



## MEMORANDUM

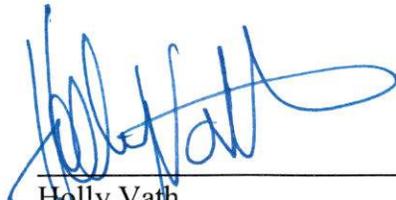
To: Holly Vath, Financial Services Assistant Director  
From: Alaina Knofla, Procurement Specialist  
Date: January 9, 2020  
Subject: Renewal of RFQ# 2018-001: Fire Extinguisher Suppression Inspection Testing Services

The renewal year of RFP #2018-001 is due to expire on February 1, 2020. This contract has a provision for renewal under the original terms, conditions and specifications for two (2) additional one (1) year terms. This will represent the second and final renewal options. The contractor for this Life Safety Systems, Inc., has agreed to this renewal.

In accordance with the City of Stuart Code of Ordinances, you have authority to award solicitations that are valued at less than \$25,000.00, where the funds for the project have been appropriated by the City Commission through the annual budgeting process and where the vendor was selected in accordance with the City Procurement Ordinance.

Please review the attached documentation and indicate by signature below your determination of agreement renewal. This renewal is effective for the period February 2, 2020 through February 1, 2021.

- Approve renewal of RFQ# 2018-001, Fire Extinguisher Suppression Inspection Testing Services with Life Safety Systems, Inc.
- Recommend this bid not be renewed and the service be re-bid immediately.

  
\_\_\_\_\_  
Holly Vath  
Financial Services Assistant Director

1/10/2020  
Date



# City of Stuart

December 31, 2019

Life Safety Systems, Inc. of the Treasure Coast  
Attn: John M. Riordan, General Manager  
1349 SW Biltmore Street  
Port St. Lucie, Florida 34983

Subject: Renewal for RFQ #2018-001: Fire Extinguisher Suppression Inspection Testing Services

Dear Mr. Riordan,

This is official notification to your firm that the City of Stuart wishes to extend your current contract for Fire Extinguisher Suppression Inspection Testing Services, for the period beginning February 2, 2020 and ending on February 1, 2021 which represents the second year of two (one year) renewal options. This extension is granted under the same terms, conditions, and pricing as the original contract.

Please complete the bottom portion of this letter if your firm will agree to the requested renewal. Your response must be received **no later than 4:00 p.m., January 10, 2020**. You may fax your response to (772) 600-1202 or send by email to [purchasing@ci.stuart.fl.us](mailto:purchasing@ci.stuart.fl.us).

Thank you for your cooperation and immediate attention to this matter. Please contact me at (772) 288-5320, if you should have any questions.

Best Regards,

Alaina Knoffa  
Procurement Analyst

cc: File

I hereby attest, by signature, to Florida Statutes (F.S.) 287.135-Scrutinized Companies that Boycott Israel list, F.S. 215.4725-Engaging in commerce with Cuba or Syria, and F.S. 215.473-Scrutinized Companies with activities in the Iran Petroleum Energy Sector List; and agree to the contract renewal as specified of the subject Agreement.

I am unable to agree to the contract renewal as specified of the subject Agreement

(Signature)

1-8-2020

Date

Printed Name

General Manager

Title



# City of Stuart

121 SW Flagler Avenue • Stuart • Florida 34994  
Department of Financial Services  
Procurement & Contracting Services Division

Alaina Knofla  
Purchasing Specialist  
[purchasing@ci.stuart.fl.us](mailto:purchasing@ci.stuart.fl.us)

Telephone (772) 288-5320  
Fax: (772) 600-1202  
[www.cityofstuart.us](http://www.cityofstuart.us)

## MEMORANDUM

To: Holly Vath, Financial Services Assistant Director

From: Alaina Knofla, Procurement Specialist

Date: January 3, 2019

Subject: Renewal of RFQ #2018-001, Fire Extinguisher Suppression Inspection Testing Services

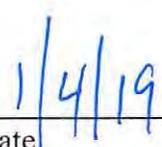
The initial renewal year of RFQ #2018-001 is due to expire on February 1, 2019. This Contract has a provision for renewal for two (2) additional one (1) year terms. This will constitute the first of two (2) possible renewal options. The contractor for this service, Life Safety System, Inc. has agreed to the renewal under the original terms, conditions and specifications.

In accordance with the City of Stuart Code of Ordinances, you have authority to award solicitations that are valued at less than \$25,000.00, where the funds for the project have been appropriated by the City Commission through the annual budgeting process and where the vendor was selected in accordance with the City Procurement Ordinance.

Please review the attached documentation and indicate by signature below your determination of agreement renewal. This renewal is effective for the period February 2, 2019 and ending on February 1, 2020.

- Renewal of RFQ #2018-001, Fire Extinguisher Suppression Inspection Testing Services
- Recommend this bid not be renewed and the service to be re-bid immediately.

  
\_\_\_\_\_  
Holly Vath  
Financial Services Assistant Director

  
\_\_\_\_\_  
Date



# City of Stuart

121 SW Flagler Avenue • Stuart • Florida 34994  
Department of Financial Services  
Procurement & Contracting Services Division

Alaina Knofla  
Procurement Specialist

Telephone (772) 288-5320  
Fax: (772) 600-1202

December 14, 2018

Life Safety Systems, Inc. of the Treasure Coast  
Attn: Mr. John M. Riordan, General Manager  
1349 SW Biltmore Street  
Port St. Lucie, Florida 34983

Subject: Renewal for RFQ #2018-001, Fire Extinguisher Suppression Inspection Testing Services

Dear Mr. Riordan,

This is official notification to your firm that the City of Stuart is satisfied with your firm's performance and wishes to extend your current contract for Annual Fire Extinguisher Suppression Inspection Testing Services for the period beginning February 2, 2019 and ending on February 1, 2020, which represents the first year of two (one year) renewal options. This extension is granted under the same terms, conditions, and pricing as the original contract.

