



GROWERS | FOODIES | MAKERS

CITY OF KEY WEST

RFP #006-21

Submitted by Jill Snodgrass/Daily Plan-it

# FARMERS MARKET RFP 006-21

## About Us:

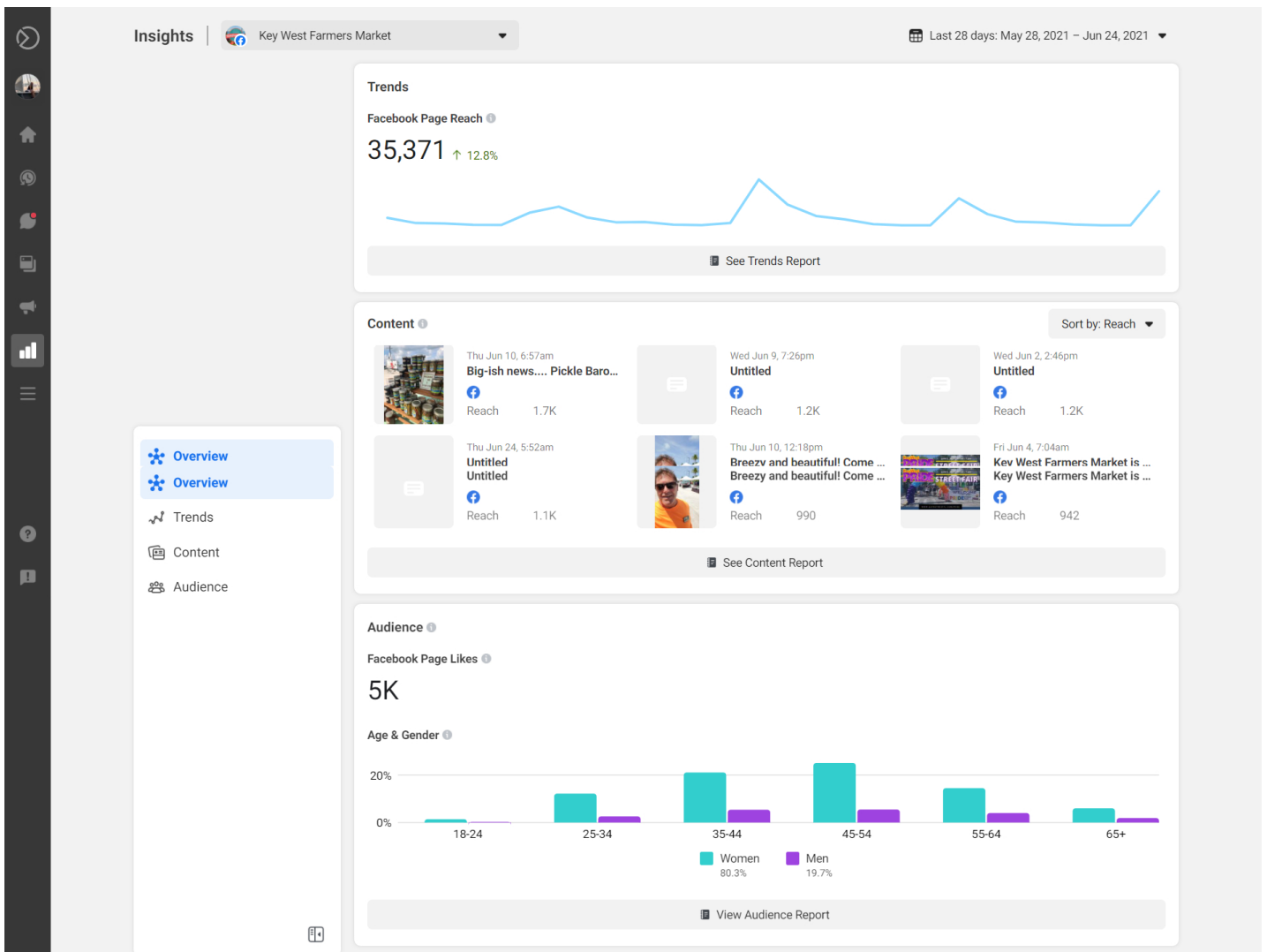
Daily Plan-it is a full-service special event company specializing in outdoor festivals and vendor events. We have been in business since 1989 and operating in the Florida Keys since 2014. We designed and developed the seasonal Key West Artisan Market which successfully moved to Higgs Beach under contract with Monroe County and in 2019 moved to Indigenous Park under contract with the City of Key West. We contracted to produce the Pigeon Key Art Festival, Florida Keys Commercial Fisherman's Seafood Festival, the I Love Stock Island Festival, Power Boat Races Vendor Village and PrideFest Street Fair among other events. Previously we split time between Key West and Missouri where since 2003 Daily Plan-it coordinated the state's 4th of July celebration, Salute to America, featuring national bands and six entertainment stages, twenty city blocks of themed areas, 200+ vendors, parade, carnival, contests and a completely sponsorship-driven, million dollar budget for a three day spectacle that attracts more than 70,000 visitors a year. Now we are full-time Monroe County residents completely dedicated to events taking place in our community.

In August 2019 Daily Plan-it was granted a permit by the City of Key West to produce a farmer's market at the Truman Waterfront Park subsequent to the Green Market at Bayview Park ceasing operations. We have since operated 90 weeks successfully recruiting between 30 and as many as 70 vendors per show. The Market is an excellent opportunity to showcase the beautiful Waterfront and each week between 1000 and 2200 guests attend.

## Overview of plan for the KW Farmers Market

- Event Name:* Key West Truman Waterfront Farmers Market
- Event Purpose:* To provide a green and sustainable alternative by linking South Florida farms and vendors of locally produced food and products to the Key West and Stock Island community.
- Event Location:* Truman Waterfront either on the Quay near the Ingham
- Event Dates:* Every Thursday, year-round. Operating hours 2 or 3 pm until sunset (depending on sunset times).
- Utilities needed:* n/a
- Proposed Use:* An outdoor farmers market including produce, cheese, plants, meats, bakery items, food-to-go and merchandise. Also accepting SNAP benefits to further serve the community in cooperation with SOS Foundation
- Details:* Vendors set up tents at the back of their vehicles to better facilitate loading in and out and operating. Each space is approximately 35' deep and have 10' of frontage.
- Costs:* Usage fee: \$50.00 per hour or \$300 per week for up to 20 vendors. Additional vendors will be \$15.00 each per week. Vendor fees must be paid to the market promoter and the market promoter will submit a check no later than the 15<sup>th</sup> day of the following month to the CITY.

