BID NO.: 8239-0/24

INITIAL OPENING: 2:00 P.M.
Wednesday,
January 8, 2014

MIAMI-DADE COUNTY, FLORIDA

R E Q U E S T
T O Q U A L I F Y (R T Q)

TITLE:
LOT CLEARING SERVICES, RTQ

FOR INFORMATION CONTACT:
Lina Bonilla, 305-375-2173, lbonill@miamidade.gov

IMPORTANT NOTICE TO SUBMITTERS:

READ THIS ENTIRE DOCUMENT, THE GENERAL TERMS AND CONDITIONS, AND HANDLE ALL QUESTIONS IN ACCORDANCE WITH THE TERMS OUTLINED IN PARAGRAPH 1.2(D) OF THE GENERAL TERMS AND CONDITIONS

MIAMI-DADE COUNTY
INTERNAL SERVICES DEPARTMENT
PROCUREMENT MANAGEMENT SERVICES DIVISION

MIAMI-DADE COUNTY, FLORIDA

REQUEST TO QUALIFY

Bid Number: 8239-0/24

Title: Lot Clearing Services

Procurement Officer: Lina Bonilla, CPPB

Submittals will be accepted until 2:00 p.m. on Wednesday, January 8, 2014

Submittals will be publicly opened. The County provides equal access and does not discriminate on the basis of disability in its programs or services. It is our policy to make all communication available to the public, including those who may be visually or hearing impaired. If you require information in a non-traditional format, please call 305-375-5278.

Instructions: The Clerk of the Board business hours are 8:00am to 4:30pm, Monday through Friday. Additionally, the Clerk of the Board is closed on holidays observed by the County. Each bid submitted to the Clerk of the Board shall have the following information clearly marked on the face of the envelope: the Submitter's name, return address, Bid number, opening date of the Bid, and the title of the Bid. Included in the envelope shall be an original and two copies of the Submittal, plus attachments if applicable.

All Submittals received will be time and date stamped by the Clerk of the Board prior to the Submittal deadline shall be accepted as timely submitted. The circumstances surrounding all Submittals received and time stamped by the Clerk of the Board after the Submittal deadline will be evaluated by the procuring department, in consultation with the County Attorney's Office, to determine whether the bid will be accepted as timely.

NOTICE TO ALL SUBMITTERS:

- THE SUBMITTAL FORM CONTAINS IMPORTANT CERTIFICATIONS THAT REQUIRE REVIEW AND COMPLETION BY ANY SUBMITTER RESPONDING TO THIS REQUEST TO QUALIFY

MIAMI-DADE COUNTY
INTERNAL SERVICES DEPARTMENT
PROCUREMENT MANAGEMENT SERVICES DIVISION

SECTION 1
GENERAL TERMS AND CONDITIONS

LOT CLEARING SERVICES

All general terms and conditions of Miami-Dade County Procurement Contracts for Invitations to Bid are posted online. Persons and Companies that receive an award from Miami-Dade County through Miami-Dade County's competitive procurement process must anticipate the inclusion of these requirements in the resultant Contract. These standard general terms and conditions are considered non-negotiable subject to the County's final approval.

All applicable terms and conditions pertaining to this solicitation and resultant contract may be viewed online at the Miami-Dade County Procurement Management website by clicking on the below link:

http://www.miamidade.gov/procurement/library/boilerplate/general-terms-and-conditions-**r13-8**.pdf

SECTION 2
SPECIAL CONDITION
LOT CLEARING SERVICES

2.1 PURPOSE

This Request to Qualify (RTQ) will establish a pool of Vendors capable of providing lot clearing services. Entry into the Pre-qualification Pool is not a contract between Miami-Dade County and any Vendor, but an acknowledgement that the included Vendors meet the qualifications as outlined throughout this RTQ. Pre-qualified Vendors will be invited to participate in future competitions. The pool shall be open for Submitters to qualify at any time after the initial RTQ opening date.

