Notice to Bidder: Use Black Ink or Type For Completing the Form.

BID

To:

The City of Key West

Address:

525 Angela Street, Key West, Florida 33040

Project Title:

SECURITY SERVICES: CITY OF KEY WEST PORT OPERATIONS, KEY

WEST BIGHT, CITY MARINA

Project:

ITB #10-011

BIDDER'S INFORMATION

Company Name:

PARADISÉ PROTECTION

Address:

3330 NORTHSIDE DR # 415

KEY WOST, FL 33040

Contact Name:

JOHN THOMAS PARMOWSILL

Email:

PARADISE PROTERT @ AOL. Com

Telephone:

305-293-9815

Fax:

305-293-9815

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 the Contract Documents for the work, that he/she has personally inspected the work areas, that he/she has satisfied himself/herself as to the personnel needed, and conditions of work involved, including the fact that the description of the work and materials, as included herein, is brief and is intended only to indicate the general nature of the work.

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

CONTRACT EXECUTION

The Bidder agrees that if his Bid is accepted, he/she will, within twenty (20) 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.

ADDENDA

The Bidder hereby acknowledges that he has received Addenda No's. , , , , , , , , , , , , (Bidder shall insert No. of each Addendum received) and agrees that all addenda issued are hereby made part of the Contract Documents, and the Bidder further agrees that his Bid(s) includes all impacts resulting from said addenda.

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."

BID FORM

ITB #10-011: SECURITY SERVICES: CITY OF KEY WEST PORT OPERATIONS, KEY WEST BIGHT, CITY MARINA

*The approximate required security services for each facility is outlined in Section 3: Scope of Work

Mallory Square				
Hourly Rate \$ 16.00 per security personnel				
In Words: SIXITEN DOLLARS ZERO CETNIS				
Outer Mole at the Truman Waterfront				
Hourly Rate \$ 16.00 per security personnel				
In Words: SIXTEEN DOWNES ZENO CETVIS				
Key West Bight Ferry Terminal				
Hourly Rate \$ 16.00 per security personnel				
In Words: SIXTURY DOWARS ZERO CENTS				
Key West Bight				
Hourly Rate \$ 16.00 per security personnel				
In Words: SIXTEON DOLLARS ZENO CETATS				
City Marina				
Hourly Rate \$ 16.00 per security personnel				
In Words: SIXTERN DOLLARS ZONO CONS				
HN THOMAS PARMO WSICI July who while				

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: WE WILL NOT BE USING SUBCONTRACTORS
Name: Name:
Address: ———————————————————————————————————
Portion of Work:
Name:
Address:
Portion of Work:
Name:
Address:
BIDDER FOLIN THOMAS PALMOWSKI OBA
The name of the Bidder submitting this Bid is: PARADISE PROTECTION
Doing business at 3330 NORTHSIDE DR. #415
City Key West State F2 Zip 33040
Telephone No. 305-293-9815
This address is where all communications concerning this Bid shall be sent.
John when Markelle

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	
JOHN THOMAS PALMOWSKI	OWNER	
John THOMAS PALMOWSKI		
If Corporation		
IN WITNESS WHEREOF the undersigned corpora and its seal affixed by its duly authorized officers the	ation has caused this instrument to be executive thisday of, 20	uted 010.
(SEAL)		
Name of Corporation		
By:		
Title:		
Attest:		
Secretary		
If Sole Proprietor or Partnership		
IN WITNESS hereto the undersigned has set his/he 2010.	er/its hand this 14 th day of July	
Signature of Bidder Juliani Title OWNIER	anti	
Title OWNER		

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

PROJECT ITB #10-011: SECURITY SERVICES: CITY OF KEY WEST PORT OPERATIONS, KEY WEST BIGHT, CITY MARINA

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

ration.	HORDED TO ADMINISTER OFFICE.
1.	This sworn statement is submitted with Bid, Bid or Contract No
	CITY OF KAY WEST
2.	And the Pendindo Tol-IN THOMAS PALMOWSILL - PARADISE PROTECTION (Name of entity submitting sworn statement)
	whose business address is 3330 North 105 Or #415
	Kry West, FL 33040 and (if applicable) its Federal
	Employer Identification Number (FEIN) is 30-860 5437 (If the entity has no FEIN,
	include the Social Security Number of the individual signing this sworn statement.)
3.	My name is MELISSA R ZIEWNSICI and my relationship to (Please print name of individual signing)
	the entity named above is BANKER.
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	Lunderstand that "convicted" or "conviction" as defined in Paragraph 287 133(I)(h). Florida Statutes, means

a finding of guilt or a conviction of a public entity crime, with or without an adjudication 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.

- I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means 6.
 - A predecessor or successor of a person convicted of a public entity crime: or 1.
 - 2. An entity under the control of any natural person who is active in the management of t 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.