Please complete the bottom portion of this letter if your firm will agree to the requested renewal. Your response must be received no later than 4:00 p.m., December 27, 2018. You may fax your response to (772) 600-1202 or send by email to [purchasing@ci.stuart.fl.us](mailto:purchasing@ci.stuart.fl.us).

Thank you for your cooperation and immediate attention to this matter. Please contact me at (772) 288-5320, if you should have any questions.

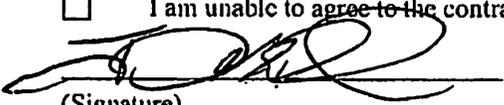
Best Regards,

Alaina Knofla  
Procurement Specialist

cc: File RFQ #2018-001

I hereby attest, by signature, to Florida Statutes (F.S.) 287.135-Scrutinized Companies that Boycott Israel list, F.S. 215.4725-Engaging in commerce with Cuba or Syria, and F.S. 215.473-Scrutinized Companies with activities in the Iran Petroleum Energy Sector List; and agree to the contract renewal as specified of the subject Agreement.

I am unable to agree to the contract renewal as specified of the subject Agreement

  
(Signature)

John M. Riordan  
Printed Name

12-13-18  
Date

General Manager  
Title



LIFESAF-03

MOERLERN

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/26/2018

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

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

<b>PRODUCER</b> Insurance Office of America, Inc. 1855 West State Road 434 Longwood, FL 32750	<b>CONTACT NAME:</b> Nancy Moerler <b>PHONE (A/C, No, Ext):</b> (352) 867-2877 <b>E-MAIL ADDRESS:</b> Nancy.Moerler@ioausa.com	<b>FAX (A/C, No):</b> (352) 368-2309
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b>  Life Safety Systems, Inc. of the Treasure Coast 1349 SW Biltmore Street Port St. Lucie, FL 34983-2957	<b>INSURER A :</b> Ironshore Specialty Insurance Company <b>NAIC #</b> 25445	
	<b>INSURER B :</b> Owners Insurance Company <b>32700</b>	
	<b>INSURER C :</b> Bridgefield Employers Insurance Company <b>10701</b>	
	<b>INSURER D :</b>	
	<b>INSURER E :</b>	
	<b>INSURER F :</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	ADDL SUBR (NSD   WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJEC <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		RCS00030-05	10/29/2018	10/29/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		5200877200	10/28/2018	10/28/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTIONS \$ 10,000		RUS00183-00	10/29/2018	10/29/2019	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	830-31318	03/01/2018	03/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
RE: #2018-001 Fire Extinguisher/Suppression System Test and Inspection Services  
City of Stuart is an Additional Insured for General Liability if required by written contract, with respects to claims arising from the operations of the named insured.

<b>CERTIFICATE HOLDER</b>  City of Stuart 121 SW Flagler Avenue Stuart, FL 34994	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> 



# City of Stuart

121 SW Flagler Avenue • Stuart • Florida 34994  
Department of Financial Services  
Procurement and Contracting Services Division

Telephone (772) 288-5308  
Fax: (772) 600-0134  
[www.cityofstuart.us](http://www.cityofstuart.us)

Alaina Knofla  
Procurement Specialist  
[purchasing@ci.stuart.fl.us](mailto:purchasing@ci.stuart.fl.us)

February 2, 2018

Via: Email transmission, [jr@lifesafetysystems.org](mailto:jr@lifesafetysystems.org)

Life Safety System, Inc., of the Treasure Coast  
Attn: John M. Riordan, General Manager  
1349 SW Biltmore Street  
Port St. Lucie, Florida 34983

Subject: Notice of Award  
RFQ No. 2018-001: Fire Extinguisher/Suppression Inspection/Testing Services

Dear Mr. Riordan,

You are hereby notified that your firm has been awarded RFQ No. 2018-001, Fire Extinguisher/Suppression Inspection/Testing Services, in accordance with the terms and conditions specified in the RFQ.

The initial contract period will be for one year, effective February 2, 2018 through February 1, 2019, with 2 one-year renewal options. The City reserves the right to exercise the option to renew annually, if mutually agreed upon in writing by both parties subject to the same terms and conditions of the original agreement. Annual renewals shall be subject to the appropriation of funds, vendor's satisfactory performance and determination that the contract renewal is in the best interest of the City.

All services shall be coordinated with the Building Maintenance Coordinator or Deputy Public Works Director, who can be contacted at (772) 288-5342.

The City of Stuart looks forward to a mutually beneficial business relationship. If you have any questions, please feel free to contact me by email at [purchasing@ci.stuart.fl.us](mailto:purchasing@ci.stuart.fl.us) or call me at (772) 288-5398.

Sincerely,

Alaina Knofla  
Procurement Specialist  
City of Stuart, Florida

c: 2018-001 RFQ File  
Milton Leggett, Deputy Public Works Director



# City of Stuart

121 SW Flagler Avenue • Stuart • Florida 34994  
Department of Financial Services  
Procurement & Contracting Services Division

Alaina Knofla  
Procurement Specialist  
aknofla@ci.stuart.fl.us

Telephone (772) 288-5320  
Fax: (772) 600-1202  
[www.cityofstuart.us](http://www.cityofstuart.us)

## MEMORANDUM

To: Lenora Darden, Procurement Manager  
From: Alaina Knofla, Procurement Specialist  
Date: February 1, 2018  
Subject: Recommendation of RFQ #2018-001: Fire Extinguisher/Suppression Inspection/Testing Services

Attached are 2018 fiscal budget and the department's recommendation for the above referenced project. In accordance with the City of Stuart Code of Ordinances, you have authority to award solicitations that are valued at less than Twenty-Five Thousand and 00/100 Dollars (\$25,000.00) and where the vendor was selected in accordance with the City Procurement Ordinance.

