconsultant/S	Subcontractor			
Would you use t	nis vendor agai	n? <b>√</b> Yes	□No If No	o, please specif	y in Additiona	al Comments (belo	w).
Description of s	services provid	led by Vendor:					
Audio/Visual uր	ogrades for Inc	lian River BOC	C Chambers a	nd broadcast o	control room	1.	
Please rate yo		with the	Needs Improvement	Satisfactory	Excellent	Not Applicable	
a. Resp b. Accu		ce			<b>✓ ✓</b>		
	expertise essionalism				<b>✓</b> <b>✓</b>		
<ol> <li>Timeliness</li> <li>a. Proje</li> <li>b. Deliv</li> </ol>					<b>✓</b>		
<ol><li>Project co</li></ol>	mpleted within I	oudget			$\checkmark$		
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Additional Comments	2000		f upgrades and				
answered all of our many question		ing and able to work around our s		SE ONLY***			
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## **Vendor Reference Verification Form**

Broward County Solicitation No. and Title:

Bid# TEC2115809R1 - EOC Communications Modernization Project

DIO:	# TEC2115809R1 - EOC COMM	iunications iv	louemizatio	i Project	
Refe	rence for: Encore Broadcast Equipment Sal	es, Inc. d/b/a Enc	ore Broadcast Sc	lutions	
Orga	nization/Firm Name providing reference:				
	City Part St. Lu	rie			
Conta		tle: Director	Pm DRefe	rence date:	2-15-18
Conta	act Email: Chery 150 city of		Con	tact Phone:	772871 7390
Name	e of Referenced Project:	Council A		rinne	15
	ract No. Date Services	Provided:	19		mount:
2	0170179	to 7-11-	17 - 9/4	-/17	\$ 93 486.50
Vendo	o/7 o /79 or's role in Project: Prime Vendor	Subconsultant/S	Subcontractor	1''	1,0000
	you use this vendor again? 1 Yes	□No If No	o, please specify	in Addition	al Comments (below).
Descr	iption of services provided by Vendor:		isata	11 010	diction
K	Eg in Council Chamb	upgrade	2 1/01	· /-	
			0		No.
	se rate your experience with the enced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
	Vendor's Quality of Service				
	<ul><li>a. Responsive</li><li>b. Accuracy</li></ul>	H	H		
	c. Deliverables		H		
2.	Vendor's Organization:				
	a. Staff expertise	H	H		H
	<ul><li>b. Professionalism</li><li>c. Turnover</li></ul>	H		H	H
			V		
3.	Timeliness of: a. Project		7/		
	b. Deliverables		9		
4.	Project completed within budget		Tu/		
	Cooperation with:				
5.	a. Your Firm				
	<ul><li>b. Subcontractor(s)/Subconsultant(s)</li></ul>				声,
	c. Regulatory Agency(ies)				
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Additional Comments: (provide on additional sheet if needed)  Fire confines To fine fore out adjust eg at no host to  "THIS SECTION FOR COUNTY USE ONLY"  OP( 2/20/2018)					
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Verified v	via:EMAIL \_VERBAL Verified by:	iful m	Division	DAC	Date: 2/20/20/8
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BidSync

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## Vendor Reference Verification Form

Broward County Solicitation No. and Title: TEC2115809R1 - EOC Communications Modernization Project Reference for: Pioneer Construction Management Services, Inc. Organization/Firm Name providing reference: Southeast Overtown/Park West Community Redevelopment Agency (CRA) Contact Name: Brian Zeltsman Reference date: Title: Director of Arch. 02/20/2018 Contact Email: bzeltsman@miamigov.com Contact Phone: 305-679-6827 Name of Referenced Project: Overtown Community Center a.k.a. Overtown Performing Arts Center Contract No. Date Services Provided: Project Amount: 01/05/2015 to 07/15/2016 \$ 3,315,000.00 Vendor's role in Project: 

✓ Prime Vendor Subconsultant/Subcontractor Would you use this vendor again? If No, please specify in Additional Comments (below). ✓ Yes No Description of services provided by Vendor: Full rehabilitation of exiting church building into a community center/banquet hall with comm. kitchen. Needs Satisfactory Excellent Not Please rate your experience with the Applicable Improvement referenced Vendor: 1. Vendor's Quality of Service a. Responsive b. Accuracy Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism Turnover 3. Timeliness of: a. Project b. Deliverables 4. Project completed within budget 5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies) Additional Comments: (provide on additional sheet if needed) Our experience on this project was good, however since this project, there have been some communication and responsiveness issues on other small projects. \*\*\*THIS SECTION FOR COUNTY USE ONLY\*\*\* Verified by:

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## **Vendor Reference Verification Form**

Broward County Solicitation No. and Title:

