



TO: Robert E. Gleason, Purchasing Director
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2129401B1
Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Recommended Vendor: Barney's Pumps Incorporated
Recommended Group(s)/Line Item(s): See Continuation Sheet
Initial Award Amount: \$ 524,757.00 Potential Total Amount: \$ 2,623,785.00
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 Not required 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 ≥ 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: Gary Hew
(Individual authorized to administer the contract.)

TITLE: Warehouse Supervisor

SIGNATURE: ELLIE O'CONNELL
Digitally signed by ELLIE O'CONNELL
Date: 2025.10.08 13:43:38 -04'00'
signing for Gary Hew

DATE: 10/8/25

Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Jonathan K. Allen

Director, Business Operations Division

TYPED NAME OF SIGNER:

TITLE:

SIGNATURE: Jonathan Allen

Digitally signed by Jonathan Allen
Date: 2025.10.08 15:36:06 -04'00'

DATE: 10/08/2025

Alan W. Garcia, P.E.

Director, Water and Wastewater Services

TYPED NAME OF SIGNER:

TITLE:

(Individual authorized to administer the contract.)

SIGNATURE: Alan Garcia

Digitally signed by Alan Garcia
Date: 2025.10.08 15:52:58 -04'00'

DATE:

CONTINUATION SHEET

Subject: Solicitation No.: OPN2129401B1, Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Vendor: Barney's Pumps Incorporated (Barney's)

Barney's bid response was reviewed by:

- John Wilf, Contracts/Grants Administrator
- Gary Hew, Warehouse Supervisor
- Water and Wastewater Operation Division (WWOD):
 - Clive Haynes, Assistant Director Operations
 - Ronald Dingess, Jr., Supervisor Skilled Trades
 - Ihosvanny Montero, Maintenance Manager
 - Gary DeVitto, Utilities Superintendent
- Technical Standard Committee (TSC):
 - Michael Hagerty, Supervisor Engineering Unit
 - George Lopez, Construction Project Manager
 - George Serbanescu, Construction Project Manager
 - William Archebelle, Expansion Project Administrator

Water and Wastewater Services, Business Operations Division, recommends the award of the following group(s). The review was performed by technical staff on 10/01/2025.

Bid Table (Group 1 – 20) (BT-09PW)	
Group(s)	2, 4, 5, 8, 9, 11, and 14

Bid Table (Group 21) (BT-05UW)	
Group:	21

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): Barney's Pumps, Inc.

Organization/Firm Name providing reference: City of Boca Raton

Contact Name: Lisa Wilson-Davis

Title: Operations & Regulatory Compliance Manager

Contact Email: lwilsondavis@myboca.us

Contact Phone: (561) 338-7310

Name of Referenced Project: N/A

Contract No. N/A

Contract Amount: 250,000.00

Date Services Provided: Purchasing pumps, parts, and repair service since before 2011 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:

Vendor provides Homa pumps, parts and repair services.

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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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)

We currently purchase pumps and parts and use Barney's for Homa pump repair services on an as needed basis. Our annual expenditure varies between \$100,000.00 and \$250,000.00 - no contracted amount.

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 08/06/2025

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): Barney's Pumps, Inc.

Organization/Firm Name providing reference: City of Ft. Lauderdale

Contact Name: Lenny Rodriguez

Title: Public Works Maintenance Supervisor

Contact Email: lrodriquez@fortlauderdale.org

Contact Phone: (954) 828-7775

Name of Referenced Project: Homa Pumps

Contract No.

Contract Amount: 390,000.00

Date Services Provided: 01/2007 until 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:

Vendor provides Homa pumps.

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

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/15/2025

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: OPN2129401B1 - Submersible Lift Station Pumps, Parts, and Installation/Rep

Reference for (Name of Firm): Barney Pumps Incorporated

Organization/Firm Name providing reference: Martin County Utilities

Contact Name: Johann Lopez

Title: Lift Station Supervisor

Contact Email: jlopez@martin.fl.us

Contact Phone: (772) 221-2310

Name of Referenced Project: Supply Homa Submersible Lift Station Pumps and Parts

Contract No.

Contract Amount: 250,000.00

Date Services Provided: 01/20212 to 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:

Provide submersible lift station pumps and parts.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/18/2025



TO: Robert E. Gleason, Purchasing Director
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2129401B1
Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Recommended Vendor: FJ Nugent and Associates Inc.

