



**TO:** Robert Gleason, Director  
Purchasing Division  
**FROM:** Harris Hamid, Enterprise Director  
Facilities Maintenance Division, Port Everglades Department  
**SUBJECT:** Solicitation No.: BLD2123798B1  
Fencing - New, Repair and Replacement Services

Recommended Vendor: Coast to Coast Garage Door, LLC

Recommended Group(s)/Line Item(s): 1-73

Initial Award Amount: \$ 5,904,454.00

Potential Total Amount: \$ 29,522,270.00

Initial Contract Term: One Year

Contract Term, including Renewals: Five Years

**CONCURRENCE:**

☒ The agency has reviewed Vendor's response(s) for specification compliance and Vendor responsibility, which includes license requirements (if applicable). 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 \$100,000 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, including the reference to any bid requirement.

TYPED NAME OF SIGNER: Harris Hamid  
(Individual authorized to administer the contract.)

TITLE: Director of Facilities Maintenance

SIGNATURE: HARRIS HAMID

Digitally signed by HARRIS HAMID  
Date: 2022.07.05 15:09:48 -04'00'

DATE: 7/5/22



### Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123798B1, Fencing - New, Repair and Replacement Services

Reference for (Name of Firm): Coast to Coast Garage Door, LLC

Organization/Firm Name providing reference: City of Deerfield Beach

Contact Name: Mike Pursell

Title: Parks Superintendent

Contact Email: mpursell@deerfield-beach.com

Contact Phone: (954) 410-4403

Name of Referenced Project: Citywide Gate and Fence Repairs

Contract No. ITB#2014-15/28

Contract Amount: 50,000.00

Date Services Provided: 10-12-17 through 9-30-18

(list date range or date services began until "current")

Vendor's role in Project: ☒ Prime Vendor ☐ Subconsultant/Subcontractor

Would you use this vendor again? ☒ Yes ☐ No If No, please specify in Additional Comments (below).

#### Description of services provided by Vendor:

##### Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)

He would hire them again.

##### References Checked By

Name: Leona McAndrews

Title: CGA

Division/Department: Port Everglades/Seaport Facilities Maint.

Date of Verification: 06/28/2022



## Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123798B1, Fencing - New, Repair and Replacement Services

Reference for (Name of Firm): Coast to Coast Garage Door, LLC

Organization/Firm Name providing reference: City of Lauderhill

Contact Name: Lynda Vinaccia

Title: Facilities Administrative Assistant

Contact Email: ldiaz@Lauderhill-fl.gov

Contact Phone: (954) 730-2980

Name of Referenced Project: Citywide Gate and Fencing Repairs

Contract No. 2014-15-28 (piggybacking City of Deerfield Beach cnt.)

Contract Amount: 79,000.00

Date Services Provided: 2014 - current

(list date range or date services began until "current")

Vendor's role in Project: ☒ Prime Vendor ☐ Subconsultant/Subcontractor

Would you use this vendor again? ☒ Yes ☐ No If No, please specify in Additional Comments (below).

### Description of services provided by Vendor:

#### Please rate your experience with the referenced Vendor:

Needs Improvement Satisfactory Excellent Not Applicable

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

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

Contract amount: There is no set amount. Used as needed: \$79,000 used this year.

Vendor is highly recommended. They are punctual and helpful.

#### References Checked By

Name: Leona McAndrews

Title: CGA

Division/Department: Port Everglades/Seaport Facilities Maint.

Date of Verification: 07/07/2022



## Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123798B1, Fencing - New, Repair and Replacement Services

Reference for (Name of Firm): Coast to Coast Garage Door, LLC

Organization/Firm Name providing reference: City of Sunrise

Contact Name: Gary Smith

Title: Utilities/Plant Maint. Supervisor

Contact Email: GSmith@sunrisefl.gov

Contact Phone: (954) 888-6075

Name of Referenced Project: Fence Installation and Repair Services

Contract No. 20-49-06-CM

Contract Amount: 12,000.00

Date Services Provided: October 2020 to present

(list date range or date services began until "current")

Vendor's role in Project: ☒ Prime Vendor ☐ Subconsultant/Subcontractor

Would you use this vendor again? ☒ Yes ☐ No If No, please specify in Additional Comments (below).

### Description of services provided by Vendor:

#### Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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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:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)

They have a blank Purchase Order under a contract amount of \$7005. After that, job are bid on contract pricing per project. Proposals are reviewed and approved on a case-by-case basis.

#### References Checked By

Name: Leona McAndrews

Title: CGA

Division/Department: Port Everglades/Seaport Facilities Maint.

Date of Verification: 07/07/2022