

### CITY OF COCONUT CREEK

FINANCE AND ADMINISTRATIVE SERVICES PROCUREMENT DIVISION 4800 WEST COPANS ROAD COCONUT CREEK, FLORIDA 33063

ADDENDUM NO. 1

April 13, 2022

Bid No.:	IFB No. 04-13-22-11
Bid Name:	Pressure Cleaning Services
Due Date/Time:	April 20, 2022 at 11:00 a.m. EST

Our records indicate that your firm is in receipt of bid documents for Pressure Cleaning Services. This Addendum is hereby made part of the specifications and shall be included with all contract documents.

The following information is being transmitted to change the bid opening date:

### NEW BID OPENING DATE: APRIL 20, 2022 AT 11:00 A.M. EST

Note: Words underlined and **bold** are additions, words marked through are deletions

This addendum acknowledgment sheet must be submitted electronically with your bid response through the eBid System by the due date and time indicated above. Failure to return this sheet may disgualify Bidder.

Signature

\_\_\_\_\_ <u>\_\_</u> Date

ompany Name

SURE Cleaning Services

Ave. Tampa, FI 33604

1013132-2054

(813) 932-2053 Fax Number

Phone Number

ASHA BENJAMIN, CPPB Procurement Analyst abenjamin@coconutcreek.net

### **BID CONFIRMATION**

In accordance with the requirements to provide pressure cleaning services pursuant to Bid No. 04-13-22-11, the undersigned submits the attached bid.

Bidder accepts and hereby incorporates by reference in this bid all of the terms and conditions of the scope of service, including EPA Standards, Motor Vehicle Safety Standards and required warranty and guarantee certificates.

Bidder is fully aware of the Scope of Service based on these requirements, the legal requirements (federal, state, county and local laws, ordinances, rules and regulations) and the conditions affecting cost, progress or performance of the work and has made such independent investigation as Bidder deems necessary.

This bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Bidder has not directly or indirectly induced or solicited any other Bidder to submit a false or sham bid; Bidder has not solicited or induced any person; firm or a corporation to refrain from proposing and Bidder has not sought by collusion to obtain for himself any advantage over any other Bidder or over City.

The Bidder shall acknowledge this Bid by signing and completing the spaces provided. I hereby submit this Bid Package for pressure cleaning services pursuant to Bid No. 04-13-22-11 to the City of Coconut Creek with the full understanding of the IFB, General Conditions, Special Conditions, Detailed Requirements, and the entire Bid Package.

Mario Santana

State of: Florida County of: Hillsboroug

The foregoing instrument was acknowledged before me this 12th day of April , 2022, by Mario Santana, who is (who are) personally known to me or who has produced \_\_\_\_\_\_ as identification and who did (did not) take an oath.

Notary Public Signature

Kelly French Notary Name, Printed, Typed or Stamped

Commission Number: GG 942868

My Commission Expires: January 27,2024



### CITY OF COCONUT CREEK PRESSURE CLEANING SERVICES BID NO. 04-13-22-11

### **BID SCHEDULE**

### NOTES:

- 1. Bidder understands that the Extended Amount for each and every item is the result of multiplying the Estimated Quantity times the Unit Price stated in figures.
- 2. It is the intention of the City to award a contract to the lowest responsive Bidder based on the total amount of the bid.
- 3. Any discrepancy between the written and numerical, the written prevails.
- 4. Bidder agrees to supply the products or services at the prices bid in accordance with the terms, conditions, and specifications contained in this IFB. Pricing must include delivery and be quoted FOB: Destination.

### PAYMENT METHODS

VISA PURCHASING CARD (reference informational flyer on following page):

The City of Coconut Creek has implemented a Visa Procurement Card (P-Card) Program through SunTrust Bank. The City's preference is to pay for goods/services with the P-Card. This program allows the City to expedite payment to our vendors. Some of the benefits of the P-Card Program to the vendor are: payment received within 72 hours of receipt and acceptance of goods, reduced paperwork, issue receipts instead of generating invoices, resulting in fewer invoice problems, and deal directly with the cardholder (in most cases).

Vendors accepting payment by the P-Card may not require the City (Cardholder) to pay a separate or additional convenience fee, surcharge or any part of any contemporaneous finance charge in connection with a transaction. Such charges are allowable, however must be included in the total cost of the bid. Vendors are not to add notations such as "+3% service fee" in their bid response. All bid responses shall be inclusive of any and all fees associated with the acceptance of the P-Card.

