



THE CITY OF KEY WEST

Post Office Box 1409 Key West, FL 33041-1409 (305) 809-3700

**To: Bogdan Vitas, City Manager**  
**From: Janet Muccino, Project Manager**  
**Date: 12/18/13**  
**Reference: Declaration of Emergency Procurement in Excess of \$20,000 to Fund Mold Remediation Services for remediation at the KWPD**

City Code Section 2-797 (2) authorizes the City Manager to make emergency procurement of commodities or contractual services where the cost exceeds \$20,000 when there exists a clear and present threat to public health, property, safety, or other substantial loss to the City, including cases where a natural disaster has occurred, is occurring, or is imminently threatening.

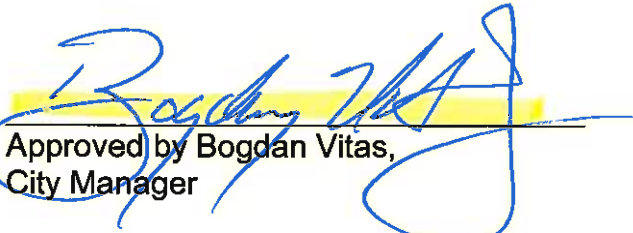
Due to poorly installed windows at the KWPD building, leaking has been a constant problem since it was constructed in 2002. The leaking from the windows has caused mold to grow in the offices posing a health risk to those who work there. The City has awarded a contract to E.L.C.I. Construction Group for window replacement at the KWPD; however, before replacement can begin the mold situation must be remediated. A funding source has not yet been identified for this project.

Staff has secured a mold report and as a result an emergency procurement proposal was sent to three remediation firms:

Consolidated Environmental Engineering (CCE)	\$78,400
AFR Environmental Corps	\$80,150
EE&G	\$364,088

Staff recommends contracting with CCE in the amount of \$78,400

This emergency procurement will be ratified by the City Commission at the next

  
Approved by Bogdan Vitas,  
City Manager

  
Date

MEMORANDUM

CITY OF KEY WEST  
PURCHASING ORDINANCE EXCEPTION RECORD

DEPARTMENT: Engineering  
ITEM: Mold Remediation @ KWPD  
REQUISITION: \_\_\_\_\_  
COST: \$ 78,400  
VENDOR: Consolidated Environmental Engineering

JUSTIFICATION FOR NOT OBTAINING REQUIRED NUMBER OF BIDS OR PURCHASING WITHOUT AUTHORITY:

Sec 2-797 (2) states that the City Manager may make emergency procurement of commodities or contractual services where the cost exceeds \$20,000 when there is a clear & present threat to public health, property, welfare, safety or other substantial loss to the City...

AUTHORIZATION:

DEPARTMENT: OR

DATE: 12-18-13

FINANCE: Fol Finance

DATE: 12-18-13

CITY MANAGER: [Signature]

DATE: 12/19/13

DISPOSITION:

- MANAGEMENT & FINANCE APPROVAL up to \$1,000.00 [This form not needed. Can be processed in the HTE- PI approval process]
- CITY MANAGER APPROVAL up to \$20,000.00
- CITY COMMISSION APPROVAL RESOLUTION: \_\_\_\_\_ DATE: \_\_\_\_\_

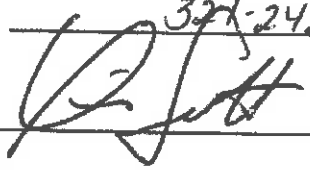


**To:** The City of Key West  
**Address:** 3140 Flagler Ave, Key West, Florida 33040  
**Project Title:** MOLD REMEDIATION AT THE KEY WEST POLICE STATION

**BIDDER'S INFORMATION**

**Name:** Consolidated Environmental Engineering, LLC  
**Address:** main - 3135 Skyway Circle Melbourne, FL 32934  
Key West - 1403 Laird Street Key West, FL 33040

**Contact Name:** Tim Scott  
**Email:** ceeinc@bellsouth.net  
**Telephone:** 321-242-7100  
**Fax:** 321-242-0071

**Signature:**  **Date:** 12-4-2013

**BIDDER'S DECLARATION AND UNDERSTANDING**

The undersigned, hereinafter called the Bidder, declares that the only persons or parties interested in this Bid are those named herein, that this Bid is, in all respects, fair and without fraud, that it is made without collusion with any official of the Owner, and that the Bid is made without any connection or collusion with any person submitting another Bid on this Contract.

The Bidder further declares that he/she has carefully examined PROJECT SITE, that he/she has personally inspected the site, that he/she has satisfied himself/herself as to the quantities involved, including materials and equipment, and conditions of work involved, including the fact that the description of the quantities of work and materials, as included herein, is brief and is intended only to indicate the general nature of the work and to identify the said quantities with

the detailed requirements of the Contract, and that this Bid is made according to the provisions and under the terms of the Contract.

The Bidder further agrees that he/she has exercised his/her own judgment regarding the interpretation of job conditions and has utilized all data, which he/she believes pertinent from the Project Manager, Owner, and other sources in arriving at his/her conclusions.

The intent of the Bid Form is to describe a functionally complete project (or part thereof) to be completed in accordance with the Contract. Any work, materials, or equipment that may reasonably be inferred as being required to produce the intended result shall be supplied whether or not specifically called for.