DEFINITIONS

a. **Submitter:** Shall refer to anyone responding to this RTQ.
b. **Submittal:** Shall refer to the form submitted in response to this RTQ.
c. **Vendor:** Any submitter who has provided applicable documentation and has been pre-qualified.
d. **RFQ:** Request for quotation.
e. **Lot Clearing Services:** Shall refer to the removal and disposal of, trees, weeds, cuttings from vegetation, paper, can, scrap metal, scrap lumber, abandoned equipment such as white goods, auto bodies, bicycles and demolition debris. Lot clearing includes but is not limited to tractor mowing, mechanical clearing (e.g., use of a Bobcat machine), chipping, hand trimming, weed eating, manual pickup; loading and hauling both light or heavy disposal of solid waste.

2.2 SMALL BUSINESS CONTRACT MEASURES

In addition to the Small Business Contract Measures listed in Section 1.0 Paragraph 1.43 the following is applicable

- Measures do not apply to federally funded projects.

2.3 CONFERENCES

Conferences may apply if so defined in the Request for Quotation (RFQ).

2.4 TERM

The Pre-qualification Pool will begin on the first calendar day of the month succeeding approval by the Board of County Commissioners, or designee, unless otherwise stipulated in the Notice of Award Letter which is distributed by the County's Internal Services Department, Procurement Management Services Division, and contingent upon the completion and submittal of all required RTQ documents. The Pre-qualification Pool shall expire on the last day of the last month of the ten-year period.

2.5 QUALIFICATION CRITERIA

This RTQ will be used by various County departments to solicit vendors capable of providing lot clearing services as required per Section 10-3 of the Miami-Dade County Code of Ordinances. Submitters who meet the following minimum qualifications will be placed on a pre-qualified vendors' list and will be invited to participate in subsequent RFQ.

SECTION 2
SPECIAL CONDITION
LOT CLEARING SERVICES

a. Submitters shall provide proof of a valid Miami-Dade County General Hauling Permit issued by the Public Works and Waste Management Department.

b. Submitters shall provide a list of no less than three client references who can confirm that the Submitter has successfully provided lot clearing services. Each reference shall include the following: contact's name, telephone number, e-mail address, dates of service and location serviced.

Submitters shall provide all of the specified information, documents and attachments listed above with their submittal form as proof of compliance to the requirements of this RTQ. The County may, at its sole discretion and in its best interest, allow Submitters to complete, supplement or supply the required documents.

It shall be the sole prerogative of the County as to the number of Submitters who will be included under this RTQ. During the term of the RTQ, the County reserves the right to add or delete Submitters as it deems necessary and in its best interest.

2.6 SITE VISITS

Site visits may apply as specified in the RFQ.

2.7 LIQUIDATED DAMAGES

Liquidated damages may apply if so specified in the RFQ.

2.8 INDEMNIFICATION AND INSURANCE

Additional or revised insurance requirements may be necessary when performing work in certain County facilities that limit or restrict access above and beyond Section 1.21 of this RTQ. Any change or addition in insurance requirements will be detailed in the RFQ.

2.9 CONTACT PERSON

For any additional information regarding the Terms and Conditions of this RTQ, contact Lina Bonilla at 305-375-2173 or by e-mail at lbonill@miamidade.gov.

2.10 DAVIS-BACON ACT

The Davis-Bacon Act may apply if so defined in the RFQ.

2.11 MIAMI-DADE PUBLIC HOUSING AG

This RTQ will be accessed by the Miami-Dade Public Housing and Community Development Department. As a federally funded agency the following certain clauses within this RTQ do not apply to that Department's allocation:

Section 1 Paragraph 1.10 (Local Preferences), Section 1 Paragraph 1.27 (Office of the Inspector General), Section 1, Paragraph 1.43 (Small Business Contract Measures), and Section 1 Paragraph 1.35 (County User Access Program – UAP).

SECTION 3
TECHNICAL SPECIFICATIONS

3.1 SCOPE

This RTQ is intended to establish a pool of Pre-qualified Vendors to provide lot clearing services for Miami-Dade County. The scope of work consists of multiple site-specific lot clearing projects within two geographically defined zones: Zone 1 encompasses NW County Line Road from the Everglades to Biscayne Bay and South to SW 104 ST, and Zone 2 encompasses SW 104 ST from the Everglades to Biscayne Bay and South to the Miami-Dade County-Monroe County Line Road.

