



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: Barney's Pumps, Inc.
Recommended Group(s)/Line Item(s) Group 4 thru 11, 13 and 14
Initial Award Amount: \$550,726 Potential Total Amount: \$1,652,178
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 Payment will be made upon services rendered.

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: Paul Kirlew TITLE: Maintenance Manager, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/2018

TYPED NAME OF SIGNER: Mark Darmanin
TITLE: Director, Water and Wastewater
Operations Division

SIGNATURE:  DATE: 5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)
TITLE: Director, Water and Wastewater
Services

SIGNATURE:  DATE: 5/29/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair

Reference for: (Name of Firm) Barney's Pumps, Inc.

Organization/Firm Name providing reference: City of Fort Lauderdale

Contact Name/Title: Jud Hopping

Contact E-mail: judh@fortlauderdale.gov

Contact Phone: 954-828-7854

Name of Referenced Project: Pumps, Parts and Repair

Contract No. Various

Contract Amount: Various

Date Services Provided: 2000 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:

Barney's provides new pumps, parts and service

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

Vendor is very responsive to the city's needs.

References Checked By:

Name: Paul Kirelew

Title: Minor Remedial Manager

Division/Department: Water and Wastewater Service

Date of Verification: 5/24/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) Barney's Pumps, Inc.
 Organization/Firm Name providing reference: Hernando County
 Contact Name/Title: Larry Cooper
 Contact E-mail: lcooper@co.hernando.fl.us
 Contact Phone: 352-754-4773
 Name of Referenced Project: Sewage Pumps and Accessories
 Contract No. 15-T00110/PLH
 Contract Amount: 192,255
 Date Services Provided: 2017

(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:
Contract for Pumps, parts and 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 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)
Mr. Cooper is very happy with the service provided by Barney's Pumps, Inc. He praised them for very fast turnovers of pumps sent out for repairs.

References Checked By
 Name: Paul Kirlew Title: MAINTENANCE MANAGER
 Division/Department: Water and Wastewater Services Date of Verification: 5/24/2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) Barney's Pumps, Inc.
 Organization/Firm Name providing reference: City of Coral Gables
 Contact Name/Title: Jorge Acevedo/ Jose Saucedo
 Contact E-mail: jacevedo2@coralgables.com
 Contact Phone: 305-460-5006
 Name of Referred Project: Pumps, Parts and Repair
 Contract No. Various
 Contract Amount: Various
 Date Services Provided: 2012 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:
Barney's Pumps provides sewer pumps and controls. City personnel has received technical training courses from Barney's. Barney's Pumps represents products related to HOMA Pumps that City has in a couple Sanitary Pump Stations. Barney's provide pumps maintenance and services.

Please rate your experience with the referred 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)

References Checked By
 Name: Paul Kirlew Title: Maintenance Manager
 Division/Department: Water and Wastewater Services Date of Verification: 5/24/2018



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: F.J. Nugent & Associates, Inc.
Recommended Group(s)/Line Item(s): Group 1, 2, 12, and 15 thru 18
Initial Award Amount: \$408,940 Potential Total Amount: \$1,226,820
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 Payment will be made upon services rendered.

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: Paul Kirlew TITLE: Maintenance Manager, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/2018

TYPED NAME OF SIGNER: Mark Darmanin
TITLE: Director, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)
TITLE: Director, Water and Wastewater Services

SIGNATURE:  DATE: 5/29/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) F.J. Nugent & Associates, Inc.
 Organization/Firm Name providing reference: City of Punta Gorda
 Contact Name/Title: Bobby Legg
 Contact E-mail: blegg@ci.punta-gorda.fl.us
 Contact Phone: 941-628-0497
 Name of Referenced Project: Pumps, Parts, and Repair
 Contract No. Various
 Contract Amount: Various
 Date Services Provided: 2010-2018

(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:
 Pumps, parts and repairs.

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 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)
 City of Punta Gorda uses the vendor on as-needed basis. Mr. Bobby Legg said they never had an issue with F.J. Nugent & Associates, Inc. and is happy with their service.

References Checked By
 Name: Paul Kirean Title: Maintenance Manager
 Division/Department: Water and Wastewater Services Date of Verification: 5/24/2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) F.J. Nugent & Associates, Inc.
 Organization/Firm Name providing reference: Broward County
 Contact Name/Title: Gary Hew / Warehouse Manager
 Contact E-mail: ghew@broward.org
 Contact Phone: 954-831-0813
 Name of Referenced Project: Furnish and Repair Pumps
 Contract No. Y1308004B1
 Contract Amount: 930000
 Date Services Provided: 2015-2018

(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:
Submersible Lift Station Pumps, Parts, and Repair

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 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)
Mr. Hew is happy with the service F.J. Nugent & Associates, Inc. provided for Broward County.