### **CONTRACT EXECUTION**

The Bidder agrees that if this BID is accepted, he/she will, within ten (10) calendar days after Notice of Award, sign the Contract in the form annexed hereto, will attach all required licenses and certificates, and will, to the extent of his BID, furnish all equipment, materials, and labor necessary to complete all work as specified or indicated in the Contract Documents..

### **CERTIFICATES OF INSURANCE**

Bidder agrees to furnish the Owner, before commencing the work under this Contract, the certificates of insurance as specified in these Documents.

### **START OF CONSTRUCTION AND CONTRACT COMPLETION TIME**

The Bidder further agrees to begin work within ten (10) calendar days after the date of the Notice to Proceed and to complete the construction of all items in the Bid, in all respects, for this particular project, within thirty (30) calendar days after the date of the Notice to Proceed.

### **LIQUIDATED DAMAGES**

In the event the Bidder is awarded the Contract and shall fail to complete the work within the time limit or extended time limit agreed upon as more particularly set forth in the Contract Documents, liquidated damages shall be paid to the Owner at the rate of two hundred fifty dollars (\$250) per day for all work awarded under this contract until the work has been satisfactorily completed as provided by the Contract Documents. Sundays and legal holidays shall be included in determining days in default.

### **SALES AND USE TAXES**

The Bidder agrees that all federal, state, and local sales and use taxes are included in the stated Bid prices for the work.

### **PUBLIC ENTITY CRIMES**

"A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a Bid on a contract to provide any goods or services to a public entity, may not submit a Bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit Bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list."

### **UNIT PRICE ITEMS**

The Bidder further proposes to accept as full payment for the materials supplied herein the amounts computed under the provisions of the Contract and based on the following unit price amounts, it being expressly understood that the unit prices are independent of the exact quantities involved. The Bidder agrees that the unit prices represent a true measure of materials supplied, including all allowances for overhead and profit for each type of sign called for in these Contract Documents. The amounts shall be shown in both words and figures. In case of a discrepancy, the amount shown in words shall govern.

## BID FORM

### BID BREAKDOWN

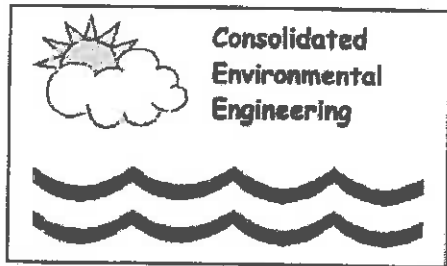
The Bidder shall provide a schedule of values for all aspects of the project including mobilization/demobilization, labor and materials, permitting, etc. required or to be used for the project. The schedule of values shall be in sufficient detail to allow the owner to understand how the Bidder arrived at said Bid price and shall become part of the contract for basis of payment. The City may ask for a more detailed schedule of values if one submitted is not sufficient.

The Schedule of Values (unit prices) shall include at a minimum of the following:

Item #	Description*	Qty	Units	Unit Price	Total
1	Mobilization/Demobilization	1	each	NC	Ø
2	Removal of moldy drywall around windows with containment	3500	Sq. ft.	10. <sup>00</sup>	35,000 <sup>00</sup>
3	Sanitize/Seal behind removed drywall	3500	Sq. ft.	1. <sup>00</sup>	3,500 <sup>00</sup>
4	Removal flooring, clean surface, and seal	7200	Sq. Ft	3.50	25,000 <sup>00</sup>
5	Removal/replacement of furniture	42	Per Room	150. <sup>00</sup>	6,300 <sup>00</sup>
6	Sanitize and seal ceiling tile	10,000	Sq. ft.	0.32	3,200 <sup>00</sup>
7	Room Cleaning/Sanitization	42	Per Room	100. <sup>00</sup>	4,200 <sup>00</sup>
8	Removal of drop ceiling track. Reinstall in affected area above window	200	lf	5. <sup>00</sup>	1,000 <sup>00</sup>
9	Contingency	1	each	TBD	TBD
<b>TOTAL</b>					<b>78,200<sup>00</sup></b>

**\*AS PER IICRC S520 STANDARD AND REFERENCE GUIDE FOR PROFESSIONAL MOLD REMEDIATION OR EQUIVALENT**

**FINAL PAYMENT WILL BE BASED ON ACTUAL QUANTITIES MEASURED IN THE FIELD AND APPROVED BY CITY STAFF**



Corporate Office:  
3135 Skyway Circle,  
Melbourne, FL 32934  
Phone: (321) 242-7100  
Fax: (321) 242-0071  
e-mail: [ceeinc@bellsouth.net](mailto:ceeinc@bellsouth.net)  
web page: <http://ceefl.com>  
Certified Building Contractor License  
Number – CBC 1258704