# Daily Plan-it owns the Key West Farmer's Market Facebook Page



**Buy the Way SUPPORT LOCAL**

**Shop with Locals**

**SUPPORT LOCAL**  
Florida Keys & Key West

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**KEY WEST FARMERS MARKET**

Join us every Thursday from 3 pm to sunset (about 8 pm) at the Truman Waterfront for fresh produce grown in Homestead, gorgeous orchids & native plants, artisan selection of meats and cheeses, pickles, honey, nuts & dried fruits, natural soaps and so much more. You'll find Key West crafts, gifts and the perfect souvenir to take home. There's lots of parking (free with your resident sticker), bike racks or take the FREE Duval Loop which conveniently stops close to the market. We hope to see you so we GROW LOCAL at the Key West Farmers Market, Thursdays at the Truman Waterfront. [\[MORE\]](#)

[VENDOR APPLICATION](#)

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**KEY WEST ARTISAN MARKET**

Key West Artisan Market select Sundays in season (November to April) from 10 am to 2 pm at Higgs Beach in the parking lot at the Key West Wildlife Center. Local artisans include culinary, textile, jewelry, wood, artists & crafters, curiosities, Local Author's Nook, 104.9 The X, Key West live variety show, fresh produce and lots of great, fresh food. Each week is a different theme focused on island living and local charities. Guests are encouraged to go green and ride bikes. Ample free parking and market handicapped spots at the park. Please BYOB (bring your own bags).

[VENDOR APPLICATION](#)

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**CONTACT US**

Key West, Florida  
305.733.5385  
sean@dailypian-it.net

**FOLLOW US**

Visit our social profiles for regular tweets and posts

[G+](#) [Twitter](#) [Facebook](#) [Instagram](#)

The Florida Keys & Key West  
come as you see™

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**VENDOR APPLICATION**

**TRUMAN Waterfront Market KEY WEST**  
the heck steps here!

**WATERFRONT MARKET VENDORS**

**FARMERS MARKET Thursdays 3 PM - SUNSET**

**TRUMAN WATERFRONT**

- Parking \$4/line with resident sticker
- Boat lift - Complimentary
- Skatepark & playground are FREE
- Beach, water, coffee, smoothies, fresh juice
- Salsitas & appetizers from around the world!

**FAQ**

**When is the Farmers Market?**  
Every Thursday, 3 pm to sunset, rain or shine (about 8 pm) at the Truman Waterfront. The Market will continue as long as there is any remaining sunset.

**Who should go?**  
The Truman Waterfront Farmers Market is for locals and visitors alike. Residents will find quality items to stock the fridge and pantry, gifts and home decor to brighten their lives. Visitors will find unique items to bring home. Local vendors will be showcasing their wares, including food, produce and arts and crafts.

**What does the market look like?**  
At the Truman Waterfront, east of Duval Street. Look for signs on the Quay by the USCGC Higham on the waterfront.

**What does it cost?**  
There is a charge, \$4 per vehicle, to the market with plenty of parking (handicapped spots and bike racks).

**What time should I arrive?**  
The market opens at 3 pm. Rates are \$4/hour or free for up to 15 minutes with a resident sticker. Handicapped spots are always free and available.

**Can I take a dog?**  
The Truman Waterfront is a pet-friendly market. Dogs are welcome on the Truman Waterfront. Check out our [Dog Rules](#) for more info.

**What kind of market?**  
Every week we'll feature a different theme including produce, seafood, meats, cheese, pickles, honey, natural soaps, fresh breads, hot sauce and more. There are food trucks and food trucks. Artists, crafters, the farmer's market, jewelry, clothing items, local businesses, open-air food, a fun-filled group of vendors and more. We'll have a lot of fun and a great time.

**What else is there to do at the park?**  
The Truman Waterfront is a fun-filled market. There are many things to do at the park. Check out our [Activities](#) for more info.

**What kind of food should I expect?**  
The Truman Waterfront is a fun-filled market. There are many things to do at the park. Check out our [Activities](#) for more info.

**Can I bring my dog?**  
The Truman Waterfront is a pet-friendly market. Dogs are welcome on the Truman Waterfront. Check out our [Dog Rules](#) for more info.

**When are we open?**  
The Truman Waterfront is a fun-filled market. There are many things to do at the park. Check out our [Activities](#) for more info.

**Can we have a picnic?**  
The Truman Waterfront is a fun-filled market. There are many things to do at the park. Check out our [Activities](#) for more info.

**Other events to buy local**

**CONTACT US**

Key West, Florida  
305.733.5385  
sean@dailypian-it.net

**FOLLOW US**

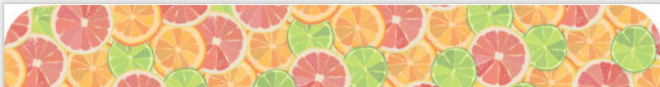
Visit our social profiles for regular tweets and posts

[G+](#) [Twitter](#) [Facebook](#) [Instagram](#)

The Florida Keys & Key West  
come as you see™

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# Daily Plan-it owns the Key West Markets Registration Site



## Truman Waterfront Market Registration

### What...

Approximately Four hour Vending in beautiful Truman Waterfront Park

**Who...** Produce vendors, cooked-to-order and take-away culinary vendors, crafters, artists, merchandise purveyors, non-profits and exhibitors. Full bar and occasional live music.

