TO: Robert Gleason, Director
Purchasing Division

FROM: Robert Jenkins. Manager, Port Admin. Security
Port Everglades Department

SUBJECT: Solicitation No.: BLD2130352B1
Solicitation Title: CCTV Installation, Maintenance and Repair

Recommended Vendor: 4 Best Business Corp.
Recommended Group(s)/Line Item(s): All Line Items
Initial Award Amount: $ 1,269,300.00 Potential Total Amount: $2,115,500.00
Initial Contract Term: Three Years 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 ContractsCentral 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 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: Glenn A. Wiltshire TITLE: Deputy Port Director
(Individual authorized to administer the contract.)

SIGNATURE: GLENN WILTSHIRE Digitally signed by GLENN WILTSHIRE Date: 2025.08.21 16:48:56 -04'00' DATE: 8/21/25

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2130352B1 - PEV CCTV Installation, Maintenance and Repair

Reference for (Name of Firm): 4 Best Business Corp.

Organization/Firm Name providing reference: Amkin Group

Contact Name: Juan Pablo Alfonso | Title: Senior Project Manager

Contact Email: jalfonso@amkinre.com | Contact Phone: (754) 214-0601

Name of Referenced Project: Camera Systems and Access Control

Contract No. | Contract Amount: 785,000.00

Date Services Provided: 2019 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:

Manage and maintain over 1000 CCTV cameras and associated CCTV system software.

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)

I contacted Mr Alfonso by phone 07/07/25. His responses to the verification form items were entered by Vince Tuzeo from phone interview.

References Checked By

Name: Vince Tuzeo | Title: Program/Project Coordinator

Division/Department: Port Everglades Division/Security | Date of Verification: 07/07/2025

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2130352B1 - PEV CCTV Installation, Maintenance and Repair

Reference for (Name of Firm): 4 Best Business Corp.

Organization/Firm Name providing reference: Miami Dade County Public Schools

Contact Name: Pablo Vilchez | Title: Building Security Systems Coordinator

Contact Email: pvilchez@dadeschools.net | Contact Phone: (305) 995-7802

Name of Referenced Project: CCTV and Security Systems Services

Contract No. | Contract Amount: 7,500,000.00

Date Services Provided: 2021 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	☐	☑	☐	☐
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)

See attached email response.

References Checked By

Name: Vince Tuzeo | Title: Program/Project Coordinator

Division/Department: Port Everglades Division/Security | Date of Verification: 06/18/2025

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: BLD2130352B1 - PEV CCTV Installation, Maintenance and Repair

Reference for (Name of Firm): 4 Best Business Corp.

Organization/Firm Name providing reference: JLL

Contact Name: Ingrid Vasquez | Title: Senior Vice President

Contact Email: Ingrid.vasquez@jll.com | Contact Phone: (305) 373-3400

Name of Referenced Project: Camera Systems and Access Control

Contract No. | Contract Amount: 471,000.00

Date Services Provided: 2021 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	☐	☑	☐	☐
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)

Vendor reference recieved via email 07/09/25. See attachment

References Checked By

Name: Vince Tuzeo | Title: Program/Project Coordinator

Division/Department: Port Everglades Division/Security | Date of Verification: 07/09/2025