Biologist-Chemists-Engineers-Remediation Contractors

Offices in:  
Central Florida and Florida Keys

### Bid Form Addendum

1. Mobilization/Demobilization: Client to provide two parking spots, to be determined by contractor, for waste dumpster staging.
2. Removal of drywall: Includes dumpster and dumping fees, permitting (fees and application submittal) and Post Remediation Report.
3. Sanitization/Seal behind removed drywall: Includes the spray application of an IAQ material like Fosters 2040 or IAQ 6000.
4. Removal flooring, clean surface, and seal: "clean surface" is defined as biology (mold) free. Residual mastic/adhesive may be present on floor after remediation. "Seal" (sealant) will be a water based product such as a "soot-set" or Thompsons Water Sealant.
5. Remove/Replace furniture: Client to remove all personal effects, and label and disconnect electronics. Client to reconnect electronics. This quotation does not include 2<sup>nd</sup> floor Command Center per conversation during walk-through.
6. Sanitize and seal ceiling tiles: Includes HEPA vacuum and sealing of tiles with an aerosolized "soot-set".
7. Room Cleaning/Sanitizing: Includes HEPA vacuum, removal of all visual discolored biological (mold) growth.
8. Removal/reinstall of drop ceiling track: Track will be cut with a small saw leaving a slight imperfection in/around the cut area. Best efforts will be made to match the ends together when reinstalling.

## **Bid Form Addendum- continued**

### **Other Notes of Interest:**

1. Contractor would like 24/7 access to work area to meet client schedule for remediation and reconstruction.
2. Client is responsible for informing employees of health hazards of entering the remediation area and maintaining a buffer between the remediation area and other areas of the facility. No City employee should be allowed in the area where the remediation is occurring.
3. Client should be aware that it may take 1-6 weeks to secure a demolition permit. The timeframe for work to commence is requested to be up to 5 days after permit receipt for mobilization and to initiate work activities.
4. Unless other wise specified, visual determinations for "biology (mold) free" will be the method for acceptance of a clean surface.

### **Basic Schedule – Proposed:**

1. Removal of 1<sup>st</sup> floor hallway flooring.
2. Move exterior office furniture to hallway.
3. Remove impacted drywall and carpet from impacted offices.
4. Inspection by City representative for cleanliness (mold free) surfaces.
5. Sanitize/encapsulate walls, ceiling and office as needed.
6. Window Contractor installs windows. *To Be Performed By Others.*
7. Drywall contractor install drywall. *To Be Performed By Others.*
8. Paint contractor to paint office(s). *To Be Performed By Others.*
9. Flooring contractor installs office flooring. *To Be Performed By Others.*
10. Move furniture back into offices.
11. Client to reconnect all electronics.
12. Hallway floor to be prep and reinstalled. *To Be Performed By Others.*
13. Submittal of a Post Remediation Report to the City of Key West.



**SWORN STATEMENT UNDER SECTION 287.133(3)(a)  
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

**PROJECT ITB #13-003: POLICE STATION WINDOWS REPLACEMENT**

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

1. This sworn statement is submitted with Bid, Bid or Contract No. \_\_\_\_\_ for  
Mold Remediation at the Key West Police Station
  
2. This sworn statement is submitted by Consolidated Environmental Engineering, LLC  
(Name of entity submitting sworn statement)  
  
whose business address is 3135 Skyway Circle Melbourne, FL 32934  
1403 Laid Street Key West, FL 33040 and (if applicable) its Federal  
Employer Identification Number (FEIN) is 14-1862337 (If the entity has no FEIN,  
include the Social Security Number of the individual signing this sworn statement.)
  
3. My name is Lisa Scott and my relationship to  
(Please print name of individual signing)  
  
the entity named above is Vice President / Secretary
  
4. I understand that a "public entity crime" as defined in Paragraph 287.133(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 Bid 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 "convicted" or "conviction" as defined in Paragraph 287.133(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, 1989, 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 287.133(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.
  
7. I understand that a "person" as defined in Paragraph 287.133(1)(8), 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 Bids or applies to Bid 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.

8. 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.)

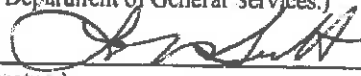
     Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.

     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, 1989, 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.)

  
(Signature)  
12-5-13  
(Date)

STATE OF Florida  
COUNTY OF Brevard

PERSONALLY APPEARED BEFORE ME, the undersigned authority,

Lisa M. Scott who, after first being sworn by me, affixed his/her signature in the  
(Name of individual signing)

space provided above on this 5 day of Dec, 2013

My commission expires



  
NOTARY PUBLIC

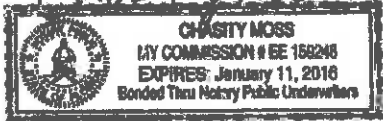


**CITY OF KEY WEST INDEMNIFICATION FORM**

To the fullest extent permitted by law, the Contractor expressly agrees to indemnify and hold harmless the City of Key West, their officers, directors, agents, and employees (herein called the "indemnities") from liabilities, damages, losses and costs, including, but not limited to, reasonable attorney's fees and court costs, such legal expenses to include costs incurred in establishing the indemnification and other rights agreed to in this Paragraph, to persons or property, to the extent caused by the negligence, recklessness, or intentional wrongful misconduct of the Contractor its Subcontractors or persons employed or utilized by them in the performance of the Contract. Claims by indemnities for indemnification shall be limited to the amount of Contractor's insurance or \$1 million per occurrence, whichever is greater. The parties acknowledge that the amount of the indemnity required hereunder bears a reasonable commercial relationship to the Contract and it is part of the project specifications or the bid documents, if any.