There are three categories of work for each zone:

- **Category 1** requires the awardee to perform tractor mowing, chipping, trimming, weed eating and light disposal of solid waste products.
- **Category 2** requires the awardee to perform mechanical clearing, chipping, trimming, weed eating and light disposal of solid waste products.
- **Category 3** requires the awardee to perform loading, hauling and light or heavy disposal of solid waste products.

Zone and category to be serviced will be specified in the RFQ.

MIAMI-DADE COUNTY

BID NO.: 8239-0/24

SECTION 4
RTQ SUBMITTAL FORM

Submit Bid To:
CLERK OF THE BOARD
Stephen P. Clark Center
111 NW 1st Street
17th Floor, Suite 202
Miami, Florida 33128-1983

OPENING: 2:00 P.M.
Wednesday,
January 8, 2014

PLEASE QUOTE PRICES F.O.B. DESTINATION, FREIGHT ALLOWED, LESS TAXES, DELIVERED IN MIAMI-DADE COUNTY, FLORIDA.

NOTE: Miami-Dade County is exempt from all taxes (Federal, State, Local). Bid price should be less all taxes. Tax Exemption Certificate furnished upon request.

Issued by: **LB**	ISD/PM	Date Issued: **12/24/2013**	This Submittal Consists of Pages **5** through **9**

Sealed Submittals are subject to the Terms and Conditions of this Request to Qualify and the accompanying Submittal documents. Such other contract provisions, specifications, drawings or other data as are attached or incorporated by reference in the Submittal, will be received at the office of the Clerk of the Board at the address shown above until the above-stated time and date, and at that time, publicly opened for furnishing the supplies or services described in the accompanying RTQ Submittal Requirements.

Title:
Lot Clearing Services

A Bid Deposit in the amount of **NA** the total amount of the bid shall accompany all Submittals.

A Performance Bond in the amount of **NA** the total amount of the bid will be required upon execution of the contract by the successful Submitter and Miami-Dade County.

DO NOT WRITE IN THIS SPACE

ACCEPTED _____ HIGHER THAN LOW _____
NON-RESPONSIVE _____ NON-RESPONSIBLE _____

DATE B.C.C. _____ NO BID _____

ITEM NOS. ACCEPTED _____

COMMODITY CODE: **988-36, 988-56 and 910-27**

Procurement Contracting Officer: **Lina Bonilla**

FIRM NAME _____

RETURN ONE ORIGINAL AND TWO COPIES OF SUBMITTAL PAGES AND AFFIDAVITS

SECTION 4
RTQ SUBMITTAL FOR:
Lot Clearing Services

FIRM NAME: _____

Submitters shall provide the following for informational purposes:

Company name _____ Contact person _____
Office location _____ Office # _____
E-mail address _____ Fax # _____
Supervisor Name _____ Emergency contact # _____

Qualification Criteria	
General Hauling Permit	**Attach a copy**

Client Reference No. 1	Name: _____ Telephone No.: _____ Email Address: _____ Dates of Service: From _____ to _____ Location(s) Serviced: _____
Client Reference No. 2	Name: _____ Telephone No.: _____ Email Address: _____ Dates of Service: From _____ to _____ Locations(s) Serviced: _____
Client Reference No. 3	Name: _____ Telephone No.: _____ Email Address: _____ Dates of Service: From _____ to _____ Locations(s) Serviced: _____

SECTION 4
RTQ SUBMITTAL FOR:
Lot Clearing Services

ACKNOWLEDGEMENT OF ADDENDA

INSTRUCTIONS: COMPLETE PART I OR PART II, WHICHEVER APPLIES

PART I:

LIST BELOW THE DATES OF ISSUE FOR EACH ADDENDUM RECEIVED IN CONNECTION WITH THIS RTQ

Addendum #1, Dated _____

Addendum #2, Dated _____

Addendum #3, Dated _____

Addendum #4, Dated _____

Addendum #5, Dated _____

Addendum #6, Dated _____

Addendum #7, Dated _____

Addendum #8, Dated _____

PART II:

☐ NO ADDENDUM WAS RECEIVED IN CONNECTION WITH THIS BID

FIRM NAME: _____

AUTHORIZED SIGNATURE: _____ **DATE:** _____

TITLE OF OFFICER: _____

MIAMI-DADE COUNTY

RTQ SUBMITTAL FORM

Bid Title: Lot Clearing Services

By signing this Submittal Form the Submitter certifies that it satisfies all legal requirements (as an entity) to do business with the County, including all Conflict of Interest and Code of Ethics provisions in Section 2-11 of the Miami-Dade County Code. Any County employee or member of his or her immediate family seeking to contract with the County shall seek a conflict of interest opinion from the Miami-Dade County Ethics Commission prior to submittal of a Bid response or application of any type to contract with the County by the employee or his or her immediate family and file a copy of that request for opinion and any opinion or waiver from the Board of County Commissioners with the Clerk of the Board. The affected employee shall file with the Clerk of the Board a statement in a form satisfactory to the Clerk disclosing the employee's interest or the interest of his or her immediate family in the proposed contract and the nature of the intended contract at the same time as or before submitting a Bid, response, or application of any type to contract with the County. Also a copy of the request for a conflict of interest opinion from the Ethics Commission and any corresponding opinion, or any waiver issued by the Board of County Commissioners, must be submitted with the response to the Request to Qualify.

In accordance with Sec. 2-11.1(s) of the County Code as amended, prior to conducting any lobbying **regarding this Request to Qualify, the Submitter must file the appropriate form with the Clerk of the Board stating that a particular lobbyist is authorized to represent the Submitter**. Failure to file the appropriate form in relation to each solicitation may be considered as evidence that the Submitter is not a responsible contractor.
The Submitter confirms that this Bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Bid for the same goods and/or services and in all respects is without collusion, and that the Submitter will accept any resultant award. Further, the undersigned acknowledges that award of a contract is contingent upon vendor registration. Failure to register as a vendor within the specified time may result in your firm not being considered for award.

Pursuant to Miami-Dade County Ordinance 94-34, any individual, corporation, partnership, joint venture or other legal entity having an officer, director, or executive who has been convicted of a felony during the past ten (10) years shall disclose this information at the time of the Submittal submission.

☐ **Place a check mark here only if Submitter has such conviction to disclose.**

By executing this Request to Qualify through a duly authorized representative, the Submitter certifies that the Submitter is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, as those terms are used and defined in sections 287.135 and 215.473 of the Florida Statutes. In the event that the Submitter is unable to provide such certification but still seeks to be considered for award of this Request to Qualify, the Submitter shall execute the Submittal through a duly authorized representative and shall also initial this space: _____. In such event, the Submitters shall furnish together with its Submittal a duly executed written explanation of the facts supporting any exception to the requirement for certification that it claims under Section 287.135 of the Florida Statutes. The Submitter agrees to cooperate fully with the County in any investigation undertaken by the County to determine whether the claimed exception would be applicable. The County shall have the right to terminate any contract resulting from this Request to Qualify for default if the Submitter is found to have submitted a false certification or to have been placed on the Scrutinized Companies for Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

LOCAL PREFERENCE CERTIFICATION: For the purpose of this certification, a "local business" is a business located within the limits of Miami-Dade County (or Broward County in accordance with the Interlocal Agreement between the two counties) that conforms with the provisions of Section 1.10 of the General Terms and Conditions of this Request to Qualify and contributes to the economic development of the community in a verifiable and measurable way. This may include, but not be limited to, the retention and expansion of employment opportunities and the support and increase to the County's tax base.

☐ **Place a check mark here only if affirming Submitter meets requirements for Local Preference. Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for Local Preference.**

LOCALLY-HEADQUARTERED BUSINESS CERTIFICATION: For the purpose of this certification, a "locally-headquartered business" is a Local Business whose "principal place of business" is in Miami-Dade County, as defined in Section 1.10 of the General Terms and Conditions of this Request to Qualify.