### When...

Weekly on Thursdays

Set up: 12:00 pm to 1:00 pm  
Show Hours: 2:00 pm til 7:00 pm  
Breakdown: Sunset + one hour

### Where...

Truman Waterfront Park  
At the western end of Southard Street  
Key West, FL 33040

### Please note:

- Each booth space is 10x10, more than one space may be purchased. Food Truck space is as needed
- There is **NO** electricity available, use of quiet inverter type generators is also permitted (less than 55 dBA)
- There is **NO** water available onsite
- All participants are responsible for trash removal; if you generate it, you must provide a trash/recycling can AND remove it
- NO** single use plastic is allowed per City ordinance. This includes plastic utensils, plastic shopping bags, plastic lids, plastic beverage bottles, Styrofoam, plastic take-out containers and plastic straws to name a few. All plastics include, but are not limited to: plastic, bioplastic, corn plastic, sugar cane plastic, plant plastic, polystyrene, polymers, biopolymers, bio-derived and bio-based plastics.

Most accidents at events involve tent canopies. It is your responsibility to minimize the risk.

There are two general rules regarding canopies which all participants need to remember:

- Your canopy shall be fully secured before setting up anything else.
- Be sure that your method of securing your canopy to the ground does not create an additional hazard. Use approved straps to secure canopy weights. There is no staking.
- Due to the potential wind at this venue, each tent leg must have 40 lbs of weight either by sandbags, PVC pipe, dumbbells or water buckets.

### Insurance:

All participants must have liability insurance and present proof before setup.

If you need insurance, check out these links:

Food Vendors try: [Food Liability Insurance Program](#)

Artists/Crafters try: [Artist Crafters and Tradesman Insurance](#)

This company covers food and merch booths: [Shahinian Insurance](#)

\*\*\* There will be **NO** exclusive vendors and no limits to what may be sold within legal requirements. TWM reserves the right to offer exclusive rights to certain types of products in the future \*\*\*

### SARS-CoVID-19 additional rules:

- Take your temperature before you leave in the morning to set up. If you have ANY symptoms, please stay home. For the safety of guests and fellow vendors you will NOT be permitted to set up.
- Please report any fellow vendor not adhering to the participation rules. It is for everyone's safety including yours and mine!
- We are back to a modified original location on the mole so that everyone can park behind their booth. Spaces are now preassigned per the market managers discretion. There is 6' of additional space between booths.

### NEW Participation Rules

- You **MUST** have adequate hand sanitizer, Clorox wipes, disinfectant spray etc. in your booth to proactively wipe down and clean all the things your customers touch. Spray will be available at the market for purchase.
- You **MUST** wear protective gloves when dealing with food. This includes when you are setting up your displays (produce, fruit, bread, condiments, etc). **DO NOT REUSE GLOVES AFTER TOUCHING CONTAMINATED SURFACES OR MONEY OR PRODUCE**
- You must wear a facemask at all times unless you are in your vehicle.
- As additional precaution, ALL SAMPLING must be approved by the Market Manager.
- Use hand sanitizer after handling your phone/credit card swiper, money and credit cards and or wear sanitary gloves.
- Remember not to touch your face after dealing with customers. Follow simple CDC rules for washing hands
- Discourage customers from fondling the merchandise. Design your booth appropriately and post signage that says such. Allow the customer to 'point' at what they wish and the merchant should do the bagging.
- Ensure customers are maintaining the 6 foot social distancing guidelines and wearing masks. If Code Enforcement catches a customer in noncompliance shopping at your booth YOU will face a \$500 fine along with the Market.
- Organizers will be limiting the amount of attendees within the market area at any given time.
- If you have a customer who is exhibiting COVID 19 type symptoms, notify the market managers.

### Payment per show Booth Space

Payment is due at the show before you set up, cash or check only.

If you've already filled this out, you don't need to do it again

### Sign me up! \*

- I'll be a regular (every show)
- I'll show up occasionally

### Booth Size Requested (pay at setup) \*

- 10x10
- 20x10
- 30x10

### Name \*

First Last

### Category \*

- Art
- Community
- Craft
- Cosmetics
- Culinary
- Health
- Jewelry
- Other
- Photography
- Textile
- Wood

### Booth Name \*

### Specific \*

Ex: Produce, Cheese, Clothing |

Maximum of 8 words. Currently Used: 0 words.

### Brief Marketing Description \*

Ex: Fresh guacamole made to order

Maximum of 25 words. Currently Used: 0 words.

### Email \*

### Mobile Number \*

-  -   
### ### ####

### Address \*

Street Address

Address Line 2

City State / Province / Region

Postal / Zip Code Country

### Type of Set-up \*

- Tent
- Trailer
- Other

### Website URL

### Facebook Page URL

### Instagram Tag

### Notes for the Committee

# Star of the Sea Foundation, Inc.



dba/ Star of the Sea Outreach Mission

5640 Maloney Ave.

Key West, FL. 33040

(305) 292-3013 Fax (305) 292-3014

[www.sosmission.org](http://www.sosmission.org)

June 25, 2021

To: City of Key West

RE: RFP 006-21

SOS has established a partnership with Daily Plan-it dba Key West Truman Waterfront Farmers Market securing approval by the United States Department of Agriculture to provide SNAP benefits to patrons of the Market. This approval was granted by the USDA May 10, 2021 and we began accepting SNAP at the Market on June 10th. With local food insecurities identified as an issue for many Key West residents, the addition to accept SNAP benefits at the Market allows additional access to fresh foods. The SNAP benefits can only be used for food and for plants and seeds to grow food for the household to eat. Qualified Market vendors include booths selling cheese, seafood, coffee, vegetables, fruits, jellies/jams/honey, pickles, packaged sauces, beef and more.

We are also working together to secure a 3-year grant to be awarded in September 2021 that will provide marketing support for the program, an onsite manager, signage and other benefits. This will enhance the reach of the program. Daily Plan-it's professionalism, longevity in managing Markets and stellar reputation with both the vendors and consumers is instrumental to receiving this funding.

We fully support and recommend Daily Plan-it as the entity to manage the weekly Farmers Market and encourage the City of Key West in awarding them the three year contract.

Sincerely,

Thomas M. Callahan

Executive Director

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE 1-800-435-7352 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

a 501(c) (3) public charity





Thomas M Callahan, FMPP Project Director  
SOS Foundation  
5640 Maloney Ave.  
Key West FL 33040

Dear Tom,

I have been working with SOS foundation for a number of years now and very much support their efforts providing healthier nutrition for our community.

