



TO: Randy Plunkett  
Purchasing Division

FROM: Richard Waskiewicz, Enterprise Director of Facilities/Maintenance *RW*  
Aviation Department

SUBJECT: Solicitation No.: BLD2123530Q1  
Building Automation System Services at FLL

Recommended Vendor: Johnson Controls, Inc.  
Recommended Group(s)/Line Item(s): Group 1  
Initial Award Amount: \$ 2,700,120.00      Potential Total Amount: \$ 5,400,240.00  
Initial Contract Term: Five Years      Contract Term, including Renewals: Ten 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 Not need for this solicitation.

**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 ContractsCentral 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 ContractsCentral.

**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: Lisette Forrest  
(Individual authorized to administer the contract.)

TITLE: Contract/Grant Administrator Senior

SIGNATURE: Lisette Forrest

Digitally signed by Lisette Forrest  
Date: 2022.03.16 13:13:00 -04'00'

DATE: 3/16/22



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123530Q1 Building Automation Systems Services at FLL

Reference for (Name of Firm): Johnson Controls, Inc.

Organization/Firm Name providing reference: City of Miami Riverside

Contact Name: Juan Oves

Title:

Contact Email: Joves@miamigov.com

Contact Phone: (786) 344-1314

Name of Referenced Project: Planned Service Agreement to maintain Site Controls

Contract No. (FY-21-22) 2108978

Contract Amount: \$ 29,136.56

Date Services Provided:

10/21 - 09/22

(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 checked="" type="checkbox"/>	<input 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:	<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 checked="" type="checkbox"/>	<input 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 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: (JUAN OVES)

Title: FACILITY MAINTENANCE MAN:

Division/Department:

Date of Verification:

Lisette Forrest, Contract/Grant Administrator, BCAD Maintenance Division

2/15/2022

Vendor Reference Verification Form – Bids and Quotes  
(Revised 1/22)



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123530Q1 Building Automation Systems Services at FLL

Reference for (Name of Firm): Johnson Controls, Inc.

Organization/Firm Name providing reference: Florida International University

Contact Name: Danny Paan Title: Director

Contact Email: paand@fiu.edu Contact Phone: (305) 348-4005

Name of Referenced Project: Planned Service Agreement to maintain Site Controls

Contract No. PO 227926 Contract Amount: \$225,000.00

Date Services Provided: 07/01/2021 through 06/30/2022

(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:

Specialized services and diagnostics to the EMS and Controls at FIU Campuses

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 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 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)

JCI is a very professional, responsive, and knowledgeable firm.

References Checked By

Name: Lisette Forrest

Title: Contract/Grants Administrator Senior

Division/Department: BCAD Maintenance Division

Date of Verification: 02/15/2022



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2123530Q1 Building Automation Systems Services at FLL

Reference for (Name of Firm): Johnson Controls, Inc.

Organization/Firm Name providing reference: MDM Hotel Group - JW Marriott Brickell

Contact Name: Urs W Lutschg

Title: Corporate Director of Engineering

Contact Email: Urs.Lutschg@mdmusa.com

Contact Phone: (305) 527-3864

Name of Referenced Project: Planned Service Agreement to maintain Site Controls

Contract No. 1-19INOQ5G

Contract Amount: \$9,998 in 1st year

Date Services Provided: since 03/01/2021

(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:

Technical support and Maintenance on the existing Metasys software and system components

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"/>	
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 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)

We will contract JOHNSON CONTROLS for the replacement of the actual Building Management System (BMS)

References Checked By

Name: Lisette Forrest

Title: Contract/Grant Administrator Senior

Division/Department: BCAD Maintenance Division

Date of Verification: 02/15/2022