Reference for: Pro Sound, Inc. (dba Pro Sound & Video)  Organization/Firm Name providing reference: The King's Academy  Contact Name: Jeff Loveland	TEC2115809R1 - EOC Communications Modernization Project						
Organization/Firm Name providing reference: The King's Academy  Contact Name: Jeff Loveland							
Contact Name: Jeff Loveland Title: COO Reference date: 02/16/2018  Contact Email: jloveland@tka.net Contact Phone: 561-686-4244  Name of Referenced Project: The King's Academy Theatre for the Performing Arts  Contract No. Date Services Provided: Project Amount: 01/01/2016 to 05/01/2017 \$550,000.00  Fendor's role in Project: Prime Vendor Subconsultant/Subcontractor  Vould you use this vendor again? Yes No If No, please specify in Additional Comments (below).  Pescription of services provided by Vendor: Complete Audio and Video installation for new 800 seat Theatre  Please rate your experience with the Improvement Satisfactory Excellent Applicable  1. Vendor's Quality of Service a. Responsive b. Accuracy C. Deliverables  2. Vendor's Organization: A. Staff expertise D. Professionalism C. Turnover  3. Timeliness of: A. Project D. Deliverables  4. Project completed within budget V. Project completed within budget V. Project completed within budget V. Project Cooperation with: A. Your Firm D. Subcontractor(s)/Subconsultant(s) V. C. Regulatory Agency(ies)	Organization/Firm Name providing reference:	*					
Contact Email: jioveland@tka.net  Name of Referenced Project: The King's Academy Theatre for the Performing Arts  Contract No. Date Services Provided: Project Amount: 01/01/2016 to 05/01/2017 \$550,000.00  Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor  Vould you use this vendor again? Yes No If No, please specify in Additional Comments (below).  Description of services provided by Vendor:  Complete Audio and Video installation for new 800 seat Theatre  Please rate your experience with the referenced Vendor:  1. Vendor's Quality of Service  a. Responsive  b. Accuracy c. Deliverables  2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)		tle: COO	Refe	erence date:	02/16/2019		
Name of Referenced Project: The King's Academy Theatre for the Performing Arts  Contract No. Date Services Provided: Project Amount: 01/01/2016 to 05/01/2017 \$550,000.00  Project: Prime Vendor Subconsultant/Subcontractor  Vould you use this vendor again? Yes No If No, please specify in Additional Comments (below).  Proscription of services provided by Vendor:  Complete Audio and Video installation for new 800 seat Theatre  Please rate your experience with the referenced Vendor:  1. Vendor's Quality of Service  a. Responsive  b. Accuracy  c. Deliverables  2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)		ille. COO			CM LOWUSE PER CHONNEC PELS		
Contract No.  Date Services Provided:  Of/01/2016  Date Services Provided:  Of/01/2017  S 550,000.00  Prime Vendor's role in Project:  Vould you use this vendor again?  Vould you use this vendor.  Vould you use this vendor.  Vould you use this	Name of Referenced Project:				001-080-4244		
O1/01/2016   to O5/01/2017   \$550,000.00     Vendor's role in Project:   Prime Vendor   Subconsultant/Subcontractor     Vould you use this vendor again?   Yes   No   If No, please specify in Additional Comments (below).     Description of services provided by Vendor:     Complete Audio and Video installation for new 800 seat Theatre     Please rate your experience with the referenced Vendor:   Needs   Satisfactory   Excellent   Not	The King's Aca		for the Perforn		mount.		
Vould you use this vendor again?   Yes   No   If No, please specify in Additional Comments (below).   Please rate your experience with the referenced Vendor:   Needs Improvement   Needs Improvement   Satisfactory   Excellent   Not Applicable   Applicable   Applicable			2017	The Annual Control of the Control of			
Vould you use this vendor again?   Yes   No   If No, please specify in Additional Comments (below).   Please rate your experience with the referenced Vendor:   Needs Improvement   Needs Improvement   Satisfactory   Excellent   Not Applicable   Applicable   Applicable	Vendor's role in Project: ☑ Prime Vendor ☐	Subconsultant/S	ubcontractor	Mr. Pro O Substitution	nn 501		
Please rate your experience with the referenced Vendor:    Needs   Satisfactory   Excellent   Not Applicable				y in Additiona	l Comments (bel	ow).	
Please rate your experience with the referenced Vendor:  1. Vendor's Quality of Service  a. Responsive b. Accuracy c. Deliverables  2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)				,	,	,	
Improvement   Improvement   Applicable		ew 800 seat Th	eatre				
Improvement   Improvement   Applicable							
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b. Accuracy c. Deliverables  2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)	Vendor's Quality of Service						
c. Deliverables  2. Vendor's Organization:     a. Staff expertise     b. Professionalism     c. Turnover  3. Timeliness of:     a. Project     b. Deliverables  4. Project completed within budget  5. Cooperation with:     a. Your Firm     b. Subcontractor(s)/Subconsultant(s)     c. Regulatory Agency(ies)	(15)	H	H	<b>V</b>	H		
a. Staff expertise b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)				<u> </u>			
b. Professionalism c. Turnover  3. Timeliness of: a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)							
c. Turnover  3. Timeliness of:     a. Project     b. Deliverables  4. Project completed within budget  5. Cooperation with:     a. Your Firm     b. Subcontractor(s)/Subconsultant(s)     c. Regulatory Agency(ies)			H	7			
a. Project b. Deliverables  4. Project completed within budget  5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)				<b>✓</b>			
b. Deliverables  4. Project completed within budget  5. Cooperation with:  a. Your Firm  b. Subcontractor(s)/Subconsultant(s)  c. Regulatory Agency(ies)		П					
5. Cooperation with:  a. Your Firm  b. Subcontractor(s)/Subconsultant(s)  c. Regulatory Agency(ies)		H		V	H		
a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)	4. Project completed within budget			$\checkmark$			
b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies)	· ·						
c. Regulatory Agency(ies)		H	H	<b>✓</b>			
Iditional Comments: (provide on additional sheet if needed)	the control of the co	H		<b>✓</b>			
1ditional Comments: (provide on additional sheet if needed)		_		,			
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Pro Sound provided excellent advice in product selection that helped the project come in under budget. ****THIS SECTION FOR COUNTY USE ONLY***							
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**EMAIL** 