This solicitation was disseminated to three (3) suppliers. Out of nine (9) notified suppliers, two (2) responsive bids were received by 2:30 pm, on the RFQ opening date, January 24, 2018. Staff has reviewed the bids and recommends award, to the lowest responsive and responsible bidder, Life Safety Systems, Inc., of The Treasure Coast of Port Saint Lucie, Florida.

Please review the attached documentation and signify below your determination of award, request for further information, or recommended rejection of all bids.

Should you have any questions or if I might be of further assistance please call me at ext. 5320 or contact me by email at [aknofla@ci.stuart.fl.us](mailto:aknofla@ci.stuart.fl.us).

- Award RFQ 2018-001, Fire Extinguisher/Suppression Inspection/Testing Services for the initial term of one (1) year with two (2) - one (1) year renewal options to the lowest responsive and responsible bidder for the annual amount of \$3,455.00.
- Further information is required
- Recommend all bids be rejected

  
\_\_\_\_\_  
Lenora Darden, Procurement Manager

  
\_\_\_\_\_  
Date

**REQUEST FOR QUOTATION 2018-001-FIRE EXTINGUISHERS/SUPPRESSION SYSTEMS**

**BID FORM**

RFQ Date: 1/16/18	RFQ No: 2018-001	Reply By: January 22, 2018 by no later than 2:30 PM <b>(Late Submittals May be Rejected)</b>	Dept./Div.  Building Maintenance	Contact: Lenora Darden <a href="mailto:purchasing@ci.stuart.fl.us">purchasing@ci.stuart.fl.us</a>
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All bid prices shall include travel time, mileage, and any associated expenses and must remain firm throughout the initial contract period. Exact delivery point will be provided at time of order placement. It will be the responsibility of the vendor to supply the necessary labor and materials for the site placement of all equipment as specified herein.

**GROUP A - WATER BASED FIRE PROTECTION SYSTEMS INCLUDING BACKFLOWS**

DESCRIPTION	1	2	3	TOTAL PRICE (Columns 2 + 3=)
	Quarterly Inspection Unit Cost	Quarterly (Unit Cost X 3 = Annual Total)	Annual Inspection/Testing (Unit Cost)	
Fire Sprinklers - City Hall, 121 SW Flagler Ave	\$ 75.00	\$ 225.00	\$ 75.00	\$ 300.00
Fire Sprinklers - Community Ctr, 724 SE 10 <sup>th</sup> St	\$ 75.00	\$ 225.00	\$ 75.00	\$ 300.00
Fire Sprinklers - Public Safety, 830 MLK Jr Blvd	\$ 75.00	\$ 225.00	\$ 75.00	\$ 300.00
Fire Sprinklers - Fire Station 2, 1100 SE Monterey Rd Ext.	\$ 75.00	\$ 225.00	\$ 75.00	\$ 300.00
Standpipe System-Courtesy Floating Dock, City Hall, 121 SW Flagler Avenue			\$ 75.00	\$ 75.00
<b>GROUP A - GRAND TOTAL</b>				<b>\$ 1275.00</b>

**GROUP B - HOODS**

DESCRIPTION	Semi-Annual Inspection Unit Cost	TOTAL PRICE (Unit Cost X 2=)
Hoods - Community Center, 724 SE 10 <sup>th</sup> Street	\$ 75.00	\$ 150.00
Hoods - Fire Station 1, 800 MLK Jr Blvd	\$ 75.00	\$ 150.00
<b>GROUP B - GRAND TOTAL</b>		<b>\$ 300.00</b>

**GROUP C - FIRE EXTINGUISHERS**

QUANTITY EACH	DESCRIPTION	Annual Inspection/Testing Unit Cost	TOTAL PRICE (Qty X Unit Cost=)
328	ABC	\$5.00	\$ 1640.00
6	BC	\$5.00	\$ 30.00
24	CO2	\$5.00	\$ 120.00

Company Name: Life Safety Systems, Inc, of the Treasure Coast

GROUP C - FIRE EXTINGUISHERS (Cont'd)			
QUANTITY EACH	DESCRIPTION	Annual Inspection/Testing Unit Cost	TOTAL PRICE (Qty X Unit Cost=)
5	Halotron	\$ 5.00	\$ 25.00
4	PK	\$ 5.00	\$ 20.00
8	PW	\$ 5.00	\$ 40.00
1	6 Class K	\$ 5.00	\$ 5.00
<b>Total 376</b>	<b>GROUP C - GRAND TOTAL</b>		<b>\$ 1880.00</b>

<b>OVERALL TOTAL FOR GROUPS A - C</b>	<b>\$3455.00</b>
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OPTION 1 - EQUIPMENT (NEW / REPLACE / REFILL)			
LB/SIZE	DESCRIPTION	NEW/REPLACE COST	REFILL COST (Unit Price Per LB)
2.5	ABC	\$ 35.00	\$ 15.00
5.0	ABC	\$ 45.00	\$ 9.00
10.0	ABC	\$ 75.00	\$ 8.50
20.0	ABC	\$ 125.00	\$ 7.00
2.5	BC	\$ 45.00	\$ 16.50
5.0	BC	\$ 60.00	\$ 12.00
20.0	BC	\$ 125.00	\$ 7.00
2.5	Halotron	\$ 105.00	\$ 42.00
5.0	Halotron	\$ 165.00	\$ 33.00
10.0	Halotron	\$ 320.00	\$ 32.00
5.0	CO2	\$ 130.00	\$ 27.50
10.0	CO2	\$ 190.00	\$ 20.00
15.0	CO2	\$ 230.00	\$ 16.00
10.0	PK	\$ 90.00	\$ 9.00
20.0	PK	\$ 145.00	\$ 7.50
2.5	PW	\$ 125.00	\$ 62.50
	6 Class K	\$ 165.00	\$ 165.00