The indemnification obligations under the Contract shall not be restricted in any way by any limitation on the amount or type of damages, compensation, or benefits payable by or for the Contractor under workers' compensation acts, disability benefits acts, or other employee benefits acts, and shall extend to and include any actions brought by or in the name of any employee of the Contractor or of any third party to whom Contractor may subcontract a part or all of the Work. This indemnification shall continue beyond the date of completion of the work.

CONTRACTOR: Consolidated Environmental, Inc. SEAL:  
3135 Skyway Circle Melbourne, FL 32934  
Address  
*[Signature]*  
Signature  
Lisa Scott  
Print Name  
V. President Secretary  
Title  
12-5-13  
Date

*Chasity MD 12-5-2013*  




The names of the principal officers of the Corporation submitting this Bid, or of the Partnership, or of all persons interested in this Bid as Principals are as follows:

Name	Title
<u>Timothy Scott</u>	<u>President</u>
<u>Lisa Scott</u>	<u>Vice President Secretary</u>

**If Corporation**

IN WITNESS WHEREOF the undersigned corporation has caused this instrument to be executed and its seal affixed by its duly authorized officers this 5 day of December, 2010.

(SEAL)

Name of Corporation

By: CONSOLIDATED Environmental Engineering

Title: Tim Scott President

Attest: Lisa Scott V. President Secretary

Secretary

**If Sole Proprietor or Partnership**

IN WITNESS hereto the undersigned has set his/her/its hand this 5 day of December, 2010.

Signature of Bidder [Signature]

Title President

Bidder shall complete and submit the following forms with his Bid or as otherwise identified in the Bid document:

- Bid Form including detail schedule of values,
- Sworn statement under section 287.133(3)(a) Florida Statutes, on public entity crimes,
- Anti-Kickback Affidavit
- City of Key West Indemnification Form
- Equal Benefits for Domestic Partner Affidavit

Bidders must hold and furnish documentation of all State of Florida licenses, certifications, registrations or competency cards required in order to Bid and perform the work specified herein.

The successful Bidder will be required to show that he/she is in compliance with the provisions of Chapter 66 of the Code of Ordinances of the City of Key West within 10-days of Notice of Award. The successful Bidder must demonstrate that he/she holds, as a minimum, the following licenses and certificates:

- A. City of Key West License as defined in the Code of Ordinances, Chapter 66, enabling the Contractor to perform the work stated herein.
- B. A valid Business Tax Receipt issued by the City of Key West.

#### **CITY OF KEY WEST LICENSES, PERMITS, AND FEES**

Pursuant to the Public Bid Disclosure Act, each license, permit, or fee a Contractor will have to pay the City of Key West before or during construction or the percentage method or unit method of all licenses, permits, and fees **REQUIRED BY THE CITY OF KEY WEST** and payable to the City by virtue of this construction as part of the Contract is as follows:

- Certified FL. Mold Remediators

Note: Contractor shall verify each license, permit, or fee before submitting the Bid.

**LICENSES, PERMITS, AND FEES THAT MAY BE REQUIRED BY THE STATE OF FLORIDA, STATE AGENCIES, OR BY OTHER LOCAL GOVERNMENTAL ENTITIES ARE NOT INCLUDED IN THE ABOVE LIST.**

**SUBCONTRACTORS**

The Bidder further proposes that the following subcontracting firms or businesses will be awarded subcontracts for the following portions of the work in the event that the Bidder is awarded the Contract:

Portion of Work: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Portion of Work: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Portion of Work: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**BIDDER**

The name of the Bidder submitting this Bid is: \_\_\_\_\_

Doing business at \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_

This address is where all communications concerning this Bid shall be sent.



**City Ordinance Sec. 2-799**  
**Requirements for City Contractors to Provide Equal Benefits for Domestic Partners**

- (a) Definitions. For purposes of this section only, the following definitions shall apply:
- (1) **Benefits** means the following plan, program or policy provided or offered by a contractor to its employees as part of the employer's total compensation package: sick leave, bereavement leave, family medical leave, and health benefits.
  - (2) **Bid** shall mean a competitive bid procedure established by the city through the issuance of an invitation to bid, request for proposals, request for qualifications, or request for letters of interest.
  - (3) **Cash equivalent** means the amount of money paid to an employee with a domestic partner in lieu of providing benefits to the employee's domestic partner. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee for his or her spouse.

The cash equivalents of the following benefits apply:

- a. For bereavement leave, cash payment for the number of days that would be allowed as paid time off for the death of a spouse. Cash payment would be in the form of the wages of the domestic partner employee for the number of days allowed.
  - b. For health benefits, the cost to the contractor of the contractor's share of the single monthly premiums that are being paid for the domestic partner employee, to be paid on a regular basis while the domestic partner employee maintains such insurance in force for himself or herself.
  - c. For family medical leave, cash payment for the number of days that would be allowed as time off for an employee to care for a spouse who has a serious health condition. Cash payment would be in the form of the wages of the domestic partner employee for the number of days allowed.
- (4) **Contract** means any written agreement, purchase order, standing order or similar instrument entered into pursuant to the award of a bid whereby the city is committed to expend or does expend funds in return for work, labor, professional services, consulting services, supplies, equipment, materials, construction, construction related services or any combination of the foregoing.
  - (5) **Contractor** means any person or persons, sole proprietorship, partnership, joint venture, corporation, or other form of doing business, that is awarded a bid and enters into a covered contract with the city, and which maintains five (5) or more full-time employees.
  - (6) **Covered contract** means a contract between the city and a contractor awarded subsequent to the date when this section becomes effective valued at over twenty thousand dollars (\$20,000).
  - (7) **Domestic partner** shall mean any two adults of the same or different sex, who have registered as domestic partners with a governmental body pursuant to state or local law authorizing such registration, or with an internal registry maintained by the employer of at least one of the domestic partners. A contractor may institute an internal registry to allow for the provision of equal benefits to