As the current licensee for the Truman Waterfront Farmers Market we support SOS's application for a farmers market promotion program grant farmers Market promotion program Grant as the liaison with our vendors and with promotional activities to attract more customers to the market.

We will also provide SOS complementary space at the entrance to our market to facilitate SNAP registration and support their efforts to expand snap EBT acceptance by eligible vendors at the market.

We will work with SOS to utilize FMPP support to help staff and promote the Truman waterfront Farmers market.

Sincerely,

A handwritten signature in blue ink that reads 'Jill Snodgrass'. The signature is fluid and cursive.

Jill Snodgrass  
licensee/Owner



U.S. Department of Agriculture - Food and Nutrition Service

**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM PERMIT**

**FNS NUMBER: 0756236**

**Authorization Effective Date: 05/10/2021**

**Store Name:** Key West Truman Waterfront  
Farmers Market

**Location Address:** 21 East Quay Rd.  
Attn Jill Snodgrass  
Key West, FL 33040

**Mailing Address:** 21 East Quay Rd.  
Attn Jill Snodgrass  
Key West, FL 33040

**Owner/Officer Name(s):** Thomas M Callahan

This permit certifies that the owner(s)/officer(s) and business location listed above are hereby granted approval to accept and redeem Supplemental Nutrition Assistance Program (SNAP) benefits on the condition that the acceptance and redemption of all SNAP benefits shall be in accordance with the rules and regulations governing the SNAP.

**THIS PERMIT IS VALID ONLY FOR THE OWNER(S)/OFFICER(S) LISTED AND OPERATING AT THE LOCATION ABOVE**

Any changes in the ownership, location, or name of business, and/or civil or criminal conviction of the owner(s)/officer(s) or loss of other business licenses due to violations may void this permit. **FAILURE TO REPORT SUCH CHANGES IMMEDIATELY TO USDA MAY RESULT IN SUBSTANTIAL FINES AND ADMINISTRATIVE SANCTIONS.** Call 1-877-823-4369 to report changes.

Keep this permit for your records; **do not post** it in the store. If the store moves, is sold/closed or wishes to voluntarily withdraw from SNAP, contact USDA at 1-877-823-4369.

Date of Issue: 05/10/2021



# Key West Farmers Market Regular Vendors

Daily Plan-it has a list of just over 300 individual vendors who have participated in the Key West Truman Waterfront Farmers Market in the two years we have been producing this show. The following list is our 'regular' vendors who show up week-to-week and are committed to a Thursday Key West Market

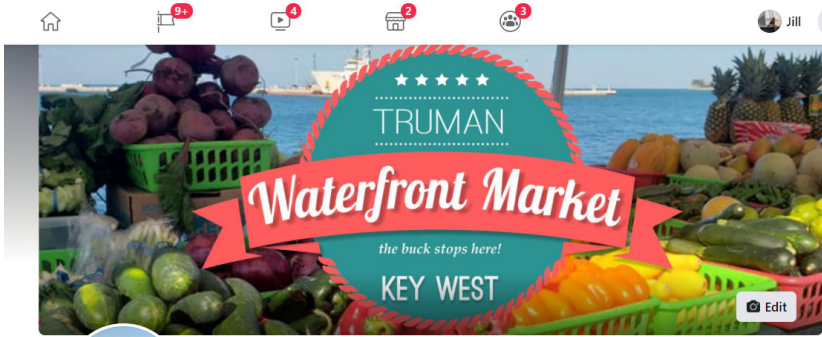
1. Art: Key West Island Art
2. Art: Lucy Hawk Art
3. Art: Metal Art Décor
4. Art: Salty Grotto
5. Art: Whimsy Key West
6. Art: YUZ
7. Community: Keys Youth Action Network
8. Community: Reef Relief
9. Community: SNAP Benefits
10. Craft: El baratillo
11. Craft: Golden Garden Design
12. Craft: May Fish Spinners
13. Craft: Washed Ashore
14. Culinary: Adult Slushy Co.
15. Culinary: Amazing Rolls
16. Culinary: El Taquito Placero
17. Culinary: European Bakery
18. Culinary: Hey Jerky!
19. Culinary: Islamorada Coffee Roasters
20. Culinary: Key West Italian Ice Co.
21. Culinary: Key West Spice
22. Culinary: Las 2 olas
23. Culinary: Mediterranean Delight, LLC
24. Culinary: Mel's Desserts
25. Culinary: Moe's Place
26. Culinary: Mundy the Pirate Seafood
27. Culinary: Nisha's Flavors of India
28. Culinary: Paradise Honey
29. Culinary: Pickle Baron
30. Culinary: Samosa Mama
31. Culinary: Simply Salty Baking
32. Culinary: The Cheese Lovers
33. Culinary: The French Pastry and Bakery
34. Farm Stand: Benny's Produce
35. Farm Stand: Juanchi Produce
36. Health: Authentic High Country Hemp
37. Health: Judithsmarket
38. Health: Nutrution Inc
39. Health: Waggin Meals
40. Health: Your CBD Store of Key West
41. Jewelry: Conch Smiles Jewelry
42. Jewelry: Island Girl Designs
43. Jewelry: Kalma Therap Jewelry
44. Jewelry: MoonchildsObsession
45. Jewelry: Namasteheart
46. Jewelry: The Ottoman Collection LLC
47. Other: Blackout Island
48. Other: CornerOnCards.net
49. Other: The Three Plant Ladies
50. Textile: Apuhemp
51. Textile: Pera Collection
52. Textile: The Bamboo Clothing Company
53. Textile: Tubazaar

# Key West Farmers Market Summer Vendors

The following list is our vendors who are committed to the slower summer Thursday Key West Market