Company Name: Life Safety Systems, Inc. of the Treasure Coast

OPTION 2 –REPAIRS AND ADDITIONAL SERVICES	
DESCRIPTION	HOURLY LABOR RATE
Technician: Labor rate per hour is based on regular working hours schedule only. Overtime is not permitted.	\$ 80.00
OPTION 3 –PARTS & MATERIALS	
DESCRIPTION	% MARK UP (Not to Exceed 10%)
Identify Percentage Mark-Up Cost For Miscellaneous Ancillary Parts and Materials	10 %

Optional services for labor, equipment, parts and materials to cover service requirements are not part of inspection and testing services; and are for bid evaluation purposes only. These options will be used on an as needed basis. (0%) is acceptable for Direct Pass-Thru.

Preferred method of payment is by the City Purchasing Card (VISA). DO YOU ACCEPT THE PURCHASING CARD (VISA)? Yes  No

Quotes may be faxed, e-mailed or mailed, but must contain original signatures. Electronic signatures are not acceptable

All Prices will remain firm for a period of forty-five (45) days from the date of Bid opening.

The City of Stuart offers bidders who commit to accepting the Purchasing Card, noted above in the Bid Schedule as payment method, a one percent (1%) reduction in their bid price for evaluation purposes only. When evaluating prices submitted by bidders in response to this solicitation, the total offered price of a bidder committed to accepting the Purchasing Card will be reduced by one percent, the resulting number is then compared to the other bidders' offered price. If the committed bidder is awarded the contract, the award will be at the originally bid price. City shall not pay any service charges or fees for Pcard transactions.

The undersigned bidder hereby certifies that the invitation to bid has not been altered in any manner; and that bidder has received all the Addenda listed below and has incorporated them into his Bid listed herein. Failure to acknowledge the above requirements will render the bid non-responsive and no further evaluation of the bid will occur.

ACKNOWLEDGEMENT IS HEREBY MADE OF RECEIPT OF ADDENDA ISSUED DURING THE SOLICITATION PERIOD:

ADDENDUM # <sup>n/a</sup> THROUGH ADDENDUM # <sup>n/a</sup>

Federal ID # 65-0921490

Company Name: Life Safety Systems, Inc. of The Treasure Coast Date: 1/24/18

Name & Title of individual submitting Bid: John M. Riordan, General Mgr.

Email address: jr@lifesafetysystems.org Ph: 772-344-0477

AUTHORIZED SIGNATURE: 

**ATTACHMENT A  
INSURANCE REQUIREMENTS**

The following insurance provisions are hereby established for Vendors who will provide services to the City.

1. The successful bidder shall not commence any work in connection with the contract for services until the vendor has obtained all of the following types of insurance and the City has approved such insurance. Nor shall the successful proposer allow any subcontractor to commence work on its subcontract until all similar insurance required of the subcontractor has been so obtained and approved. All insurance policies shall be with insurers licensed and authorized to do business in the State of Florida. All carriers shall carry an AM Best Rating of at least A:VII. A Waiver of Subrogation is required under each of the required insurance policies. All policies should respond as primary. Each policy shall include Contractual Liability
2. Loss Deductible Clause: The City shall be exempt from, and in no way liable for, any sums of money which may represent a deductible in any insurance policy. The payment of such deductible shall be the sole responsibility of the Vendor and/or subcontractor providing such insurance.
3. Worker's Compensation Insurance: The Vendor shall take out and maintain during the life of this Contract, Worker's Compensation Insurance for all of its employees furnished to the City pursuant to this contract. In case any work is sublet, the Vendor shall require the subcontractor similarly to provide Worker's Compensation Insurance for all of the latter's employees unless such employees are covered by the protection afforded by the Vendor. Such insurance shall comply fully with the Florida Worker's Compensation Law. This coverage shall include Employer's Liability for limits of not less than \$100,000 Each Accident, \$100,000 Each Disease/Employee and \$100,000 Each Disease/Maximum.
4. Commercial General Liability: The Vendor shall, during the life of this Contract take out and maintain broad form Commercial General Liability including premises and operations; products and completed operations; personal and advertising injury; and fire damage for limits of not less than \$500,000.00 per occurrence and \$1,000,000.00 aggregate. There shall be no exclusion for Fellow Employees, Cross Liability or Insured vs. Insured. This insurance shall also insure the City to the same limits.
5. Business Automobile: The Vendor shall during the life of this Contract take out and maintain Business Automobile Liability form with a combined Single Limit of not less than \$500,000.00 including Owned, Hired, and Non-Owned. This insurance shall also insure the City to the same limits.
6. Certificates of Insurance: the Vendor upon notice of award will furnish Certificate of Insurance Forms. These shall be completed by the authorized Resident Agent and returned to the Purchasing Office. This certificate shall be dated and show:
  - (a) The name of the insured Contractor, the specified job by name and job number, the name of insurer, the number of the policy, its effective date, and its termination date.
  - (b) Statement that the Insurer will mail notice to the City at least thirty (30) days prior to any material changes in provisions or cancellation of the policy.
  - (c) City shall be listed as Additional Insured on Commercial General Liability Insurance, Automobile Liability Insurance.