References Checked By
 Name: PAUL KIRLEN Title: MAINTENANCE MANAGER
 Division/Department: WATER AND WASTEWATER SERVICES Date of Verification: 5/24/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) F.J. Nugent & Associates, Inc.
 Organization/Firm Name providing reference: City of Pompano Beach
 Contact Name/Title: Bobby Clayton
 Contact E-mail: bobby.clayton@copbfl.com
 Contact Phone: 954-592-0263
 Name of Referenced Project: _____
 Contract No. N/A
 Contract Amount: N/A
 Date Services Provided: 2014-2018

(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:
Submersible lift station pumps, parts and repair 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)
FJ. Nugent is very consistent and timely with regards to communication, response and all repair services. Their representatives are highly knowledgeable of applications and determining the proper pumps for every situation. I highly recommend FJ Nugent

References Checked By
 Name: Paul Kirlew Title: Maintenance Manager
 Division/Department: Water And Wastewater Services Date of Verification: 5-24-18



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: Grundfos Water Utility, Inc.
Recommended Group(s)/Line Item(s) Items 3-01, 3-03
Initial Award Amount: \$19,920 Potential Total Amount \$59,760
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 Payment will be made upon services rendered.

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: Paul Kirlew TITLE: Maintenance Manager, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/2018

TYPED NAME OF SIGNER: Mark Darmanin
TITLE: Director, Water and Wastewater
Operations Division

SIGNATURE:  DATE: 5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)
TITLE: Director, Water and Wastewater
Services

SIGNATURE:  DATE: 5/29/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
Reference for: (Name of Firm) Grundfos Water Utility, Inc.

Organization/Firm Name providing reference: Miami-Dade Water and Sewer

Contact Name/Title: Ray Urquiola

Contact E-mail: WASDDirector@miamidade.gov

Contact Phone: 786-586-3916

Name of Referenced Project: Misc Pumps 10HP - 79HP

Contract No. N/A

Contract Amount: 500,000

Date Services Provided: N/A

(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:
Pumps purchase and service

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)
Mr. Urquiola mentioned that the company he deals with is Tom Evans Environmental, Inc. who is distributor for Grundfos Water Utility in South Florida and he is very satisfied with their service.

References Checked By
Name: Paul Kireal Title: Maintenance Manager
Division/Department: Water and Wastewater Serv. Date of Verification: 5/24/18



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair

Reference for: (Name of Firm) Grundfos Water Utility, Inc.

Organization/Firm Name providing reference: City of Deerfield Beach

Contact Name/Title: Environmental Services Supervisor

Contact E-mail: fscott@deerfield-beach.com

Contact Phone: 954-480-4403/ 954-410-4336

Name of Referenced Project: 21HP, 27HP, 39HP stations

Contract No. LS 34, 52, 33

Contract Amount: \$100,000

Date Services Provided: N/A

(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:
Supplier of submersible pumps and parts, also provides repairs 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)
Vendor provides very good services.

References Checked By

Name: Paul Kirlew

Title: Maintenance Manager

Division/Department: Water and Wastewater Services

Date of Verification: 5/24/2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair
 Reference for: (Name of Firm) Grundfos Water Utility, Inc.
 Organization/Firm Name providing reference: Brevard County
 Contact Name/Title: Robert Edmiston
 Contact E-mail: robert.edmiston@brevardcounty.us
 Contact Phone: 321-255-4328
 Name of Referenced Project: Triplex Pump Station 42 HP
 Contract No. N/A
 Contract Amount: 75,000
 Date Services Provided: N/A

(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:
 For Lift Station T25, they performed a station draw down calculation and recommend a Grundfos pump that best met our needs.

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)
 We have been installing Grundfos pumps in our lift stations since 2013, they have proven to be reliable and cost efficient. The best testimony would come from my field mechanics; they find them easy to service and repair, an added bonus is, they don't tend to rag-up like some of the other manufactures pumps we have.
 I can't testify to their shops repair service; as I haven't had to send a pump in for repair yet, we have been able to handle everything in-house, due to the design of the pumps. The SL models volute is held in place with a stainless steel band; the impeller, seal, and wear rings are easy to remove and replace. Replacement parts are relatively inexpensive, in comparison to other pump manufacturers. If the pump does need to be pulled and removed from the station, you don't need to have an electrician disconnect it from the control panel, the power cable plugs in to the pump.
My mechanics call Grundfos pumps "User Friendly".

Reference Verification: OPN2115473B2, Submersible Lift Station Pumps, Parts, and Repair

References Checked By

Name:

Paul Kirion

Title:

Maintenance Manager

Division/Department:

Water and Wastewater Serv.

Date of Verification:

5/24/18



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: Barney's Pumps, Inc.
Recommended Group(s)/Line Item(s): 3-02, Group 15, 16, 19 and 20
Initial Award Amount: Potential Total Amount:
Initial Contract Term: Contract Term, including Renewals:

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.

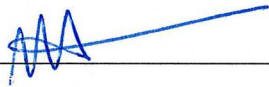
TYPED NAME OF SIGNER: Paul Kirlew
Maintenance Manager, Water and
TITLE: Wastewater Operations Division

SIGNATURE: 
DATE: 5/09/2018.

