



**TO:** Jeannette Ferrell, Purchasing Agent  
Purchasing Division  
**FROM:** Robert Flint, Division Director *[Signature]*  
PE Operations Division  
**SUBJECT:** Solicitation No.: X2112978B1  
Repair or Replacement of Windows and Glass Doors

Recommended Vendor: Contracting & Consulting, Inc.  
Recommended Group(s)/Line Item(s): Line Items 1-92  
Initial Award Amount: 615,477.65 Potential Total Amount: 1,846,432.95  
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: Jouvens Adrien TITLE: Construction Project Manager  
(Individual authorized to administer the contract.)

**JOUVENS ADRIEN**  
SIGNATURE: \_\_\_\_\_ DATE: October 20, 2017  
Digitally signed by JOUVENS ADRIEN  
DN: dc=cty, dc=broward, dc=bc, ou=Organization,  
ou=PEV, ou=Users, cn=JOUVENS ADRIEN  
Date: 2017.10.20 17:40:48 -04'00'



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: X2112978B1, Repair or Replacement of Windows & Glass Doors  
 Reference for: (Name of Firm) Contracting & Consulting, Inc  
 Organization/Firm Name providing reference: Broward County Facility Maintenance Division  
 Contact Name/Title: Ann Rawlings - Facilities Manager  
 Contact E-mail: Arawlings@broward.org  
 Contact Phone: 954-594-3993  
 Name of Referenced Project: Repairs & Replacement of Windows,Doors & Locks - North Courthouse  
 Contract No. X1133903B2  
 Contract Amount: \$40,640  
 Date Services Provided: 01/2017-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:**  
**Constructing & Consulting,Inc provides the North Courthouse & North Library District with repairs and also replace to doors, windows and locks for the entire North District Division.**

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)**  
**After speaking with Ann Rawlings, she is very confident and satisfied with the service from Constructing & Consulting,Inc. Ann Also stated that when she calls them to get something done or fixed there response is very fast and accurate.**

References Checked By  
 Name: Anthony Allen Title: Storekeeper  
 Division/Department: Port Everglades Date of Verification: 10/19/2017



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: X2112978B1, Repair or Replacement of Windows & Glass Doors  
 Reference for: (Name of Firm) Contracting & Consulting, Inc  
 Organization/Firm Name providing reference: Pompano First Baptist Church  
 Contact Name/Title: Don Wordon - Pastor  
 Contact E-mail: Don@fbcpompano.org  
 Contact Phone: 954-745-6126  
 Name of Referenced Project: Replaced Windows & Doors With Hurricane Rated  
 Contract No.  
 Contract Amount: \$134,203.80  
 Date Services Provided: 7/2015 - 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:**  
**Contracting & Consulting, Inc. is replacing all old outdated windows and doors Pompano First Baptist Church with new hurricane rated doors and windows and they are there primary vendor.**

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)**  
**After speaking with with Pastor Don Wordon, he is very confident and satisfied with the service provided from Contracting & Consulting, Inc. Also he said he has been working with them for 4 years and they always provide excellent customer service and great communication. He also stated that when they come out to do a job there work area is very neat and tidy when finished.**

References Checked By  
 Name: Anthony Allen Title: Storekeeper  
 Division/Department: Port Everglades Date of Verification: 10/19/2017



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: X2112978B1, Repair or Replacement of Windows & Glass Doors  
 Reference for: (Name of Firm) Contracting & Consulting, Inc  
 Organization/Firm Name providing reference: Private Residence  
 Contact Name/Title: Jon Antevy - Private Residence  
 Contact E-mail: Jantevy@e-buidler.net  
 Contact Phone: 954-243-8322  
 Name of Referenced Project: Replacement of Windows, Doors to hurricane rated  
 Contract No. Private Residence  
 Contract Amount: \$53,578.20  
 Date Services Provided: 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:**  
**Constructing & Consulting, Inc provides Jon who is a private resident with replacing old doors, windows for hurricane rated doors and windows for Him and his entire families houses.**

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)**  
**After speaking with Jon Antevy, he is very confident and satisfied with the service from Constructing & Consulting, LLC. Jon also stated that when he calls Chris to get something done or fixed there response is very fast and accurate.**

References Checked By  
 Name: Anthony Allen Title: Storekeeper  
 Division/Department: Port Everglades Date of Verification: 10/19/2017