employees with domestic partner who do not register their partnerships pursuant to a governmental body authorizing such registration, or who are located in a jurisdiction where no such governmental domestic partnership registry exists. A contractor that institutes such registry shall not impose criteria for registration that are more stringent than those required for domestic partnership registration by the City of Key West pursuant to Chapter 38, Article V of the Key West Code of Ordinances.

- (8) *Equal benefits* mean the equality of benefits between employees with spouses and employees with domestic partners, and/or between spouses of employees and domestic partners of employees.
- (b) Equal benefits requirements.
- (1) Except where otherwise exempt or prohibited by law, a Contractor awarded a covered contract pursuant to a bid process shall provide benefits to domestic partners of its employees on the same basis as it provides benefits to employees' spouses.
  - (2) All bid requests for covered contracts which are issued on or after the effective date of this section shall include the requirement to provide equal benefits in the procurement specifications in accordance with this section.
  - (3) The city shall not enter into any covered contract unless the contractor certifies that such contractor does not discriminate in the provision of benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees.
  - (4) Such certification shall be in writing and shall be signed by an authorized officer of the contractor and delivered, along with a description of the contractor's employee benefits plan, to the city's procurement director prior to entering into such covered contract.
  - (5) The city manager or his/her designee shall reject a contractor's certification of compliance if he/she determines that such contractor discriminates in the provision of benefits or if the city manager or designee determines that the certification was created, or is being used for the purpose of evading the requirements of this section.
  - (6) The contractor shall provide the city manager or his/her designee, access to its records for the purpose of audits and/or investigations to ascertain compliance with the provisions of this section, and upon request shall provide evidence that the contractor is in compliance with the provisions of this section upon each new bid, contract renewal, or when the city manager has received a complaint or has reason to believe the contractor may not be in compliance with the provisions of this section. This shall include but not be limited to providing the city manager or his/her designee with certified copies of all of the contractor's records pertaining to its benefits policies and its employment policies and practices.
  - (7) The contractor may not set up or use its contracting entity for the purpose of evading the requirements imposed by this section.
- (c) Mandatory contract provisions pertaining to equal benefits. Unless otherwise exempt, every covered contract shall contain language that obligates the contractor to comply with

the applicable provisions of this section. The language shall include provisions for the following:

- (1) During the performance of the covered contract, the contractor certifies and represents that it will comply with this section.
  - (2) The failure of the contractor to comply with this section will be deemed to be a material breach of the covered contract.
  - (3) If the contractor fails to comply with this section, the city may terminate the covered contract and all monies due or to become due under the covered contract may be retained by the city. The city may also pursue any and all other remedies at law or in equity for any breach.
  - (4) If the city manager or his designee determines that a contractor has set up or used its contracting entity for the purpose of evading the requirements of this section, the city may terminate the covered contract.
- (d) Enforcement. If the contractor fails to comply with the provisions of this section:
- (1) The failure to comply may be deemed to be a material breach of the covered contract; or
  - (2) The city may terminate the covered contract; or
  - (3) Monies due or to become due under the covered contract may be retained by the city until compliance is achieved; or
  - (4) The city may also pursue any and all other remedies at law or in equity for any breach;
  - (5) Failure to comply with this section may also subject contractor to the procedures set forth in Division 5 of this article, entitled "Debarment of contractors from city work."
- (e) Exceptions and waivers.

The provisions of this section shall not apply where:

- (1) The contractor does not provide benefits to employees' spouses.
- (2) The contractor is a religious organization, association, society or any non-profit charitable or educational institution or organization operated, supervised or controlled by or in conjunction with a religious organization, association or society.
- (3) The contractor is a governmental entity.
- (4) The sale or lease of city property.
- (5) The provision of this section would violate grant requirement, the laws, rules or regulations of federal or state law (for example, The acquisition services procured pursuant to Chapter 287.055, Florida Statutes known as the "Contractors' Competitive Negotiation Act").
- (6) Provided that the contractor does not discriminate in the provision of benefits, a contractor may also comply with this section by providing an employee with the cash equivalent of such benefits, if the city manager or his/her designee determines that either:

- a. The contractor has made a reasonable yet unsuccessful effort to provide equal benefits. The contractor shall provide the city manager or his/her designee with sufficient proof of such inability to provide such benefit or benefits which shall include the measures taken to provide such benefits or benefits and the cash equivalent proposed, along with its certificate of compliance, as is required under this section.
- (7) The city commission waives compliance of this section in the best interest of the city, including but not limited to the following circumstances:
- a. The covered contract is necessary to respond to an emergency.
  - b. Where only one bid response is received.
  - c. Where more than one bid response is received, but the bids demonstrate that none of the bidders can comply with the requirements of this section.
- (f) City's authority to cancel contract. Nothing in this section shall be construed to limit the city's authority to cancel or terminate a contract, deny or withdraw approval to perform a subcontract or provide supplies, issue a non-responsibility finding, issue a non-responsiveness finding, deny a person or entity prequalification, or otherwise deny a person or entity city business.
- (g) Timing of application. This section shall be applicable only to covered contracts awarded pursuant to bids which are after the date when this section becomes effective.