Recommended Group(s)/Line Item(s): See Continuation Sheet

Initial Award Amount: \$ 421,030.00

Potential Total Amount: \$ 2,105,150.00

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 Not required 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 ≥ 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: Gary Hew
(Individual authorized to administer the contract.)

TITLE: Warehouse Supervisor

SIGNATURE: ELLIE O'CONNELL
Digitally signed by ELLIE O'CONNELL
Date: 2025.10.08 14:50:46 -04'00'
signing for Gary Hew

DATE: 10/8/25

Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Jonathan K. Allen

Director, Business Operations Division

TYPED NAME OF SIGNER:

TITLE:

SIGNATURE: Jonathan Allen

Digitally signed by Jonathan Allen
Date: 2025.10.08 15:33:33 -04'00'

DATE: 10/08/2025

Alan W. Garcia, P.E.

Director, Water and Wastewater Services

TYPED NAME OF SIGNER:

TITLE:

(Individual authorized to administer the contract.)

SIGNATURE: Alan Garcia

Digitally signed by Alan Garcia
Date: 2025.10.08 16:04:57 -04'00'

DATE:

CONTINUATION SHEET

Subject: Solicitation No.: OPN2129401B1, Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Vendor: F.J. Nugent & Associates Inc. (F.J. Nugent)

F.J. Nugent's bid response was reviewed by:

- John Wilf, Contracts/Grants Administrator
- Gary Hew, Warehouse Supervisor
- Water and Wastewater Operation Division (WWOD):
 - Clive Haynes, Assistant Director Operations
 - Ronald Dingess, Jr., Supervisor Skilled Trades
 - Ihosvanny Montero, Maintenance Manager
 - Gary DeVitto, Utilities Superintendent
- Technical Standard Committee (TSC):
 - Michael Hagerty, Supervisor Engineering Unit
 - George Lopez, Construction Project Manager
 - George Serbanescu, Construction Project Manager
 - William Archebelle, Expansion Project Administrator

Water and Wastewater Services, Business Operations Division, recommends the award of the following group(s). The review was performed by technical staff on 10/01/2025.

Bid Table (Group 1 – 20) (BT-09PW)	
Group(s)	3, 6, 7, 15, 16, 17, and 20

Bid Table (Group 21) (BT-05UW)	
Group:	21

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): FJ Nugent and Associates Inc.

Organization/Firm Name providing reference: City of Punta Gorda

Contact Name: Bobby Legg

Title: Utility Supervisor

Contact Email: blegg@cityofpuntagordafl.com

Contact Phone: (941) 575-5047

Name of Referenced Project: Supply Pumps, Parts, and Repairs

Contract No. 2017-135

Contract Amount: 167,500.00

Date Services Provided: 12-01-2018 - 05-31-2025

(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:

Vendor provides pumps, parts and repair services

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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)

FJ Nugent has provided pumps along with other equipment and materials to the City of Punta Gorda for several years. We are currently in the process of renewing the contract. His dependability and knowledge is outstanding.

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 07/29/2025

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): FJ Nugent and Associates Inc.

Organization/Firm Name providing reference: City of Pompano Beach

Contact Name: Bobby Clayton

Title: Sewer Pumping Station Manager

Contact Email: Bobby.Clayton@copbfl.com

Contact Phone: (954) 786-4154

Name of Referenced Project: Supply Pumps, Parts, and Repairs

Contract No. NA

Contract Amount: 200,000.00

Date Services Provided: 07/1995 until 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:

Vendor provides pumps, parts and repair services

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 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)

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/03/2025

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: OPN2129401B1 - Submersible Lift Station Pumps, Parts, and Installation/Repairs

Reference for (Name of Firm): FJ Nugent and Associates Inc.

Organization/Firm Name providing reference: City of Ocala

Contact Name: Luis D. Acosta

Title: Chief of Equipment Maintenance

Contact Email: lacosta@ocalafl.gov

Contact Phone: (352) 572-0421

Name of Referenced Project:

Contract No.

Contract Amount: 410,000.00

Date Services Provided: 1996 until 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:

Supply pumps, parts, and repairs.

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 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)

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/11/2025



TO: Robert E. Gleason, Purchasing Director
Purchasing Division
FROM: Alan W. Garcia, P.E., Director
Water and Wastewater Services
SUBJECT: Solicitation No.: OPN2129401B1
Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Recommended Vendor: Tom Evans Environmental Inc.

Recommended Group(s)/Line Item(s): See Continuation Sheet

Initial Award Amount: \$ 1,012,345.79

Potential Total Amount: \$ 5,061,728.95

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 Not required 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 ≥ 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: Gary Hew
(Individual authorized to administer the contract.)

TITLE: Warehouse Supervisor

SIGNATURE: ELLIE O'CONNELL
Digitally signed by ELLIE O'CONNELL
Date: 2025.10.08 14:55:23 -04'00'
signing for Gary Hew

DATE: 10/8/25

Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Jonathan K. Allen

Director, Business Operations Division

TYPED NAME OF SIGNER:

TITLE:

SIGNATURE: Jonathan Allen

Digitally signed by Jonathan Allen
Date: 2025.10.08 15:31:19 -04'00'

DATE: 10/08/2025

Alan W. Garcia, P.E.

Director, Water and Wastewater Services

TYPED NAME OF SIGNER:

TITLE:

(Individual authorized to administer the contract.)

SIGNATURE: Alan Garcia

Digitally signed by Alan Garcia
Date: 2025.10.08 16:08:56 -04'00'

DATE:

CONTINUATION SHEET

Subject: Solicitation No.: OPN2129401B1, Submersible Lift Station Pumps, Parts, and Installation/Removal Services

Vendor: Tom Evans Environmental Inc. (Tom Evans)

Tom Evan's bid response was reviewed by:

- John Wilf, Contracts/Grants Administrator
- Gary Hew, Warehouse Supervisor
- Water and Wastewater Operation Division (WWOD):
 - Clive Haynes, Assistant Director Operations
 - Ronald Dingess, Jr., Supervisor Skilled Trades
 - Ihosvanny Montero, Maintenance Manager
 - Gary DeVitto, Utilities Superintendent
- Technical Standard Committee (TSC):
 - Michael Hagerty, Supervisor Engineering Unit
 - George Lopez, Construction Project Manager
 - George Serbanescu, Construction Project Manager
 - William Archebelle, Expansion Project Administrator

Water and Wastewater Services, Business Operations Division, recommends the award of the following group(s). The review was performed by technical staff on 10/01/2025.

Bid Table (Group 1 – 20) (BT-09PW)	
Group(s)	1, 10, 12, 13, 18, 19, and 20

Bid Table (Group 21) (BT-05UW)	
Group:	21

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): Tom Evans Environmental, Inc.

Organization/Firm Name providing reference: Comtech Engineering

Contact Name: Jose Sierra

Title: President

Contact Email: jsierra@comtecheng.com

Contact Phone: (305) 772-9007

Name of Referenced Project: Various Miami-Dade Projects

Contract No. PS414, PS416, PS417 Miccosukee Tribe

Contract Amount: 3,300,000.00

Date Services Provided: 2017 and 2020

(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:

Vendor provided Morris pumps, VFD's and controls.

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 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)

Best Vendor I've used in 25 years. Excellent service, backs up product, knowledge is outstanding. Goes out of his way to serve.

References Checked By

Name: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 08/11/2025

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): Tom Evans Environmental, Inc.

Organization/Firm Name providing reference: City of Pompano Beach

Contact Name: Bobby Clayton

Title: Wastewater Pumping Manager

Contact Email: bobby.clayton@copbfl.com

Contact Phone: (954) 786-4154

Name of Referenced Project: Pump Equipment

Contract No. NA

Contract Amount: 700,000.00

Date Services Provided: 5/2005 until 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:

Vendor provided pump equipment.

Please rate your experience with the referenced Vendor:

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

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/03/2025

Vendor Reference Verification Form for Bids and Quotes

OPN2129401B1 Submersible Lift Station Pumps, Parts, and
Broward County Solicitation No. and Title: Installation/Removal Services

Reference for (Name of Firm): Tom Evans Environmental, Inc.

Organization/Firm Name providing reference: City of Cape Coral

Contact Name: Tim Festa

Title: Utilities Maintenance Supervisor

Contact Email: tfesta@capecoral.gov

Contact Phone: (239) 574-0826

Name of Referenced Project: Pump Equipment

Contract No. NA

Contract Amount: 300,000.00

Date Services Provided: 2021 until 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:

Vendor provided pump equipment.

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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: John Wilf

Title: Contracts/Grants Administrator

Division/Department: Water and Wastewater Services

Date of Verification: 09/15/2025