Art: Metal Art Décor	Culinary: Adult Slushy Co.	Jewelry: Earthy Earth LLC
Art: YUZ	Culinary: Samosa Mama	Jewelry: Beautifully Broken
Art: Key West Island Art	Culinary: The Cheese Lovers	Other: The Three Plant Ladies
Art: Lucy Hawk Art	Culinary: Islamorada Coffee	Other: Las 2 Olas
Art: Whimsy Key West	Roasters	Other: CornerOnCards.net
Art: Jellyfish Daydreams Art	Culinary: Hey Jerky!	Other: Island Time Cigars
Art: Salty Grotto	Culinary: Mel's Desserts	Other: Key Largo Adirondack
Art: Angie's Seaglass Creations	Culinary: The French Pastry and	Other: Blackout Island
Art: BADASSCREATIONSOFFKEYWEST	Bakery	Other: 305 Beach vibes
Art: CST GALLERY ART	Culinary: Paradise Honey	Other: CortiçAmor
Art: Hand Picked In The Florida Keys	Culinary: The Ark of Microgreens	Other: Osowaw Stockyards
Community: SNAP Benefits	Culinary: Simply Salty Baking	Other: Yahman's
Community: Reef Relief	Culinary: Pickle Baron	Textile: Pera Collection
Community: Keys Youth Action	Culinary: Key West Italian Ice Co.	Textile: Apuhemp
Network	Culinary: Uncle Popper Kettle Corn	Textile: Tubazaar
Cosmetics: Keyfillery	Culinary: Portier's World Famous	Textile: The Bamboo Clothing Co
Cosmetics: Bella Luna	Culinary: In a Pickle	Textile: Cocky Key West
Craft: May Fish Spinners	Farm Stand: Benny's Produce	Textile: Paz y Luna
Craft: Golden Garden Design	Farm Stand: Juanchi Produce	Textile: Cooper Esposito
Craft: El baratillo	Health: Nutrution Inc	Textile: DotDotSmileJamiePearson
Craft: Florida Key Ventures	Health: Authentic High Country	Textile: Sea Gypsy
Craft: Key West Shell Cart	Hemp	Textile: Calbini Natural Clothing
Craft: Washed Ashore	Health: Judithsmarket	Wood: Señor Wood
Craft: Moana and Kai	Health: Waggin Meals	
Craft: Ocean Envy	Health: Your CBD Store of Key West	
Culinary: Mundy the Pirate Seafood	Health: Brazilian Tape Tan	
Culinary: Mediterranean Delight, LLC	Jewelry: Namasteheart	
Culinary: Moe's Place	Jewelry: MoonchildsObsession	
Culinary: European Bakery	Jewelry: Conch Smiles Jewelry	
Culinary: El Taquito Placero	Jewelry: The Ottoman Collection	
Culinary: Amazing Rolls	Jewelry: Gurucat	
Culinary: Nisha's Flavors of India	Jewelry: Island Girl Designs	
Culinary: Key West Spice	Jewelry: Kalma Therap Jewelry	

# Positive Reviews



**Key West Farmers Market**  
@kwfarmersmarket · Farmers Market

Edit Sign Up

Home **Reviews** Videos Photos More ▾

Promote 🔍 ⋮

## Recommendations & Reviews

★ **5 out of 5** <sup>1</sup>  
Based on the opinion of 21 people

### Have Feedback About Your Business' Reviews Experience?

We've made changes to the Reviews tab and would love your feedback. What do you think of the new experience?

Share Feedback

Most Recent ▾

**Clark Snow** recommends Key West Farmers Market  
May 27 · 🌐

Great place to stop and shop

Great selection · Fresh food · Convenient location

Like Comment Share

Comment as Key West Farmers Market

**Tony Mann** recommends Key West Farmers Market  
May 6 · 🌐

What a wonderful first experience. Would recommend to everyone.

Health food · Great selection · Organic products · Prepared foods · Knowledgeable staff · Local produce · ... See 3 more

Like Comment Share

Comment as Key West Farmers Market

**Scott Hollinsworth** recommends Key West Farmers Market  
February 11 · 🌐

The Cheese Lovers table. Yum!

Local produce

1 Comment

Like Comment Share

**Key West Farmers Market**  
Thank you so much! 🙌❤️👍  
Like · Reply · Commented on by Jill Edwards Snodgrass · 19w

Comment as Key West Farmers Market

**John F McGuire** recommends Key West Farmers Market  
January 23 · 🌐

Once a week and worth it!

Prepared foods · Fresh food · Local produce · Great selection · Organic products · Health food

2 Comments

Like Comment Share

**Patricia Cheyne** recommends Key West Farmers Market  
January 7 · 🌐

Big market! Great variety. The woman enforcing masks was a bit aggressive. My husbands mask broke and he was exiting the market, she walked out with him, badgering him the entire way.

Fresh food · Health food · Convenient location · Prepared foods

1 Comment

Like Comment Share



# ATTACHMENT B

## Qualification Statement - General

1. Legal Name, Address, and Telephone Number:

Daily Plan-it

305.115

2. Check one: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual

3.  Corporation, State:

Date of incorporation: \_\_\_\_\_

State in which incorporated: \_\_\_\_\_

Name and Title of Principal Officers

Date of Assuming Position

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

An Out-of-State Corporation, currently authorized to do business in Florida, give date of such authorization.

- Partnership:

Date of Organization: \_\_\_\_\_

Nature of Partnership (General, Limited, or Association):

Name and Address of Partners:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5.  An Individual, State  Name and Address of Owner:

Jill Snodgrass

Georgia Street, Key West FL 30

# ATTACHMENT C



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/26/2021
---------------------------------

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> United Atlantic Insurance Group 3426 Duck Avenue  Key West FL 33040	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>CONTACT NAME:</b> Peter Batty</td> </tr> <tr> <td><b>PHONE (A/C, No, Ext):</b> (305) 748-2134</td> <td><b>FAX (A/C, No):</b> (305) 768-0250</td> </tr> <tr> <td colspan="2"><b>E-MAIL ADDRESS:</b> dawn@uaigkw.com</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>INSURER(S) AFFORDING COVERAGE</b></td> </tr> <tr> <td><b>INSURER A:</b> HISCOX INS CO INC</td> <td><b>NAIC #</b> 10200</td> </tr> <tr> <td colspan="2"><b>INSURER B:</b></td> </tr> <tr> <td colspan="2"><b>INSURER C:</b></td> </tr> <tr> <td colspan="2"><b>INSURER D:</b></td> </tr> <tr> <td colspan="2"><b>INSURER E:</b></td> </tr> <tr> <td colspan="2"><b>INSURER F:</b></td> </tr> </table>	<b>CONTACT NAME:</b> Peter Batty		<b>PHONE (A/C, No, Ext):</b> (305) 748-2134	<b>FAX (A/C, No):</b> (305) 768-0250	<b>E-MAIL ADDRESS:</b> dawn@uaigkw.com		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>INSURER A:</b> HISCOX INS CO INC	<b>NAIC #</b> 10200	<b>INSURER B:</b>		<b>INSURER C:</b>		<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>	
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<b>INSURER C:</b>																					
<b>INSURER D:</b>																					
<b>INSURER E:</b>																					
<b>INSURER F:</b>																					
<b>INSURED</b>  DAILY PLAN-IT 2400 Seidenberg Ave  Key West FL 33040																					

