




**TO:** Nancy Olesen  
Purchasing Division  
**FROM:** Alan W. Garcia, P.E., Director   
Water and Wastewater Services  
**SUBJECT:** Solicitation No.: PNC2115402B1  
Clean, Inspect and Repair Drainage Facilities

Recommended Vendor: Envirowaste Services Group, Inc.  
Recommended Group(s)/Line Item(s): Lines 1 - 43  
Initial Award Amount: \$702,100.00 Potential Total Amount: \$2,106,300.00  
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 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  $\geq 2.59$  on all evaluations.
- No evaluations within the past three years contained any items rated a score of 2 or less.
- Vendor received a rating  $\leq 2.59$  on an evaluation(s). Refer to additional information.
- Vendor received a score of  $\leq 2$  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: Carl R. Archie, P.E. TITLE: Engineering Unit Supervisor

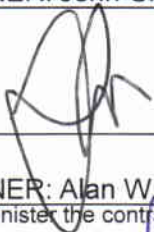
SIGNATURE:  DATE: January 29, 2018

Concurrence: Clean, Inspect and Repair Drainage Facilities

TYPED NAME OF SIGNER: John Crouse, P.E.

TITLE: Director, Water Management Division

SIGNATURE:



DATE:

1/23/18

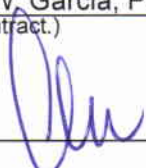
TYPED NAME OF SIGNER: Alan W. Garcia, P.E.

(Individual authorized to administer the contract.)

Director, Water and Wastewater

TITLE: Services

SIGNATURE:



DATE:

1/29/18



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: PNC2115402B1, Clean, Inspect and Repair Drainage Facilities  
 Reference for: (Name of Firm) Envirowaste Services Group, Inc.  
 Organization/Firm Name providing reference: Town of Cutler Bay  
 Contact Name/Title: Alfredo Quintero / Public Works Director  
 Contact E-mail: aquintero@cutlerbay-fl.gov  
 Contact Phone: 786-348-5323  
 Name of Referenced Project: catch basin maintenance service  
 Contract No. Piggy Back Contact Town Resolution #14-33  
 Contract Amount: Present Amount \$696,100- 1 year  
 Date Services Provided: May 2014- Present  
 (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:**  
 Town-wide storm-drain cleaning services

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

**Additional Comments: (provide on additional sheet if needed)**

References Checked By  
 Name: Reann Soodeen Title: Construction Project Manager  
 Division/Department: WWS/WMD Date of Verification: January 05, 2018



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: PNC2115402B1, Clean, Inspect and Repair Drainage Facilities

Reference for: (Name of Firm) Envirowaste Services Group, Inc.

Organization/Firm Name providing reference: Florida Department of Transportation

Contact Name/Title: Rick Cow / Project Oversight I

Contact E-mail: Frederick.coe@dot.sate.fl.us

Contact Phone: 386-740-3490

Name of Referenced Project: Storm drain desilting, lining and replacement

Contract No. E5T90, FM 429179-1-72-04

Contract Amount: Present Amount \$1,906,613.54

Date Services Provided: 2/26/17 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 work under this Contract consists of storm drain desilting, pipe video, pipe lining, and pipe replacement on various roads in Volusia County.

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

Additional Comments: (provide on additional sheet if needed)

References Checked By

Name: Reann Soodeen

Division/Department: WWS/WMD

Title: Construction Project Manager

Date of Verification: January 04, 2018



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: PNC2115402B1, Clean, Inspect and Repair Drainage Facilities  
 Reference for: (Name of Firm) Envirowaste Services Group, Inc.  
 Organization/Firm Name providing reference: Orange County  
 Contact Name/Title: Willaiam Burnham, Coordinator  
 Contact E-mail: william.burnham@ocfl.net  
 Contact Phone: 4078367876  
 Name of Referenced Project: Term Contract  
 Contract No. Y17-100  
 Contract Amount: \$4,210,606.00  
 Date Services Provided: 12/1/16-11/30/19  
 (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:**  
**Storm-water system video, cleaning, sealing, void detection and soil stabilization**

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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)**  
**"We are in our 10 year with Envirowaste as our primary term contractor, we have been completely satisfied with their service."**

References Checked By  
 Name: Reann Soodeen Title: Construction Project Manager  
 Division/Department: WWWS/WMD Date of Verification: January 03, 2018