



**TO:** Brenda J. Billingsley, Director  
Purchasing Division

**FROM:** Richard Waskiewicz, Director *RAW*  
Aviation Maintenance Division

**SUBJECT:** Solicitation No.: BLD2122353B1  
FLL Fire Suppression System Inspection and Maintenance Services

Recommended Vendor: NATIONAL FIRE PROTECTION, LLC

Recommended Group(s)/Line Item(s): All Groups

Initial Award Amount: \$1,005,000.10

Potential Total Amount: \$2,512,500.25

Initial Contract Term: Two Years

Contract Term, including Renewals: Five 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: Lori Vassello  
(Individual authorized to administer the contract.)

TITLE: Contract/Grant Administrator Senior

SIGNATURE:

Digitally signed by Lori Vassello  
Date: 2021.07.02 10:49:32  
-04'00'

DATE: July 2, 2021



### Vendor Reference Verification Form

Broward County Solicitation No. and Title: BLD 2122353B1 - FLL Fire Suppression Inspection & Maintenance Services

Reference for: (Name of Firm)	National Fire Protection LLC
Organization/Firm Name providing reference:	Miami Marlins
Contact Name/Title:	Jeff King - Vice President Facilities
Contact E-mail:	jking@marlins.com
Contact Phone:	305-480-1610
Name of Referenced Project:	Miami Marlins Fire Sprinkler and Suppression
Contract No.	
Contract Amount:	\$25,500 annually (current contract)
Date Services Provided:	2012 - 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:

**Fire Suppression inspection, maintenance and repair support for loanDepot park (formerly Marlins Park).**

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

**NFP has been an excellent partner.**

#### References Checked By

Name: Lori Vassello

Title: Contract Administrator

Division/Department: Aviation Maintenance

Date of Verification: May 13, 2021



### Vendor Reference Verification Form

Broward County Solicitation No. and Title: BLD 2122353B1 - FLL Fire Suppression Inspection & Maintenance Services

Reference for: (Name of Firm)	National Fire Protection LLC
Organization/Firm Name providing reference:	Miami Dade DOT
Contact Name/Title:	Ray Harding
Contact E-mail:	ray.harding@miamidade.gov
Contact Phone:	305-884-7585
Name of Referenced Project:	Miami-Dade County Fire Suppression Services
Contract No.	RTQ-00862
Contract Amount:	Total current contract for all listed vendors \$21,693,000.00
Date Services Provided:	Since 2013 NFP has been and is our primary vendor (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:

**NFP repairs all fire systems for Metro Bus, Metro Rail, and Metro Mover facilities. NFP has provided all inspections and code compliance requirements, needed to keep Transit facilities safe.**

#### 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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

#### References Checked By

Name: Lori Vassello

Title: Contract Administrator

Division/Department: Aviation Maintenance

Date of Verification: 06/08/2021



### Vendor Reference Verification Form

Broward County Solicitation No. and Title: BLD 2122353B1 - FLL Fire Suppression Inspection & Maintenance Services

Reference for: (Name of Firm) National Fire Protection LLC

Organization/Firm Name providing reference: Parsons Odebrecht

Contact Name/Title: Victor Sacasa

Contact E-mail: vsacasa@pojvbhs.com

Contact Phone: 305-837-3276

Name of Referenced Project: T042 (MDAD-15-01)

Contract No. Baggage Handling System (BHS) Improvement at Miami Airport

Contract Amount: \$3,024,394.00

Date Services Provided: 02/2017 - 12/2020

(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:

NFP was to furnish and install Fire Sprinklers System.

#### 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)

NFP was a big asset to our team in providing professional staff and by getting the work completed on time.

#### References Checked By

Name: Lori Vassello

Title: Contract Administrator

Division/Department: Aviation Maintenance

Date of Verification: June 01, 2021