**COVERAGES                      CERTIFICATE NUMBER:                      REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		UDC-2385097-EO-20	11/1/2020	11/1/2021	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td style="text-align: right;">\$ \$2,000,000.00</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td style="text-align: right;">\$</td></tr> <tr><td>MED EXP (Any one person)</td><td style="text-align: right;">\$</td></tr> <tr><td>PERSONAL &amp; ADV INJURY</td><td style="text-align: right;">\$</td></tr> <tr><td>GENERAL AGGREGATE</td><td style="text-align: right;">\$ \$2,000,000.00</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td style="text-align: right;">\$</td></tr> <tr><td>Deductible</td><td style="text-align: right;">\$ \$ 500.00</td></tr> </table>	EACH OCCURRENCE	\$ \$2,000,000.00	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	MED EXP (Any one person)	\$	PERSONAL & ADV INJURY	\$	GENERAL AGGREGATE	\$ \$2,000,000.00	PRODUCTS - COMP/OP AGG	\$	Deductible	\$ \$ 500.00
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	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td style="text-align: right;">\$</td></tr> <tr><td>BODILY INJURY (Per person)</td><td style="text-align: right;">\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td style="text-align: right;">\$</td></tr> <tr><td>PROPERTY DAMAGE (Per accident)</td><td style="text-align: right;">\$</td></tr> <tr><td></td><td style="text-align: right;">\$</td></tr> </table>	COMBINED SINGLE LIMIT (Ea accident)	\$	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$		\$				
COMBINED SINGLE LIMIT (Ea accident)	\$																				
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	\$																				
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td style="text-align: right;">\$</td></tr> <tr><td>AGGREGATE</td><td style="text-align: right;">\$</td></tr> <tr><td></td><td style="text-align: right;">\$</td></tr> </table>	EACH OCCURRENCE	\$	AGGREGATE	\$		\$								
EACH OCCURRENCE	\$																				
AGGREGATE	\$																				
	\$																				
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">PER STATUTE</td> <td style="text-align: center;">OTH-ER</td> <td></td> </tr> <tr><td>E.L. EACH ACCIDENT</td><td></td><td style="text-align: right;">\$</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td></td><td style="text-align: right;">\$</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td></td><td style="text-align: right;">\$</td></tr> </table>	PER STATUTE	OTH-ER		E.L. EACH ACCIDENT		\$	E.L. DISEASE - EA EMPLOYEE		\$	E.L. DISEASE - POLICY LIMIT		\$		
PER STATUTE	OTH-ER																				
E.L. EACH ACCIDENT		\$																			
E.L. DISEASE - EA EMPLOYEE		\$																			
E.L. DISEASE - POLICY LIMIT		\$																			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  CITY OF KEY WEST 1300 WHITE STREET  KEY WEST FL 33040	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
---	--



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/14/2020

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> Diamond Insurance Partners 3706 North Roosevelt Blvd. #207 Key West FL 33040	<b>CONTACT NAME:</b> Mandy Thorsen <b>PHONE (A/C, No, Ext):</b> (305) 292-6060 <b>E-MAIL ADDRESS:</b> mthor@kwdiamond.com	<b>FAX (A/C, No):</b> (305) 292-6002
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Great Events Catering LLC & Bling Special Events, LLC dba Simply You 925 Truman Avenue Key West FL 33040	<b>INSURER A:</b> Century Surety Company	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	


**COVERAGES**      **CERTIFICATE NUMBER:** CL2081401029      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		CCP921470	08/12/2020	08/12/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

Event Planning and Catering  
Coverage include awning or sign that extends over right-of-way.  
Certificate holder is additional insured

<b>CERTIFICATE HOLDER</b> City of Key West 1300 White Street Key West FL 33040	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> 

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ACORD 25 (2016/03)

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# ATTACHMENT E

CAL VENDOR CERTIFICATION PURSUANT TO CITY OF KEY WEST ORDINANCE 022

## SECTION 2-

The undersigned, as a duly authorized representative of the vendor listed herein, certifies to the best of his/her knowledge and belief, that the vendor meets the definition of a local business. For purposes of this section, local business shall mean a business which:

- a) Principle address as registered with the Florida Department of State located within 30 miles of the boundaries of the city, listed with the chief licensing official as having a business tax receipt with its principle address within 30 miles of the boundaries of the city for at least one (1) year immediately prior to the issuance of the solicitation
- b) Maintains a workforce of at least 50 percent of its employees from the city or within 30 miles of its boundaries and
- c) Having paid all current license taxes and any other fees due the city at least 24 hours prior to the publication of the call for bids or request for proposals.  
Not a local vendor pursuant to Ordinance 022 Section 2-  
Qualifies as a local vendor pursuant to Ordinance 022 Section 2-

If you qualify, please complete the following in support of the self-certification. Submit copies of your County and City business licenses. Failure to provide the information requested will result in denial of certification as a local business.

Business Name: Daily Plan-it Phone: 305.115 Current

Local Address: Georgia Street, Key West FL 330 (P.O. box numbers may not be used to establish status)

Length of time at this address: 2 years

Jill Snodgrass  
Signature of Authorized Representative

6-25-21  
Date

NOTAR

STATE OF Florida

COUNTY OF Monroe

The foregoing instrument was acknowledged before me this 25 day of June, 20 21

■ Jill Snodgrass, of Daily Plan-it

(Name of officer or agent, title of officer or agent) Name of corporation acknowledging)  
or has produced drivers licence/known to me as identification.