SAMPLE CONTRACT

This Contract, made and entered into this \_\_\_\_\_ day of \_\_\_\_\_ 201\_,  
by and between the City of Key West, hereinafter called the "Owner", and \_\_\_\_\_

\_\_\_\_\_

hereinafter called the "Vendor";

WITNESSETH:

The Vendor, in consideration of the sum to be paid him by the Owner and of the covenants and agreements herein contained, hereby agrees at his own proper cost and expense to furnish all the materials for MOLD REMEDIATION AT THE KEY WEST POLICE STATION, Key West, Florida to the extent of the Bid made by the Vendor, dated the \_\_\_\_\_ day of 201\_, all in full compliance with the bid referred to herein.

In consideration of the materials provided as set forth in the bid, the Owner agrees to pay to the Vendor the amount in the bid as adjusted in accordance with the Contract, or as otherwise herein provided, and to make such payments in the manner and at the times provided in the Contract.

The Vendor agrees to supply the materials as specified in the Contract and to accept as full payment hereunder the amounts computed as determined by the Contract and based on the said bid. The Vendor agrees to remedy all defects developing in the work under this Contract during the warranty period and further agrees to indemnify and save the Owner harmless from any costs encountered in remedying such defects.

IN WITNESS WHEREOF, we, the parties hereto, each herewith subscribe the same this

\_\_\_\_\_ day of \_\_\_\_\_, A.D., 201\_.

**SIGNATURE PAGE**

CITY OF KEY WEST

By \_\_\_\_\_

Title \_\_\_\_\_

CONTRACTOR

By \_\_\_\_\_

Title \_\_\_\_\_

APPROVED AS TO FORM

\_\_\_\_\_  
Attorney for Owner

\* \* \* \*



**Florida**  
DRIVER LICENSE CLERK  
# M235-163-64-1 B M

CHARLES  
WENTEN III  
285 WATSON DR  
INDIANLANTIC FL 32903-0050  
DOB 05-28-1964 SEX M  
ISSUED 04-15-2002 EXP 5-31-05  
EXPIRES 05-28-2003  
PLAT A  
EYES BROWN



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783

(850) 487-1395

MESTAYER, DANIEL CHARLES  
CONSOLIDATED ENVIRONMENTAL ENGINEERING, LLC  
P O BOX 33221  
INDIALANTIC FL 32903

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STATE OF FLORIDA AC# 6233653  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CBC1258704 07/30/12 120044553

CERTIFIED BUILDING CONTRACTOR  
MESTAYER, DANIEL CHARLES  
CONSOLIDATED ENVIRONMENTAL ENGIN

IS CERTIFIED under the provisions of Ch. 489 FS  
Expiration date: AUG 31, 2014 L12073001238

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AC# 6233653

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12073001238

DATE	BATCH NUMBER	LICENSE NBR
07/30/2012	120044553	CBC1258704

The BUILDING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

MESTAYER, DANIEL CHARLES  
CONSOLIDATED ENVIRONMENTAL ENGINEERING, LLC  
3135 SKYWAY CIRCLE STE 101  
MELBOURNE FL 32934

RICK SCOTT  
GOVERNOR

KEN LAWSON  
SECRETARY

DISPLAY AS REQUIRED BY LAW



# CITY OF KEY WEST, FLORIDA

## Business Tax Receipt

This Document is a business tax receipt  
Holder must meet all City zoning and use provisions.  
P.O. Box 1409, Key West, Florida 33040 (305) 809-3955

CONSOLIDATED ENVIRONMENTAL ENG CtInbr:0022517

Business Name  
Location Addr  
Lic NBR/Class  
Issue Date:  
License Fee  
Add. Charges  
Penalty  
Total

CONSOLIDATED ENVIRONMENTAL ENG  
3135 SKYWAY CIR  
14-00027805 CONTRACTOR - CERT BUILDING  
August 19, 2013 Expiration Date: September 30, 2014  
\$309.75  
\$0.00  
\$0.00  
\$309.75

Comments:

OR LIC OCCUPATIONAL RENEWAL  
This document must be prominent. ~~Trans displayed.~~  
CONSOLIDATED ENVIRONMENTAL ENG

Oper: CYVALKER  
Date: 8/26/13 54  
2814

Type: OC Drawer: 1  
Receipt no: 99829

1.98  
\$309.75  
\$309.75

Trans date: 8/26/13 Time: 13:41:45

CONSOLIDATED ENVIRONMENTAL ENG

3135 SKYWAY CIR #101

MELBOURNE FL 32934

**2013 / 2014  
MONROE COUNTY BUSINESS TAX RECEIPT  
EXPIRES SEPTEMBER 30, 2014**

Business Name: CONSOLIDATED ENVIRONMENTAL  
ENGINEERING LLC

RECEIPT# 30140-101565

Owner Name: TIMOTHY N SCOTT, THOMAS R WILSON  
Mailing Address: QUALIFIER  
3135 SKYWAY CIRCLE STE 101  
MELBOURNE, FL 32934