# 2017 - 2018

## St. Lucie County Local Business Tax Receipt

Facilities or machines #                      Rooms #                      Seats #                      Employees #12                      Receipt #1000433  
 Type of business 1799 MISC/SPECIALTY CONTRACTOR (FIRE                      Expires SEPTEMBER 30, 2018  
 SPRINKLER CONTRACTOR)

DBA name                      Business Life Saftey Systems Inc of Treasure Coast  
 Mailing address: Life Saftey Systems Inc of Treasure Coast                      Business location: 1349 SW Biltmore Street Port St Lucie, Fl 34983  
 1349 SW Biltmore Street  
 Port St Lucie, Fl 34983

RENEWAL                      City of Pt St Lucie                      Comp Card 24203  
 Original tax:                      \$24.75                      P99000044196  
 Penalty:  
 Collection cost:  
 Total:                      \$24.75                      Paid 07/20/2017 24.75                      0099-20170720-027665

Law requires this Local Business Tax Receipt to be displayed conspicuously at the place of business in such a manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the county. Upon failure to do so, the local business taxpayer shall be subject to the payment of another Local Business Tax for the same business, profession or occupation.

Pursuant to Florida law, all Local Business Tax Receipts shall be sold by the Tax Collector beginning July 1 of each year and shall expire on September 30 of the succeeding year. Those Local Business Tax Receipts renewed beginning October 1 shall be delinquent and subject to a delinquency penalty of 10 percent for the month of October. An additional 5 percent penalty for each month of delinquency is added until paid, provided that the total delinquency penalty shall not exceed 25 percent of the Local Business Tax for the delinquent establishment.

In addition to the penalty, the Tax Collector is entitled to a collection fee of \$1 to \$5. This fee is based on the amount of Local Business Tax, which will be collected from delinquent taxpayers after September 30 of the business year.

This receipt is a Local Business Tax only. It does not permit the local business taxpayer to violate any existing regulatory or zoning laws of the state, county or city. It also does not exempt the local business taxpayer from any other taxes, licenses or permits that may be required by law.

Pursuant to Florida law, Local Business Taxes are subject to change.

Life Saftey Systems Inc of Treasure Coast  
 1349 SW Biltmore Street  
 Port St Lucie, Fl 34983

# *State of Florida*

## *Department of State*

I certify from the records of this office that LIFE SAFETY SYSTEMS, INC. OF THE TREASURE COAST is a corporation organized under the laws of the State of Florida, filed on May 12, 1999.

The document number of this corporation is P99000044196.

I further certify that said corporation has paid all fees due this office through December 31, 2018, that its most recent annual report/uniform business report was filed on January 15, 2018, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Fifteenth day of January, 2018*



*Ken DeFina*  
*Secretary of State*

Tracking Number: CC2637608283

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>LIFE SAFETY SYSTEMS, INC OF THE TREASURE COAST</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>1349 SW BILTMORE STREET</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>PORT ST LUCIE, FL 34983</b>	
7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
OR									
<b>Employer identification number</b>									
6	5		0	9	2	1	4	9	0

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>1-17-18</b>
------------------	----------------------------	-----------------------

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
ELECTRICAL CONTRACTORS LICENSING BOARD

<b>LICENSE NUMBER</b>	
EF0001037	



The ALARM SYSTEM CONTRACTOR I  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS  
Expiration date: AUG 31, 2018

THOMPSON, RICHARD ROSS  
LIFE SAFETY SYSTEMS INC OF THE TREASURE COAST  
1349 SW BILTMORE  
PORT ST LUCIE FL 34984-4387



ISSUED 08/28/2016

DISPLAY AS REQUIRED BY LAW

SEC # L1608280004653

Jeff Atwater  
CHIEF FINANCIAL OFFICER

Julius Halas  
DIVISION DIRECTOR



Casia Sinco  
BUREAU CHIEF

Keith McCarthy  
SAFETY PROGRAM MANAGER

**FLORIDA DEPARTMENT OF FINANCIAL SERVICES**  
**DIVISION OF STATE FIRE MARSHAL**  
200 East Gaines Street - Tallahassee, Florida 32399-0342  
Tel. 850-413-3644 Fax. 850-410-2467

**CERTIFICATE OF COMPETENCY**  
**OFFICIAL COPY**

THIS CERTIFIES THAT: Richard R Thompson  
1349 SW BILTMORE St  
PORT St LUCIE FL 34983

BUSINESS ORGANIZATION: LIFE SAFETY SYS Inc. OF THE TREASURE Coast

Contractor I includes the execution of contracts requiring the ability, experience, knowledge, science, and skill to intelligently layout, fabricate, install, inspect, alter, repair, or service all types of Fire Protection Systems, excluding Pre-Engineered Systems.

Issue Date: 07/01/2016  
Type: 07  
Class: 10  
County: Saint Lucie  
License/Permit #: 734064-0004-1999  
Expiration Date: 06/30/2018



*Jeff Atwater*  
Chief Financial Officer

Jeff Atwater  
CHIEF FINANCIAL OFFICER

Julius Halas  
DIVISION DIRECTOR



Casia Sinco  
BUREAU CHIEF

Keith McCarthy  
SAFETY PROGRAM MANAGER

FLORIDA DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF STATE FIRE MARSHAL  
200 East Gaines Street - Tallahassee, Florida 32399-0342  
Tel. 850-413-3644 Fax. 850-410-2467

FIRE PROTECTION INSPECTOR  
OFFICIAL COPY

THIS CERTIFIES THAT: James R Ebenhack  
1349 SW BILTMORE St  
PORT St LUCIE FL 34983  
EMPLOYER: LIFE SAFETY SYS Inc. OF THE TREASURE Coast  
LICENSE #: 734064-0004-1999

Water-Based Fire Protection Inspector is limited to the inspection of water sprinkler systems, water spray systems, foam-water sprinkler systems, foam-water spray systems, standpipes, combination standpipes and sprinkler systems, all piping that is an integral part of the system beginning at the point where the piping is used exclusively for fire protection, sprinkler tank heaters, air lines, thermal systems used in connection with sprinklers, and tanks and pumps connected thereto, excluding pre-engineered systems.