Shia Marzetti  
Signature of Notary

Print, Type or Stamp Name of Notary  
Title or Rank

Return Completed form with  
Supporting documents to:  
City of Key West Purchasing



# ATTACHMENT F

## CITY OF KEY WEST INDEMNIFICATION FORM

CONTRACTOR agrees to protect, defend, indemnify, save and hold harmless The City of Key West, all its Departments, Agencies, Bureaus, Commissions, officers, City Consultant, agents, servants and employees, including volunteers, from and against any and all claims, debts, demands, expense and liability arising out of injury or death to any person or the damage, loss of destruction of any property which may occur or in any way grow out of any act or omission of the PROPOSER, its agents, servants, and employees, or any and all costs, expense and/or attorney fees incurred by the City as a result of any claim, demands, and/or causes of action except of those claims, demands, and/or causes of action arising out of the negligence of The City of Key West, all its Departments, Agencies, Bureaus, Commissions, officers, agents, servants and employees. The PROPOSER agrees to investigate, handle, respond to, provide defense for and defend any such claims, demand, or suit at its sole expense and agrees to bear all other costs and expenses related thereto, even if it (claims, etc.) is groundless, false or fraudulent. The City of Key West does not waive any of its sovereign immunity rights, including but not limited to, those expressed in Section 125 Florida Statutes.

These indemnifications shall survive the term of this agreement. In the event that any action or proceeding is brought against the City of Key West by reason of such claim or demand, PROPOSER shall, upon written notice from the City of Key West, resist and defend such action or proceeding by counsel satisfactory to the City of Key West.

The indemnification provided above shall obligate PROPOSER to defend at its own expense to and through appellate, supplemental or bankruptcy proceeding, or to provide for such defense, at the City of Key West's option, any and all claims of liability and all suits and actions of every name and description covered above which may be brought against the City of Key West whether performed by PROPOSER, or persons employed or utilized by PROPOSER.

The PROPOSER's obligation under this provision shall not be limited in any way by the agreed upon Contract Price as shown in this agreement, or the PROPOSER's limit of or lack of sufficient insurance protection.

PROPOSER: Daily Plan-it COMPANIES

100 Georgia Street, Key West FL 33001

Address

Jill Snodgrass  
Signature

Jill Snodgrass

Print Name

June 25, 2021

Date

Owner

Title

NOTAR  OR THE PROPOSER

STATE OF Florida

COUNTY OF Monroe

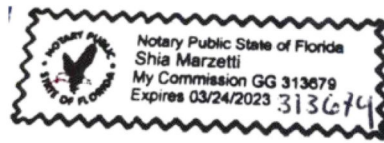
The foregoing instrument was acknowledged before me this 25 day of June, 20 21

by Jill Snodgrass, of Daily Plan-it

(Name of officer or agent, title of officer or agent) Name of corporation acknowledging)

or has produced drivers licence/known to me as identification.

Shia Marzetti  
Signature of Notary



Shia Marzetti

Return Completed form with  
Supporting documents to: City  
of Key West Purchasing

Print, Type or Stamp Name of Notary

Notary

Title or Rank

# ATTACHMENT G


~~ANTI-KICKBACK~~

STATE OF FLORIDA )

: SS

COUNTY OF MONROE )

The undersigned hereby duly sworn, depose and say that no portion of the sum herein will be paid to any employees of the City of Key West as a commission, kickback, reward or gift, directly or indirectly by me or any member of my firm or by an officer of the corporation.

Jill Snodgrass 

Sworn and subscribed before me this 25 day of June, 2021

NOTARY PUBLIC, STATE OF FLORIDA AT / R

My Commission Expires: 3-23



# ATTACHMENT H

SWORN STATEMENT UNDER SECTION 2133(3)(a) FLORIDA  
STATUTES, ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL  
AUTHORIZED TO ADMINISTER OATHS

1. This sworn statement is submitted with RFP, or Contract No. 006-21 for  
Truman Waterfront Farmers Market
2. This sworn statement is submitted by Jill Snodgrass (Name of entity submitting sworn statement) whose  
business address is 1100 Georgia Street, Key West FL 33001  
\_\_\_\_\_ and (if  
applicable) its Federal Employer Identification Number (FEIN) is  
11-1632111 (If the entity has no FEIN, include the Social  
Security Number of the individual signing this sworn statement.)
3. My name is Jill Snodgrass and my relationship to  
(Please print name of individual signing)  
  
the entity named above is Owner.
4. I understand that a public entity crime as defined in Paragraph 2133(1)(g), Florida  
Statutes, means a violation of any state or federal law by a person with respect to and directly  
related to the transaction of business with any public entity or with an agency or political  
subdivision of any other state or with the United States, including but not limited to, any  
order or contract for goods or services to be provided to any public entity or an agency or political  
subdivision of any other state or of the United States and involving antitrust, fraud, theft,  
bribery, collusion, racketeering, conspiracy, material misrepresentation.
5. I understand that a convicted or conviction as defined in Paragraph 2133(1)(b), Florida  
Statutes, means a finding of guilt or a conviction of a public entity crime, with or without  
an adjudication of guilt, in any federal or state trial court of record  
relating to charges brought by indictment information after July 1, 1995 as a result of  
a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that an affiliate as defined in Paragraph 2133(1)(a), Florida  
Statutes, means



1. A predecessor or successor of a person convicted of a public entity crime: or
2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

■ Understand that a "person" as defined in Paragraph 2133(1)(b) Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which files or applies to file on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

■ Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1999

The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1999 AND (Please indicate which additional statement applies.)