☐ **Place a check mark here only if affirming Submitter meets requirements for the Locally-Headquartered Preference (LHP). Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for the LHP. The address of the locally-headquartered office is _____.**

LOCAL CERTIFIED SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE CERTIFICATION: A Local Certified Service-Disabled Veteran Business Enterprise is a firm that is (a) a local business pursuant to Section 2-8.5 of the Code of Miami-Dade County and (b) prior to

RTQ SUBMITTAL FORM

bid submission is certified by the State of Florida Department of Management Services as a service-disabled veteran business enterprise pursuant to Section 295.187 of the Florida Statutes.

☐ **Place a check mark here only if affirming Submitter is a Local Certified Service-Disabled Veteran Business Enterprise. A copy of the certification must be submitted with the Submittal.**

COUNTY USER ACCESS PROGRAM (UAP): Joint purchase and entity revenue sharing program

For the County's information, the Submitter is requested to indicate, at 'A' and 'B' below, its general interest in participating in the Joint Purchase Program of the County User Access Program (UAP) described in Section 2.21 of this contract Request to Qualify, if that section is present in this Request to Qualify document. Submitter participation in the Joint Purchase portion of the UAP is **voluntary**, and the Submitter's expression of general interest at 'A' and 'B' below is for the County's information only and **shall not be binding** on the Submitter.

A. If awarded this County contract, would you be interest in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located ***within*** the geographical boundaries of Miami-Dade County?

Yes _____ No _____

B. If awarded this County contract, would you be interested in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located ***outside*** the geographical boundaries of Miami-Dade County?

Yes _____ No _____

Firm Name: _____

Street Address: _____

Mailing Address (if different): _____

Telephone No.: _____ Fax No.: _____

Email Address: _____ FEIN No. __/__-__/__/__/__/__/__/__

Prompt Payment Terms: _____% _____ days net _____days (**Please see paragraph 1.2 H of General Terms and Conditions**)

Signature: _____ **(Signature of authorized agent)**

"By signing this document the Submitter agrees to all Terms and Conditions of this Request to Qualify and the resulting Contract(s)."

Print Name: _____ Title: _____

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL SUBMITTER TO BE BOUND BY THE TERMS OF ITS SUBMITTAL. FAILURE TO SIGN THIS REQUEST TO QUALIFY WHERE INDICATED ABOVE BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE SUBMITTAL NON-RESPONSIVE. THE COUNTY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY SUBMITTAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE SUBMITTER TO THE TERMS OF ITS OFFER.

MIAMI-DADE COUNTY

APPENDIX

AFFIDAVITS

FORMAL SUBMITTALS

MIAMI-DADE COUNTY

Miami-Dade County
Internal Services Department
Procurement Management Division

BID NO. 8239-0/24

Affirmation of Vendor Affidavits

In accordance with Ordinance 07-143 amending Section 2-8.1 of the Code of Miami-Dade County, effective June 1, 2008, vendors are required to complete a new Vendor Registration Package, including a Uniform Affidavit Packet (Vendor Affidavits Form), before being awarded a new contract. The undersigned affirms that the Vendor Affidavits Form submitted with the Vendor Registration Package is current, complete and accurate for each affidavit listed below.

Contract No. : _____ **Federal Employer Identification Number (FEIN):** _____

Contract Title: _____

Affidavits and Legislation/ Governing Body

1.	***Miami-Dade County Ownership Disclosure*** *Sec. 2-8.1 of the County Code*	6.	***Miami-Dade County Vendor Obligation to County*** *Section 2-8.1 of the County Code*
2.	***Miami-Dade County Employment Disclosure*** *County Ordinance No. 90-133, amending Section 2.8-1(d)(2) of the County Code*	7.	***Miami-Dade County Code of Business Ethics*** *Article 1, Section 2-8.1(i) and 2-11(b)(1) of the County Code through (6) and (9) of the County Code and County Ordinance No 00-1 amending Section 2-11.1(c) of the County Code*
3.	***Miami-Dade County Employment Drug-free Workplace Certification*** *Section 2-8.1.2(b) f the County Code*	8.	***Miami-Dade County Family Leave*** *Article V of Chapter 11 of the County Code*
4.	***Miami-Dade County Disability Non-Discrimination*** *Article 1, Section 2-8.1.5 Resolution R182-00 amending R-385-95*	9.	***Miami-Dade County Living Wage*** *Section 2-8.9 of the County Code*
5.	***Miami-Dade County Debarment Disclosure*** *Section 10.38 of the County Code*	10.	***Miami-Dade County Domestic Leave and Reporting*** *Article 8, Section 11A-60 11A-67 of the County Code*