Issue Date: 07/01/2016  
Type: 14  
Class: 05  
County: Saint Lucie  
License/Permit #: 768264-0001-2006  
Expiration Date: 06/30/2018



*Jeff Atwater*  
Chief Financial Officer



James R Ebenhack  
Water-Based Fire Protection Inspector  
LIFE SAFETY SYS Inc. OF THE TREASURE Coast  
1349 SW BILTMORE St  
PORT St LUCIE, FL 34983  
Permit #: 734064-0001-2006  
Expiration Date: 06/30/2018

The inspector named herein is permitted to inspect, service, and mark any Water-Based Fire Protection System in compliance with Chapter 631, Florida Statutes.

*Jeff Atwater*  
Chief Financial Officer

**UF** | TREEO Center  
UNIVERSITY of FLORIDA

Name James Ebenhack  
Course BACKFLOW PREVENTION TESTER  
Dates of Course 10/02/2016  
Certificate Number P10-16-6415  
Accreditation \_\_\_\_\_  
10/31/2018  
Expiration Date \_\_\_\_\_

*Carol Hinton*  
Associate Director

**UF** | TREEO Center  
UNIVERSITY of FLORIDA

Name James Ebenhack  
Course BACKFLOW REPAIR TECHNICIAN  
Dates of Course June 06-08, 2012  
Certificate Number R1808  
Accreditation \_\_\_\_\_  
XXXX  
Expiration Date \_\_\_\_\_

*Carol Hinton*  
Associate Director

Jimmy Patronis  
CHIEF FINANCIAL OFFICER

Julius Halas  
DIVISION DIRECTOR



Cassia Sinco  
BUREAU CHIEF

Keith McCarthy  
SAFETY PROGRAM MANAGER

**FLORIDA DEPARTMENT OF FINANCIAL SERVICES**  
**DIVISION OF STATE FIRE MARSHAL**  
200 East Gaines Street - Tallahassee, Florida 32399-0342  
Tel. 850-413-3644 Fax. 850-410-2467

**PRE-ENGINEERED SYSTEM PERMIT**  
**OFFICIAL COPY**

THIS CERTIFIES THAT: James R Ebenhack

EMPLOYER: Life Safety Systems Inc. of the Treasure Coast  
1349 SW Biltmore Street  
Port St Lucie FL 34983

LICENSE NUMBER: 734064-0005-1999

Has Complied with Florida statutes and has qualified for the type and class shown herein to service, recharge, repair, install, or inspect all types of pre-engineered systems. Excludes service, repair, installation, or inspection of any type of Halon Pre-Engineered System.

Issue Date: 01/01/2018  
Type: 09  
Class: 04  
County: St. Lucie  
License/Permit #: 100361-0001-2008  
Expiration Date: 12/31/2019



  
Chief Financial Officer



**NATIONAL INSTITUTE FOR CERTIFICATION  
IN ENGINEERING TECHNOLOGIES®**

*Providing Certification Programs Since 1961*

**BE IT KNOWN THAT**

**James R. Ebenhack**

**IS HEREBY AWARDED CERTIFICATION AT**

**LEVEL II**

**IN FIRE PROTECTION ENGINEERING TECHNOLOGY  
INSPECTION AND TESTING OF WATER-BASED SYSTEMS**

**BASED UPON SUCCESSFUL DEMONSTRATION OF REQUISITE KNOWLEDGE,  
EXPERIENCE AND WORK PERFORMANCE AS SET FORTH BY THIS INSTITUTE.**

Certification Valid through September 1, 2019

CERTIFICATION NUMBER 130222

CHAIRMAN OF THE NICET BOARD OF GOVERNORS

A DIVISION OF THE NATIONAL SOCIETY OF PROFESSIONAL ENGINEERS

ATTACHMENT B

QUESTIONNAIRE OF BIDDERS INFORMATION

FILLABLE FORM AVAILABLE

PART A - QUALIFICATIONS

Information provided shall fully explain the firm's qualifications and experience of their Organization to provide services as stated below: (Bidders may attach additional sheets, if necessary).

- 1. Bidder is licensed by the State of Florida Fire Marshal for water based systems, portable and pre-engineered fire extinguisher systems to provide services as described herein. Is supporting documentation included? Yes  No
- 2. Bidder's facility is approved by FDOT and is Class A licensed in the State of Florida to provide services as described herein. Is supporting documentation included? Yes  No
- 3. Provide trained technician's credentials as identified in Section C3. Is supporting documentation included Yes  No

Technicians assigned to this project,

Name: James Ebenback Title Inspector Cellular Number 863-697-6493  
 10 # of Years with Firm, 26 #Years of Technical Experience  
 NICET LEVEL II Technical Licenses Obtained and Dates Obtained 9/1/2016  
 Backflow Tester & Backflow Rep Technical Certifications Obtained and Dates Obtained 10-26/14-16

Technicians assigned to this project,

Name: \_\_\_\_\_ Title \_\_\_\_\_ Cellular Number \_\_\_\_\_  
 \_\_\_\_\_ # of Years with Firm, \_\_\_\_\_ #Years of Technical Experience  
 \_\_\_\_\_ Technical Licenses Obtained and Dates Obtained \_\_\_\_\_  
 \_\_\_\_\_ Technical Certifications Obtained and Dates Obtained \_\_\_\_\_

PART B – OTHER REQUESTED INFORMATION

- 1. Number of year's organization has been in business: 19
- 2. Identify any training provided to your employees, i.e. safety, etc: OSHA, NFPA, NICET, FASA/BASA
- 3. Provide office hours and contact information of staff responsible for coordination of services. 24/7
- 4. Bidder to provide details of uniform and identification worn by employees:
- 5. Approximately how many miles is your location from the City of Stuart? 10
- 6. Provide warranty information: 1 Year
- 7. Bidder to provide details of uniform and identification worn by employees. red shirt with logo/photo ID

**ATTACHMENT C**

Provide three (3) satisfactory references within the past five (5) years of similar complexity, nature, and size of this project.