Vendors agreeing to accept payment by P-Card must presently have the capability to accept Visa or take whatever steps necessary to implement the ability before the start of the agreement term.

### EFT

The City of Coconut Creek's Electronic Funds Transfer (EFT) Program allows the City to process payments to vendors electronically, directly to their financial institution of choice. With EFT payments, funds are deposited to vendor's bank account and are available the date the bank receives them. There will be no more waiting to receive payments in the mail, and no trips to the bank to make deposits. EFT payments also reduced the risk of misrouting, theft, and forgery. Additionally, an automated e-mail of the remittance advice will be sent to the e-mail specified by the vendor.

### PAPER CHECK

Paper checks are also processed by the City for vendor payments.

### PURCHASE BY OTHER GOVERNMENTAL AGENCIES:

Please indicate below if you will permit other governmental entities to purchase from your agreement with the City of Coconut Creek.

[X] Yes, Others can purchase; [] No, Only the City of Coconut Creek can purchase

REMAINDER OF PAGE LEFT INTENTIONALLY BLANK

### CITY OF COCONUT CREEK PRESSURE CLEANING SERVICES BID NO. 04-13-22-11

### BID SCHEDULE OF PROPOSED PRICING

# BIDDER SHALL ALSO SUBMIT PRICES ELECTRONICALLY THROUGH THE EBID SYSTEM "LINE ITEMS" TAB

## WWW.COCONUTCREEK.NET/FIN/PROCUREMENT

### PROPOSED PRICING

ltem	Description	Estimated Quantities	Unit	Price per Unit	Estimated Total					
1	Curbs	400,000	LF	,06	24,000.00					
2	Medians (includes concrete/paver surfaces)	170,000	SF	,05	8,500,00					
3	Sidewalks / Concrete Walkways	300,000	SF	104	12,000,00					
4	Pavers	100,000	SF	,04	4,000,00					
5	Wheel Stops	1,000	Each	1,00	1,000,000					
6	Paver Sealing	400,000	SF	,28	112,000,00					
7	Ceramic/Concrete Roof Tile	25,000	SF	,08	2,000.00					
8	Boardwalks	10,800	SF	,08	864,00					
9	Building Walls	335,000	SF	,05	16,750,00					
Gran	Grand Total (Items 1 through 9)									

I agree to meet the stated minimum requirements as set forth in the specifications stated herein and any documents attached for the total bid amount of:

Total Bid Amount (Written): OneHundred Eighty One Thousand One Fourteen dollars and \_\_\_\_\_ Hundred

BID NO. 04-13-22-11

Estimated Delivery Days: 15 days
Bidder/Company Name: Santana Pressure Cleaning Services, Inc
Authorized Representative: Mario Santana
Signature: Mu Satt
Title: President
Address: 8506 N. Dexter Ave-
City, State & Zip: Tampa, FL 33604

REMAINDER OF PAGE LEFT INTENTIONALLY BLANK

BID NO. 04-13-22-11

Inc

### BIDDER INFORMATION

no Cleanir ervices-Company Name: Federal Tax I.D. No .: Presid Title: Bidder's Name (Print): A ve Address: 3100 2 City/State/Zip: Fax: 813 Phone: DEPA ean COY

### ACKNOWLEDGEMENT OF ADDENDA

Instructions: Complete Part I or Part II, Whichever Applies

### Part I:

Email:

Bidder has examined copies of all the Contract Documents and of the following Addenda (receipt of all which is hereby acknowledged).

Addendum No:	Dated: <u>५ - 13 - २२</u>
Addendum No:	Dated:

### Part II:

No Addendum was received in connection with this bid.

It is understood and agreed by Bidder that the City reserves the right to reject any and all Bids, to make awards on all items or any items according to the best interest of the City, and to waive any irregularities in the Bid or in the Bids received as a result of the Bid. It is also understood and agreed by the Bidder that by submitting a bid, Bidder shall be deemed to understand and agree that no property interest or legal right of any kind shall be created at any point during the aforesaid evaluation/selection process until and unless a contract has been agreed to and signed by both parties.

Bidder's Authorized Signature

CLIC na

Date

**Bidder's Printed Name** 

### BIDDER'S QUALIFICATIONS (Page 1 of 5)

- **NOTE:** This statement of Bidder's Qualifications must be completely filled out, properly executed and returned as part of your bid.
- 1. List the true, exact and proper names of the company, partnership, corporation, trade or fictitious name under which you do business and principals by name and titles:

1

2.