_____ Printed Name of Affiant _____ Printed Title of Affiant _____ Signature of Affiant

_____ Name of Firm _____ Date

_____ Address of Firm _____ State _____ Zip Code

Notary Public Information

Notary Public – State of _____ County of _____

Subscribed and sworn to (or affirmed) before me this _____ day of, _____ 20 _____.

by _____ He or she is personally known to me ☐ or has produced identification ☐

Type of identification produced _____

_____ Signature of Notary Public _____ Serial Number

_____ Print or Stamp of Notary Public _____ Expiration Date _____ Notary Public Seal

FAIR SUBCONTRACTING PRACTICES
(Ordinance 97-35)

In compliance with Miami-Dade County Ordinance 97-35, the Bidder shall submit with the bid proposal a detailed statement of its policies and procedures (use separate sheet if necessary) for awarding subcontractors in accordance with Section 1, Paragraph 1.15

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

☐ **NO SUBCONTRACTORS WILL BE UTILIZED FOR THIS CONTRACT**

_____ Signature

_____ Date

SUBCONTRACTOR/SUPPLIER LISTING
(Miami-Dade County Code Sections 2-8.1, 2-8.8 and 10-34)

Name of Proposer: _____ FEIN No. _____

In accordance with Sections 2-8.1, 2-8.8 and 10.34 of the Miami-Dade County Code, this form must be submitted as a condition of award by all Proposers on County contracts for purchase of supplies, materials or services, including professional services which involve expenditures of $100,000 or more, and all Proposers on County or Public Health Trust construction contracts which involve expenditures of $100,000 or more. The Proposer who is awarded this contract shall not change or substitute first tier subcontractors or direct suppliers or the portions of the contract work to be performed or materials to be supplied from those identified, except upon written approval of the County. The Proposer should enter the word "NONE" under the appropriate heading of this form if no subcontractors or suppliers will be used on the contract and sign the form below.

In accordance with Ordinance No. 11-90, an entity contracting with the County shall report the race, gender and ethnic origin of the owners and employees of all first tier subcontractors/suppliers. In the event that the recommended Proposer demonstrates to the County prior to award that the race, gender, and ethnic information is not reasonably available at that time, the Proposer shall be obligated to exercise diligent efforts to obtain that information and provide the same to the County not later than ten (10) days after it becomes available and, in any event, prior to final payment under the contract.

(Please duplicate this form if additional space is needed.)

Business Name and Address of First Tier Subcontractor/ Subconsultant	Principal Owner	Scope of Work to be Performed by Subcontractor/ Subconsultant	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)							
			Gender		Race/Ethnicity						Gender		Race/Ethnicity					
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other

Business Name and Address of First Tier Direct Supplier	Principal Owner	Supplies/Materials/Services to be Provided by Supplier	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)							
			Gender		Race/Ethnicity						Gender		Race/Ethnicity					
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other

☐ **Mark here if race, gender and ethnicity information is not available and will be provided at a later date. This data may be submitted to contracting department or on-line to the Small Business Development of the Department of Regulatory and Economic Resources at http://www.miamidade.gov/business/business-development-contracts.asp. As a condition of final payment, Proposer shall provide subcontractor information on the Subcontractor Payment Report Sub 200 form which can be found at http://www.miamidade.gov/business/library/forms/subcontractors-payment.pdf.**

I certify that the representations contained in this Subcontractor/Supplier listing are to the best of my knowledge true and accurate.

_____ _____ _____

Signature of Proposer **Print Name** **Print Title** **Date**