**#1 Reference**

Company/Entity Name: PALM BEACH COUNTY BOARD OF COMMISSIONS
Address PO BOX 4036
City <u>West Palm Bch</u> , State <u>FL</u> Zip Code <u>33402</u>
Contact Name: <u>Eduardo Luveras</u> Title: <u>Supervisor</u>
Phone No: ( <u>561</u> ) <u>776</u> - 2057 Fax: ( <u>561</u> ) <u>355</u> - 3393 Email: <u>ELLUVERA@PBCGOV.ORG</u>
Date of Service or Contract Period: <u>2003- PRESENT</u> Location <u>PALM BEACH COUNTY</u>
Summary of Services Performed <u>FIRE SPRINKLER, PUMP AND BACKFLOW INSPECTIONS AND SERVICE</u>
Governmental or Private <u>Government</u> Dollar Value of Contract \$ <u>OPEN PO</u>

**#2 References**

Company/Entity Name: SAINTLUCIE COUNTY BOARD OF COMMISSIONS
Address <u>2300 Virginia Avenue</u>
City <u>Fort Pierce</u> State <u>FL</u> Zip Code <u>34982</u>
Contact Name: <u>Joe Turner</u> Title: <u>Supervisor</u>
Phone No: ( <u>772</u> ) <u>462</u> - 1432 Fax: ( <u>772</u> ) <u>462</u> - 1704 Email: <u>turnerj@stlucieco.org</u>
Date of Service: <u>2000-Present</u> Location <u>St. Lucie County</u>
Amount of Meals/Service <u>FIRE SPRINKLER, PUMP AND BACKFLOW INSPECTIONS AND SERVICE</u>
Governmental or Private <u>Government</u> Dollar Value of Contract \$ <u>OPEN PO</u>

**#3 References**

Company/Entity Name: <u>CITY OF VERO BEACH</u>
Address <u>PO BOX 1389</u>
City <u>Vero Beach</u> State <u>FL</u> Zip Code <u>32961</u>
Contact Name: <u>Carol Shoaf</u> Title: <u>Purchasing Agent</u>
Phone No: ( <u>772</u> ) <u>978</u> - 5474 Fax: ( <u>772</u> ) <u>770</u> - 6860 Email: <u>CShoaf@covb.org</u>
Date of Service: <u>2010 to Present</u> Location <u>Indian River</u>
Amount of Meals/Service <u>FIRE SPRINKLER, PUMP AND BACKFLOW INSPECTIONS AND SERVICE</u>
Governmental or Private <u>Government</u> Dollar Value of Contract \$ <u>OPEN PO</u>

Company Name Life Safety Systems, Inc. of the Treasure Coast

**ATTACHMENT D**

**BIDDERS CHECKLIST**

This checklist is provided to assist each Bidder in the preparation of their bid response. Included in this checklist are important requirements, which is the responsibility of each Bidder to submit with their response in order to make their response fully compliant. This checklist is only a guideline~ it is the responsibility of each Bidder to read and comply with the Invitation to Bid in its entirety.

Is Bid envelope marked accordingly?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is Request for Quotes completed, signed and attached?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is copy of bidder's valid Business Tax Receipt submitted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are Sample Reports submitted?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Warranty is in compliance with bid requirements?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is bid submitted in triplicate (one original, two copies) ?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Bidder must submit proof that their firm name is registered. with their State of origin	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is proof of insurance included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is equivalent product literature enclosed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are all Forms completed, signed (if required), and enclosed? (bid schedule, questionnaire, reference, IRS W-9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are addendum (if any issued) signed and submitted?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Submit a copy of all Licenses, Certificates, or Registrations, held by Bidder	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
All prices have been reviewed for mathematical accuracy, all price corrections initialed, and all price extensions and totals thoroughly checked.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Company Name Life Safety Systems, Inc. of the Treasure Coast

ATTACHMENT E

STATEMENT OF "NO BID"

If you do not intend to bid on this requirement, please complete and return this form prior to date shown for receipt of bids to: The City of Stuart Procurement & Contracting Services Office, 121 S.W. Flagler Avenue, Stuart, Florida 34994.

We have declined to bid on this solicitation for the following reasons.

- Specifications too "restrictive", i.e., geared toward one brand or manufacturer (please explain below)
- Insufficient time to respond to Request for Quote.
- We do not offer this product or equivalent.
- Our project schedule would not permit us to perform.
- Unable to meet specifications.
- Specifications unclear (please explain below).
- Other (please specify below).

REMARKS: \_\_\_\_\_

WE UNDERSTAND THAT IF THE "NO BID" LETTER IS NOT EXECUTED AND RETURNED, OUR NAME MAY BE DELETED FROM THE LIST OF QUALIFIED BIDDERS FOR THE CITY OF STUART FOR FUTURE PROJECTS.

Typed Name and Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Telephone Number \_\_\_\_\_

Date \_\_\_\_\_

**EXHIBIT A**

**Additions/Deletions of Locations:** The City may require the addition or deletion of units and/or locations for services as the requirements and needs of the City change.