**VERBAL** 

Verified by:

## **Vendor Reference Verification Form**

Broward County Solicitation No. and Title: TEC2115809R1 - EOC Communications Modernization Project Reference for: Pro Sound, Inc. (dba Pro Sound & Video) Organization/Firm Name providing reference: Christ Fellowship Church, Inc. Contact Name: Alan Jones Title: Director, Broadcast Reference date: 02/16/2018 Contact Phone: 561-799-7600 Contact Email: alanj@cftoday.org Name of Referenced Project: HD Video Upgrade Contract No. Date Services Provided: Project Amount: N/A 09/01/2011 to 04/30/2012 \$ 1,700,000.00 Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor Would you use this vendor again? No If No, please specify in Additional Comments (below). Description of services provided by Vendor: Design and install systems for broadcast cameras, routers, video terminal equipment, studio furniture, SMPTE cabling and termination, multi-viewer processors and monitors, large venue projectors/screens, commissioning and training. Needs Satisfactory Excellent Not Please rate your experience with the **Applicable** Improvement referenced Vendor: Vendor's Quality of Service a. Responsive b. Accuracy c. Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism c. Turnover 3. Timeliness of: a. Project b. Deliverables Project completed within budget 5. Cooperation with: a. Your Firm b. Subcontractor(s)/Subconsultant(s) c. Regulatory Agency(ies) Additional Comments: (provide on additional sheet if needed) \*\*\*THIS SECTION FOR COUNTY USE ONLY\*\*\*

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Division:



Verified via:

**EMAIL** 

**VERBAL** 

Verified by:

## Vendor Reference Verification Form

Broward County Solicitation No. and Title: TEC2115809R1 - EOC Communications Modernization Project Reference for: Pro Sound, Inc. (dba Pro Sound & Video) Organization/Firm Name providing reference: New World Symphony, Inc. Contact Name: David Phillips Reference date: Title: EVP/CFO 02/15/2018 Contact Phone: 305-428-6751 Contact Email: david.phillips@nws.edu Name of Referenced Project: New World Center Contract No. Date Services Provided: Project Amount: to N/A 01/01/2009 12/15/2018 \$3,000,000.00 Vendor's role in Project: ✓ Prime Vendor Subconsultant/Subcontractor If No, please specify in Additional Comments (below). Would you use this vendor again? ✓ Yes No Description of services provided by Vendor: Design and installation of AV systems inside New World Center and outdoor AV systems that NWS uses in Soundscape Park, other ongoing AV needs, Excellent Not Satisfactory Please rate your experience with the Needs Improvement Applicable referenced Vendor: Vendor's Quality of Service a. Responsive b. Accuracy Deliverables 2. Vendor's Organization: a. Staff expertise b. Professionalism Turnover Timeliness of: a. Project b. Deliverables 4. Project completed within budget 5. Cooperation with: Your Firm b. Subcontractor(s)/Subconsultant(s) Regulatory Agency(ies) Additional Comments: (provide on additional sheet if needed) \*\*\*THIS SECTION FOR COUNTY USE ONLY\*\*\*

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Division: