TO: Robert Gleason, Director
Purchasing Division

FROM: John Foglesong JOHN FOGLESONG Digitally signed by JOHN FOGLESONG Date: 2023.04.19 08:01:21 -04'00'
Seaport Engineering & Construction Division, Port Everglades Department

SUBJECT: Solicitation No.: PNC2125521B1
Unidirectional Flushing Program for Port Everglades

Recommended Vendor: Madsen-Barr Corporation
Recommended Group(s)/Line Item(s): all
Initial Award Amount: $ 187,125.00 Potential Total Amount: $ 561,375.00
Initial Contract Term: One Year Contract Term, including Renewals: Three 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 ≥ 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 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: Patrick Maglietta TITLE: Construction P.M.
(Individual authorized to administer the contract.)

SIGNATURE: Patrick Maglietta DATE: 03/14/2023

BROWARD COUNTY FLORIDA

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: PNC2125521B1 Unidirectional Flushing Program for Port Everglades

Reference for (Name of Firm): Madsen-Barr Corporation

Organization/Firm Name providing reference: City of Boca Raton

Contact Name: Ms. Lisa Wilson-Davis | Title: Manager

Contact Email: lwilsondavis@myboca.us | Contact Phone: (561) 338-7310

Name of Referenced Project: Water, Line Stops Services

Contract No. 2022-020 | Contract Amount: 2,999,983.00

Date Services Provided: November 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:

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)

No

References Checked By

Name: Patrick Maglietta | Title: Construction Project Manager

Division/Department: Seaport Engineering | Date of Verification: 03/13/2023

BROWARD COUNTY FLORIDA

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: PNC2125521B1 Unidirectional Flushing Program for Port Everglades

Reference for (Name of Firm): Madsen-Barr Corporation

Organization/Firm Name providing reference: City of Boynton Beach

Contact Name: Mr. Tremaine Johnson Title: Operations Mang.

Contact Email: johnsontr@bbfl.us Contact Phone: (561) 742-6476

Name of Referenced Project: Water, Sewer and Drainage Services

Contract No. #019-2821-19/IT Contract Amount: 3,467,754.00

Date Services Provided: May 2019 - May, 2024

(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)

No

References Checked By

Name: Patrick Maglietta Title: Construction Project Manager

Division/Department: Seaport Engineering Date of Verification: 03/13/2023

BROWARD COUNTY FLORIDA

Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: PNC2125521B1 Unidirectional Flushing Program for Port Everglades

Reference for (Name of Firm): Madsen-Barr Corporation

Organization/Firm Name providing reference: City of Coconut Creek

Contact Name: Mr. Chad Hancock Title: Superintendent

Contact Email: jdupuis@coconutcreek.net Contact Phone: (954) 956-1489

Name of Referenced Project: Water and Sewer Services

Contract No. #02-21-18-11 Contract Amount: 1,999,739.22

Date Services Provided: May 2018 - May, 2023

(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)

No

References Checked By

Name: Patrick Maglietta Title: Construction Project Manager

Division/Department: Seaport Engineering Date of Verification: 03/13/2023