Approx. Sq Ft	Location Name/Address/Equipment Type
17,262	City Hall, 121 SW Flagler Avenue Fire Extinguishers/Sprinklers/Fire Riser
6,391	City Hall Annex, 101 SW Flagler Avenue/300 SW St Lucie Avenue Fire Extinguishers
21,500	Police Department, 830 SE Martin Luther King Jr. Boulevard Fire Extinguishers/Sprinklers/Fire Riser
21,500	Fire Department – Fire/Rescue Station #1, 800 SE Martin Luther King Jr. Boulevard Fire Extinguishers/Sprinklers/Hood
5,600	Fire Rescue Station #2, 1100 SE Monterey Road Fire Extinguishers/Sprinklers
6,771 1,750 2,061 180 & 150	Water Treatment Plant, (5 buildings), 1000 SE Palm Beach Road Fire Extinguishers
2,000 3,200	Distribution & Collection Admin. Bldg & Garage, (2 buildings), 920 East 10 <sup>th</sup> Street Fire Extinguishers
3,200 2,270	Wastewater Treatment Plant (2 buildings), 301 SE Stypmann Boulevard Fire Extinguishers
4,500 1,600 & 192	Turf & Grounds (3 buildings), 920 East 10 <sup>th</sup> Street Fire Extinguishers
11,292	Community Center, 724 East 10 <sup>th</sup> Street Fire Extinguishers/Sprinklers/Hood
600	10 <sup>th</sup> Street Ball Field Concession Stand, 724 East 10 <sup>th</sup> Street Fire Extinguishers
2,000 7,530 1,225 720	Maintenance Complex, (4 buildings), 407 SE Martin Luther King Jr. Boulevard Fire Extinguishers
1,116	Sailfish Ballpark Concession Stand/Restrooms, 600 SE Georgia Avenue Fire Extinguishers
1,440	Memorial Park Shuffle Board & Billiards/Restrooms, 410 SE Georgia Avenue Fire Extinguishers
1,200	Culpepper & Terpening, 151 S.W. Flagler Ave Fire Extinguishers
5,380	Feed Store, 161 S.W. Flagler Ave Fire Extinguishers
1,880	Crary House, 171 S.W. Flagler Ave Fire Extinguishers
12,458	Flagler Place, 201 S.W. Flagler Ave Fire Extinguishers
1,800	Duffy's Electric Boat, 400 S.W. Federal Hwy Fire Extinguishers

**EXHIBIT B**

**CITY OF STUART EXTINGUISHER LIST**

<b><u>Water Reclamation Facility</u></b>	<b>#</b>	<b><u>Garage</u></b>	<b>#</b>
2.5 LB ABC	3	2.5 LB ABC	1
5 LB ABC	21	5 LB ABC	13
10 LB ABC	7	10 LB ABC	17
5 LB CO2	7	20 LB ABC	5
10 LB BC	1	10 LB PK	1
5 LB Halotron	2	Garage Total	37
WRF Total	41		
		<b><u>Fire Rescue 2</u></b>	<b>#</b>
<b><u>Water Treatment Plant</u></b>	<b>#</b>	5 LB ABC	7
2.5 LB ABC	2	10 LB ABC	1
5 LB ABC	13	20 LB ABC	1
10 LB ABC	11	2.5 LB PW	1
5 LB CO2	5	10 LB CO2	1
10 LB CO2	2	FR2 Total	11
10 LB BC	1		
20 LB BC	1	<b><u>Fire Rescue 1</u></b>	<b>#</b>
10 LB PK	1	5 LB ABC	9
20 LB PK	2	20 LB ABC	6
WTP Total	38	2.5 LB PW	7
		10 LB CO2	6
<b><u>Turf &amp; Grounds</u></b>	<b>#</b>	15 LB CO2	2
2.5 LB ABC	19	FR1 Total	30
5 LB ABC	41		
10 LB ABC	18	<b><u>Dist &amp; Coll</u></b>	<b>#</b>
T&G Total	78	2.5 LB ABC	3
		5 LB ABC	11
<b><u>Sanitation</u></b>	<b>#</b>	10 LB ABC	5
5 LB ABC	5	20 LB BC	1
10 LB ABC	10	D&C Total	20
20 LB ABC	7		
Sanitation Total	22		
		<b><u>City Hall</u></b>	<b>#</b>
<b><u>Public Safety Complex</u></b>	<b>#</b>	5 LB ABC	7
10 LB ABC	26	10 LB ABC	1
10 LB Halotron	1	2.5 LB Halotron	1
Complex Total	27	CH Total	9

<b><u>Police Vehicles</u></b>	#	<b><u>Annex</u></b>	#
2.5 LB BC	2	5 LB ABC	6
5 LB ABC	43		
5 LB CO2	1	<b><u>10th St Comm Ctr</u></b>	#
PV TOTAL	46	5 LB ABC	9
		5 LB Halotron	1
		6 Class K	1
		Center	11

<b><u>City Leased Properties</u></b>	#
Culpepper & Terpening 151 SW Flagler Ave	
5 LB ABC	4
Stuart Feed 161 SW Flagler	
5 LB ABC	4
10 LB ABC	1
Crary House 171 SW Flagler Ave	
5 LB ABC	2
Flagler Place 201 SW Flagler Ave	
5 LB ABC	7
Duffy's Electric Boat 400 SW Federal Hwy	
5 LB ABC	1
Leased Properties Total	19

<b><u>TOTALS</u></b>	#
2.5 LB ABC	28
5 LB ABC	203
10 LB ABC	97
20 LB ABC	19
5 LB CO2	13
10 LB CO2	9
15 LB CO2	2
2.5 LB BC	2
10 LB BC	2
20 LB BC	2
2.5 LB Halotron	1
5 LB Halotron	3
10 LB Halotron	1
10 LB PK	2
20 LB PK	2
2.5 LB PW	8
6 Class K	1
	395 TOTAL EXTINGUISHERS