Business Location: MO CTY  
KEY WEST, FL 33040  
Business Phone: 321-951-3830  
Business Type: CONTRACTOR (CERTIFIED BUILDING)

Employees 1

STATE LICENSE: CBC1257083

Tax Amount	Transfer Fee	Sub-Total	Penalty	Prior Years	Collection Cost	Total Paid
20.00	0.00	20.00	0.00	0.00	0.00	20.00

Paid 123-12-00007746 08/16/2013 20.00

THIS BECOMES A TAX RECEIPT  
WHEN VALIDATED

**Danise D. Henriquez, CFC, Tax Collector**  
PO Box 1129, Key West, FL 33041

THIS IS ONLY A TAX.  
YOU MUST MEET ALL  
COUNTY AND/OR  
MUNICIPALITY PLANNING  
AND ZONING REQUIREMENTS.

**MONROE COUNTY BUSINESS TAX RECEIPT  
P.O. Box 1129, Key West, FL 33041-1129  
EXPIRES SEPTEMBER 30, 2014**

Business Name: CONSOLIDATED ENVIRONMENTAL  
ENGINEERING LLC

RECEIPT# 30140-101565

Owner Name: TIMOTHY N SCOTT, THOMAS R WILSON  
Mailing Address: QUALIFIER  
3135 SKYWAY CIRCLE STE 101  
MELBOURNE, FL 32934

Business Location: MO CTY  
KEY WEST, FL 33040  
Business Phone: 321-951-3830  
Business Type: CONTRACTOR (CERTIFIED BUILDING)

Employees 1

STATE LICENSE: CBC1257083

Tax Amount	Transfer Fee	Sub-Total	Penalty	Prior Years	Collection Cost	Total Paid
20.00	0.00	20.00	0.00	0.00	0.00	20.00

Paid 123-12-00007746 08/16/2013 20.00

# CERTIFICATE OF LIABILITY INSURANCE

Date  
12/11/2012

**Producers:** Lion Insurance Company  
2739 U.S. Highway 19 N.  
Holiday, FL 34691  
(727) 938-5562

**Insured:** South East Personnel Leasing, Inc. & Subsidiaries  
2739 U.S. Highway 19 N.  
Holiday, FL 34691

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		

## Coverages

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. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSR	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur <hr/> General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$
						Damage to rented premises (EA occurrence)	\$
						Med Exp	\$
						Personal Adv Injury	\$
						General Aggregate	\$
						Products - Comp/Op Agg	\$
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$
						Bodily Injury (Per Person)	\$
						Bodily Injury (Per Accident)	\$
						Property Damage (Per Accident)	\$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made Deductible				Each Occurrence	
						Aggregate	
A		<b>Workers Compensation and Employers' Liability</b> Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2013	01/01/2014	X WC Statutory Limits	OTH-ER
						E.L. Each Accident	\$1,000,000
						E.L. Disease - Ea Employee	\$1,000,000
						E.L. Disease - Policy Limits	\$1,000,000

Other **Lion Insurance Company is A.M. Best Company rated A- (Excellent). A.M.B. # 12616**

**Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:** Client ID: 84-67-162  
 Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":  
**Consolidated Environmental Engineering, LLC.**

Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in Florida.  
 Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.  
 A list of the active employee(s) leased to the Client Company can be obtained by faxing a request to (727) 937-2138 or by calling (727) 938-5562.  
**Project Name: FOR BID PURPOSES**  
**ISSUE 11-09-12 (CF)**

CERTIFICATE HOLDER	CANCELLATION
<b>CONSOLIDATED ENVIRONMENTAL ENGINEERING LLC</b>  3135 SKYWAY CIRCLE, STE 101 MELBOURNE FL 32934	Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

*[Signature]*

Begin Date: 6/11/2012



# CERTIFICATE OF LIABILITY INSURANCE

CONSO-1

OP ID: GJ

DATE (MM/DD/YYYY)  
03/20/2013

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 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> Insurance By Ken Brown, Inc. PO Box 948117 Maitland, FL 32794-8117 Kerry C. Tait	Phone: 321-397-3870 Fax: 321-397-3888	<b>CONTACT NAME:</b> PHONE (A/C, No. Ext): E-MAIL ADDRESS: FAX (A/C, No):
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Consolidated Environmental Eng LLC 3135 Skyway Circle, ste. 101 Melbourne, FL 32934	<b>INSURER A:</b> Westchester Surpl Lines Ins Co	
	<b>INSURER B:</b> Charter Oak Fire Ins Co	
	<b>INSURER C:</b> Ace Westchester	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**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	ADOL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Prof liab/claims GEN. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LCC		G24377179001	03/16/2013	03/16/2014	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		BA2A83295612	06/29/2012	06/29/2013	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0		G24377258001	03/16/2013	03/16/2014	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	<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 <input type="checkbox"/> N/A				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER****CANCELLATION**

FORILLU

For Illustrative Purposes Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY TERMS AND CONDITIONS.