TYPED NAME OF SIGNER: Mark Darmanin

Director, Water and Wastewater
TITLE: Operations Division

SIGNATURE: _____




DATE: _____

5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)

Director, Water and Wastewater
TITLE: Services

SIGNATURE: _____



DATE: _____

5/29/18

Non-Concurrence Explanation

OPN2115473B2 – Submersible Lift Station Pumps, Parts and Repair

Recommended Vendor: Barney's Pumps, Inc.

Recommended Group(s)/Line Item(s): Line 3-02, Group 15, 16, 19 and 20

Reviewed by: Paul Kirlew, Maintenance Manager, Water and Wastewater Operations Division

Line 3-02: Water and Wastewater Services (WWS) has reviewed all bidder's submittals for Group 3. Barney's Pumps Inc., lowest bidder, offered a pump that exceeded the maximum rated horsepower for Line Item 3-02. The second lowest bidder offered a pump that exceeded the maximum rated horsepower for Line Item(s) 3-01 and 3.03. The third vendor, did not submit a bid for Line 3-02. Therefore, WWS has elected to remove and not award Line Item 3-02.

Group 15 and 16: WWS reviewed Barney's Pumps' submittal for Group 15 and 16. The bidder offered a pump that exceeded the maximum rated horsepower for Line Item 15-01 and 16-01.

Group 19 and 20: WWS has decided to reject all bidders for Groups 19 and 20 and submit a new requisition for repair services to award as many vendors as possible.



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: F.J. Nugent & Associates, Inc.
Recommended Group(s)/Line Item(s): Line Item 03-02, Group 19 and 20
Initial Award Amount: _____ Potential Total Amount: _____
Initial Contract Term: _____ Contract Term, including Renewals: _____

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.

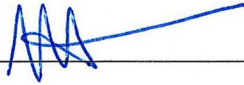
TYPED NAME OF SIGNER: Paul Kirlew
TITLE: Maintenance Manager, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/2018

TYPED NAME OF SIGNER: Mark Darmanin

Director, Water and Wastewater
TITLE: Operations Division

SIGNATURE:



DATE:

5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)

Director, Water and Wastewater
TITLE: Services

SIGNATURE:



DATE:

5/29/18

Non-Concurrence Explanation

OPN2115473B2 – Submersible Lift Station Pumps, Parts and Repair

Recommended Vendor: F.J. Nugent & Associates

Recommended Group(s)/Line Item(s): Group 3, 19 and 20

Reviewed by: Paul Kirlew, Maintenance Manager, Water and Wastewater Operations Division

Group 3

Bidder is not the low
bidder for items 3-01 and
03-03; rejection is not
needed.

Line 03-01 Not acceptable, FJ Nugent offered a pump that exceeds the maximum horsepower.

Line 03-02 Not acceptable, FJ Nugent offered Ebara Pump, Model #80DLBKU6. This model does not meet the specified discharge size of 4 inches.

Line 03-03 Not acceptable, FJ Nugent offered a pump that exceeds the maximum horsepower.

Group 19 and 20

Water and Wastewater Services has decided to reject all bidders for Groups 19 and 20; and a new requisition for repair services to award as many vendors as possible.



TO: Amy Almanzar
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2115473B2
Submersible Lift Station Pumps, Parts, and Repair

Recommended Vendor: Grundfos Water Utility, Inc.
Recommended Group(s)/Line Item(s): Group 9, 12, 13, 15, 16, 17, 19 and 20
Initial Award Amount: _____ Potential Total Amount: _____
Initial Contract Term: _____ Contract Term, including Renewals: _____

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.

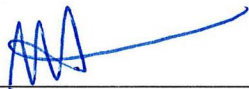
TYPED NAME OF SIGNER: Paul Kirlew
TITLE: Maintenance Manager, Water and Wastewater Operations Division

SIGNATURE:  DATE: 5/29/2018

TYPED NAME OF SIGNER: Mark Darmanin

Director, Water and Wastewater
TITLE: Operations Division

SIGNATURE:



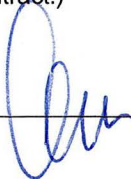
DATE:

5/29/18

TYPED NAME OF SIGNER: Alan W. Garcia, P.E.
(Individual authorized to administer the contract.)

Director, Water and Wastewater
TITLE: Services

SIGNATURE:



DATE:

5/29/18

Non-Concurrence Explanation

OPN2115473B2 – Submersible Lift Station Pumps, Parts and Repair

Recommended Vendor: Grundfos Water Utility, Inc.

Recommended Group(s)/Line Item(s): **Group 9, 12, 13, 15, 16, 17, 19 and 20**

Reviewed by: **Paul Kirlew, Maintenance Manager, Water and Wastewater Operations Division**

Groups 9, 12, 13, 15, 16, 17: Water and Wastewater Services (WWS) has reviewed Grundfos' submittal for Groups 9, 12, 13, 15, 16, 17 and Grundfos offered a pumps that exceeded the maximum rated horsepower for the stated groups.

Group 19 and 20: WWS has decided to reject all bidders for Groups 19 and 20 and submit a new requisition for repair services to award as many vendors as possible.