I understand that a "person" as defined in Paragraph 287.133(1)(8), Florida Statutes, means any natural 7. 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. Based on information and belief, the statement, which I have marked below, is true in relation to the entity 8. submitting this sworn statement. (Please indicate which statement applies.) X 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 no 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. Them has been a subsequent proceeding before a hearing officer of the Sate 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.) (Date) STATE OF COUNTY OF monroc PERSONALLY APPEARED BEFORE ME, the undersigned authority, Thomas Palmy ski who, after first being sworn by me, affixed his/her signature in the



day of July

(Name of individual signing)

space provided above on this 14th

My commission expires: 9113110

ANTI-KICKBACK AFFIDAVIT

	TY SERVICES: CITY OF KEY WEST PORT TIONS, KEY WEST BIGHT, CITY MARINA
STATE OF FLORIDA	
	: SS
COUNTY OF MONROE)
be paid to any employees of the	orn, depose and say that no portion of the sum herein bid will City of Key West as a commission, kickback, reward or gift, member of my firm or by an officer of the corporation.
	By: Joh wood Malado SOHN THOMAS PALMOWSKI
Sworn and subscribed before me the	is
14th day of July	, 2010.
Melina R Zur NOTARY PUBLIC, State of Flori	la at Large
My Commission Expires: 91	3/10
Notary Public State of Melissa R Zielinski My Commission DD Expires 09/13/2010	

LOCAL VENDOR CERTIFICATION PURSUANT TO CKW ORDINANCE 09-22 SECTION 2-798

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 FL 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 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.
- 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 09-22 Section 2-798
 - Qualifies as a local vendor pursuant to Ordinance 09-22 Section 2-798

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: PARADISE PROTECTION	Phone: <u>305-293-9815</u>
Current Local Address: 3330 Nonth Side On. #41 (P.O. Box numbers may not be used to establish status)	SOHN THOMAS PALMOWSILL
Length of time at this address: SMINTHS	Jes notes Rulmile
Wer the Kulmelo	9-14- 2010
Signature of Authorized Representative	Date
STATE OF Florida COUNTY OF MUNICOL	
The foregoing instrument was acknowledged before me By John Thomas Palmowski	this 14th day of July, 2010.
(Name of officer or agent, title of officer or agent)	(Name of corporation acknowledging)
or has produced FL Drivers License	as identification
(type of identification)	- D
	Melina K Zamus
Notary Public State of Florida Melissa R Zielinski My Commission DD669345	Signature of Notary
7 05 510 Fabricae 00/13/2010	Melissa R Zielinski
Return Completed form with Supporting documents to:	Print, Type or Stamp Name of Notary
City of Key West Purchasing	Personal Banker
ord of the state o	Title or Pank

References for:

Paradise Protection 3330 Northside Dr # 415 Key West, FL 33040 305-293-9815 ParadiseProtect@aol.com

These are CURRENT clients who Paradise Protection currently provides Security for: Paradise Protection has been providing Security for the following clients since April 1, 2007

- 1. Key Plaza Paul Reece 305-731-9206
- 2. Harborside Motel and Marina Mike Mell 305-294-2780
- Spanish Gardens Motel Carl Masiello 305-294-1051
- 4. Professional Building Gus 305-797-2371
- 5. Spindrift Motel Danny 305-296-3432
- 6. Stick-n-Stein Chevi Meister 305-296-3352
- 7. Kmart Frank Rodriquez 305-293-9211
- 8. Albertsons Don Clay 305-292-2013
- 9. Southwinds Motel Linda 305-296-2215

To: The City of Key West, Florida

For Bid: SECURITY SERVICES: CITY OF KEY WEST PORT OPERATIONS, KEY WEST BIGHT, CITY MARINA: ITB NO: 10-011

Paradise Protection 3330 Northside Dr #415 Key West, FL 33040 305-293-9815 ParadiseProtect@aol.com

Paradise Protection does NOT have and has NEVER had ANY legal actions against it.

John Thomas Palmowski

Owner / Paradise Protection

july store for hold

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

Business Name

PARADISE PROTECTION

CtlNbr:0017346

Location Addr

3330 NORTHSIDE DR 415

Lic NBR/Class

11-00024264 SERVICE - PROFESSIONAL

Issue Date:

July 06, 2010 Expiration Date: September 30, 2011

License Fee

\$309.75

Add. Charges

\$0.00

Penalty

\$0.00

Total

\$309.75

Comments: SECURITY AGENCY

HOME OCCUPATION LICENSE

This document must be prominently displayed

PALMOWSKI; JOHN

PARADISE PROTECTION 3330 NORTHSIDE DR #415

loma data: 7/66/10

KEY WEST FL 33040

2010 / 2011 MONROE COUNTY BUSINESS TAX RECEIPT **EXPIRES SEPTEMBER 30, 2011**

RECEIPT# 46110-96808

Business Name: PARADISE PROTECTION

Owner Name: JOHN PALMONSKI

Mailing Address: 3330 NORTHSIDE DR #415

KEY WEST, FL 33040

Business Location: MO CTY

KEY WEST, FL 33040

Business Phone: Business Type:

305-293-9815 **PROFESSIONALS**

(PROFESSIONALS SECURITY

SERVICE)

Employees

Stalls

STATE LICENSE: 2700007

For Vending Business Only Vending Type : Number of Machines

Sub-Total Penalty Prior Years Collection Cost Total Paid Transfer Fee Tax Amount \$30.00 \$0.00 \$30.00 \$30.00

PAID-000-09-00001638

07/03/2010

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

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.

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

CHARLES H. BRONSON COMMISSIONER DIVISION OF LICENSING

ISSUE DATE: 10/30/09

LICENSE NO. B 2700007

THE AGENCY OR SCHOOL NAMED BELOW IS LICENSED AND REGULATED UNDER THE PROVISIONS OF CHAPTER 493, FLORIDA STATUTES, FOR THE PERIOD EXPIRING MARCH 06, 2013

SECURITY AGENCY

PARADISE PROTECTION
UNITED STREET
KEY WEST, FL 33040

PALMOWSKI, JOHN T.



Charles H Bronson

CHARLES H. BRONSON COMMISSIONER