AUTHORIZED REPRESENTATIVE



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MOLD-RELATED SERVICES LICENSING PROGRAM  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783

(850) 487-1395

MESTAYER, DANIEL C III  
P O BOX 33221  
INDIALANTIC FL 32903

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STATE OF FLORIDA AC# 6130805  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MRSA30 05/17/12 110385195

MOLD ASSESSOR  
MESTAYER, DANIEL C III

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Expiration date: JUL 31, 2014 L12051701060

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DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
MOLD-RELATED SERVICES LICENSING PROGRAM

SEQ# L12051701060

DATE	BATCH NUMBER	LICENSE NBR
05/17/2012	110385195	MRSA30

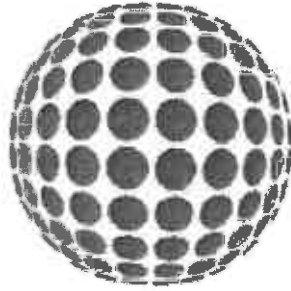
The MOLD ASSESSOR  
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Under the provisions of Chapter 468 FS.  
Expiration date: JUL 31, 2014

MESTAYER, DANIEL C III  
P O BOX 33221  
INDIALANTIC FL 32903

RICK SCOTT  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KEN LAWSON  
SECRETARY



# IICRC

Institute of Inspection Cleaning  
and Restoration Certification

*be it known that:*

**DR. TIMOTHY N. SCOTT**

Is a registrant in good standing with IICRC, and has qualified by service and examination  
for Certification in the following areas:

**WATER DAMAGE RESTORATION  
APPLIED MICROBIAL REMEDIATION**

and has pledged to perform services in these areas with skill, honesty,  
and integrity in order to provide the consumer with the highest degree  
of professionalism possible.

**180432**  
**REGISTER NUMBER**

**5/2014**  
**EXPIRATION DATE**



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MOLD-RELATED SERVICES LICENSING PROGRAM  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783

(850) 487-1395

SCOTT, TIMOTHY NEAL  
339 LANSING ISLAND DR  
SATELLITE BEACH FL 32937

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STATE OF FLORIDA AC# 6126912  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MRSA6 05/14/12 110382344

MOLD ASSESSOR  
SCOTT, TIMOTHY NEAL

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STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
MOLD-RELATED SERVICES LICENSING PROGRAM

SEQ# L12051400700

DATE	BATCH NUMBER	LICENSE NBR
05/14/2012	110382344	MRSA6

The MOLD ASSESSOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 468 FS.  
Expiration date: JUL 31, 2014

SCOTT, TIMOTHY NEAL  
339 LANSING ISLAND DR  
SATELLITE BEACH FL 32937

RICK SCOTT  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KEN LAWSON  
SECRETARY



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MOLD-RELATED SERVICES LICENSING PROGRAM  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783

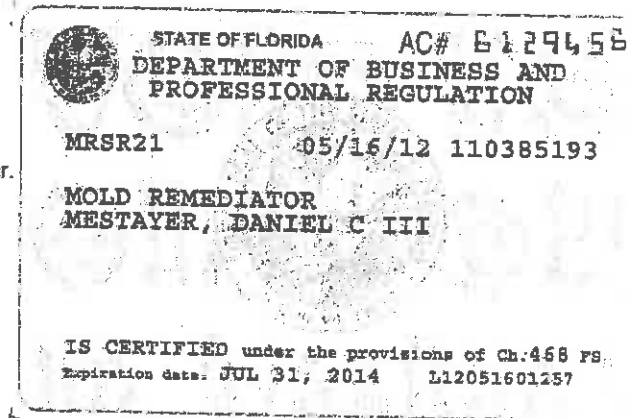
(850) 487-1395

MESTAYER, DANIEL C III  
P O BOX 33221  
INDIALANTIC FL 32903

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STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
MOLD-RELATED SERVICES LICENSING PROGRAM

SEQ# L12051601257

DATE	BATCH NUMBER	LICENSE NBR
05/16/2012	110385193	MRSR21

The MOLD REMEDIATOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 468 FS.  
Expiration date: JUL 31, 2014

MESTAYER, DANIEL C III  
P O BOX 33221  
INDIALANTIC FL 32903

RICK SCOTT  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KEN LAWSON  
SECRETARY





STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MOLD-RELATED SERVICES LICENSING PROGRAM  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783

(850) 487-1395


SCOTT, TIMOTHY NEAL  
3135 SKYWAY CIRCLE  
MELBOURNE

FL 32934

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STATE OF FLORIDA AC# 6126927  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

MRSR4 05/14/12 110382338

MOLD REMEDIATOR  
SCOTT, TIMOTHY NEAL

IS CERTIFIED under the provisions of Ch. 468 FS  
Expiration date: JUL 31, 2014 L12051400715

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STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
MOLD-RELATED SERVICES LICENSING PROGRAM

SEQ# L12051400715

DATE	BATCH NUMBER	LICENSE NBR
05/14/2012	110382338	MRSR4

The MOLD REMEDIATOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 468 FS.  
Expiration date: JUL 31, 2014

SCOTT, TIMOTHY NEAL  
3135 SKYWAY CIRCLE  
MELBOURNE

FL 32934

RICK SCOTT  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KEN LAWSON  
SECRETARY