There has been a proceeding concerning the conviction before a hearing of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)

The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)

\_\_\_ The person or affiliate has not been put on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

*Jill Snodgrass*

(Signature)

6-25-21

(Date)

STATE OF Florida

COUNTY OF Monroe

PERSON  APPEARED  BEFORE ME, the undersigned authority,

Jill Snodgrass who, after first being sworn by me, affixed his/her signature in the  
(Name of individual signing)

space provided above on this 25 day of June, 20 21

My commission expires:

*Shia Marzetti*  
NOTARY PUBLIC



# ATTACHMENT I

## NON-COLLUSION DECLARATION AND COMPLIANCE WITH CFR

ITEM/SECTION NO.: \_\_\_\_\_  
F.A.P. NO.: \_\_\_\_\_  
PARCEL NO.: \_\_\_\_\_  
COUNTY: RFP 006-21 \_\_\_\_\_  
CITY/TOWNSHIP: \_\_\_\_\_

Jill Snodgrass  
I, \_\_\_\_\_ (NAME)  
declare that I am \_\_\_\_\_ owner of \_\_\_\_\_ hereby  
of \_\_\_\_\_ (FIRM)  
Key West, Florida \_\_\_\_\_  
(COUNTY STATE)

and that I am the person responsible within my firm for the final decision as to the price(s) and amount of this bid on this Project.

I further declare that:

1. The prices(s) and amount of this bid have been arrived at independently, without consultation, communication or agreement, for the purpose of restricting competition with any other contractor, bidder or potential bidder.

2. Neither the price(s) nor the amount of this bid have been disclosed to any other firm or person who is a bidder or potential bidder on this project, and will not be so disclosed prior to the bid opening.

3. No attempt has been made or will be made to solicit, cause or induce any other firm or person to refrain from bidding on this project, or to submit a bid higher than the bid of this firm, or any intentionally high or non-competitive bid or other form of complementary bid.

4. The bid of my firm is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary bid.

5. My firm has not offered or entered into a subcontract or agreement regarding the purchase of materials or services from any firm or person, or offered, promised or paid cash or anything of value to any firm or person, whether in connection with this or any other project, in consideration for an agreement or promise by any firm or person to refrain from bidding or to submit a complementary bid on this project.

6. My firm has not accepted or been promised any subcontract or agreement regarding the sale of materials or services to any firm or person, and has not been promised or paid cash or anything of value by any firm or person, whether in connection with this or any other project, in consideration for my firm submitting a complementary bid, or agreeing to do so, on this project.

I have made a diligent inquiry of all members, officers, employees, and agents of my firm with responsibilities relating to the preparation, approval or submission of my firm's bid on this project and have been advised by each of them that he or she has not participated in any communication, consultation, discussion, agreement, collusion, act or

other conduct inconsistent with any of the statements and representations made in this Declaration.

As required by Section 33.65, Florida Statutes, the firm has fully informed the City of Key West in writing of all convictions of the firm, its affiliates (as defined in Section 33.65(1)(a), Florida Statutes), and all directors, officers, and employees of the firm and its affiliates for violation of state or federal antitrust laws with respect to a public contract or for violation of any state or federal law involving fraud, bribery, collusion, conspiracy or material misrepresentation with respect to a public contract. This includes disclosure of the names of current employees of the firm or affiliates who were convicted of contract crimes while in the employ of another company.

I certify that, except as noted below, neither my firm nor any person associated therewith in the capacity of owner, partner, director, officer, principal, investigator, project director, manager, auditor, and/or position involving the administration of Federal funds:

(a) is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions, as defined in FR 10(a), by any Federal department or agency

(b) has within a three-year period preceding this certification been convicted of or had a civil judgment rendered against him or her for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a Federal, State or local government transaction or public contract; violation of Federal or State antitrust statutes; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements or receiving stolen property

(c) is presently indicted for or otherwise criminally or civilly charged by a Federal, State or local governmental entity with commission of any of the offenses enumerated in paragraph (b) of this certification and

(d) has within a three-year period preceding this certification had one or more Federal, State or local government public transactions terminated for cause or default.

10. We, certify that We, shall not knowingly enter into any transaction with any subcontractor, material supplier, or vendor who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this contract by any Federal Agency unless authorized by the Department.

Where I am unable to declare or certify as to any of the statements contained in the above stated paragraphs numbered (1) through (10), I have provided an explanation in the exceptions portion below or by attached separate sheet.

**EXCEPTIONS:**

(Any exception listed above will not necessarily result in denial of award, but will be considered in determining bidder responsibility. For any exception noted, indicate to whom it applies, initiating agency and dates of agency action.)

Providing false information may result in criminal prosecution and/or administrative sanctions.)

I declare under penalty of perjury that the foregoing is true and correct.



PROPOSER:

■ Jill Snodgrass, Owner ■  
WITNESS: NAME AND TITLE PRINTED

*Shia Marzetti*

■ \_\_\_\_\_  
SIGNATURE

WITNESS: \_\_\_\_\_

Executed on this ■ 25 ■ day of June ■ 2021

**FAILURE TO FULLY COMPLETE AND EXECUTE THIS DOCUMENT MAY RESULT IN THE BID BEING DECLARED NONRESPONSIVE**

# ATTACHMENT J

## CONE OF SILENCE AFFIDAVIT

STATE OF Florida )

: S

COUNTY OF Monroe §

■he undersigned hereby duly sworn depose and say that all owner(s), partners, officers, directors, employees and agents representing the firm of Daily Plan-it have read and understand the limitations and procedures regarding communications concerning City of Key West issued competitive solicitations pursuant to City of Key West Ordinance Section 2-■ Cone of Silence (attached).

*Jill Snodgrass*

(signature)

6-25-21

(date)

Sworn and subscribed before me this

25 Day of June, 2011

*Shia Marzetti*

NOTARPU, State of Florida at

■rge My Commission Expires 3/2/23





# ATTACHMENT K

## EQUAL BENEFITS FOR DOMESTIC PARTNERS AFFIDAVIT

STATE OF Florida )

: S

COUNTY OF Monroe §

■ the undersigned hereby duly sworn, depose and say that the firm of Daily Plan-it  
dba Farmers Market provides benefits to domestic partners of its employees on  
the same basis as it provides benefits to employees ■ spouses per City of Key West Ordinance  
Sec. 2-■

■: *Jill Snodgrass*

Sworn and subscribed before me this

25 day of June, 2021



*Shia Marzetti*

NOTAR ■ P U ■, State of Florida at ■ rge

My Commission Expires: 3-2-23