3.

4.

Address: 8506 N. Dexter		- 221 01
City: Tampa St	ate: FC	Zip: 33.00
Phone No.: 813-932-2054	Fax No.: <u>813-9</u>	32-2053
Federal Tax I.D.:	37	
Principals: Mario Santana	Titles: Presic	lent
Kelly French	Secret	ary
		1
<ul> <li>Are you licensed, as may be required, in</li> </ul>		Broward County, Florida
b. List Principals Licensed: Name(s):	Title:	
Name(s):		

# BIDDER'S QUALIFICATIONS (Page 2 of 5)

b.	Name, address and Ownership percentage of all partners: S Corporcition
	lario Santana 100%
8	SOLEN. Dexter
T	ampa, FL 33604
с.	State whether general or limited partnership: $N/A$
	der is other than an individual, corporation or partnership, describe the organization and giv ame and address of principals.
	N/A
	der is operating under a fictitious name, submit evidence of compliance with the Florida ous Name Statute.
How	many years has your organization been in business under its present business name?
	· 8yrs 8 mos.
a.	Under what other former names has your organization operated?
	N/A
a.	Has your company ever failed to complete a bonded obligation or to complete a contract?

5.

6.

7.

### BIDDER'S QUALIFICATIONS (Page 3 of 5)

b. If so, give particulars including circumstances, where and when, name of bonding company, name and address of City and disposition of matter:

 Litigation/Judgments/Settlements/Debarments/Suspensions: Submit information on any pending litigation and any judgments and settlements of court cases relative to providing the services requested herein that have occurred within the last three (3) years. Also indicate if your firm has been debarred or suspended from doing business with any government agency and/or professional board.

None-N/A

9.

a. List the pertinent experience of the key individuals of your organization (continue on insert sheet, if necessary).

commercial pressure cleaning w buildings, streetscapes, cur Cor 01. HPS Sovern OF

b. State the name of the individual(s) and titles that will have personal supervision of the work:

resider in Trew Chie eu

10. List name and title of persons in your company who are authorized to enter into a contract with the City of Coconut Creek, Florida for the proposed work should your company be the Successful Bidder.

Name: MarioSantana Title: Presider

### BIDDER'S QUALIFICATIONS (Page 4 of 5)

The undersigned guarantees the authenticity of the foregoing statements and does hereby authorize and request any person, firm or corporation to furnish any information requested by the City of Coconut Creek, Florida to verification of the recitals comprising this statement of the Bidder's qualifications. DISCOVERY OF ANY OMISSION OR MISSTATEMENT THAT MATERIALLY AFFECTS THE BIDDER'S QUALIFICATIONS TO PERFORM UNDER THE CONTRACT SHALL CAUSE THE CITY TO REJECT THE BID, AND IF AFTER THE AWARD TO CANCEL AND TERMINATE THE AWARD AND/OR CONTRACT.

Date: 4 - 12 - 2

nt Name

Sontana Pressure Cleaning Services, Inc.

Presider

Title

If Corporation (Seal) If Individual or Partnership, two Witnesses are required:

Witness

Maden mos

Witness

Respectfully submitted

(CORPORATE SEAL)

Santana Pressure Cleaning Services, Inc.

Company - Contractor

### **BIDDER'S QUALIFICATIONS** (Page 5 of 5)

ATTEST:

Secretary

Witness Mayon Mite <u>Mic</u> Witness

Witness

By Mar (Seal) President

Contractor Signature

Construction Industry Licensing Board

Registration No.:	NA
Certification No.:	NA
Qualifying Individual:	N/A

# **BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 - 954-831-4000 VALID OCTOBER 1, 2021 THROUGH SEPTEMBER 30, 2022

DBA:

Business Name: SANTANA PRESSURE CLEANING SERVICES

Receipt #: 329-301632 ALL OTHERS (PRESSURE WASHING) Business Type:

Owner Name: MARIO SANTANA Business Location: 1628 WILSON ST APT 2 HOLLYWOOD

Business Phone: 813-932-2054

Business Opened:09/24/2019 State/County/Cert/Reg: **Exemption Code:** 

Roo	oms	Seats	Employees 5	Machines	Profes	sionals
	Number of Machir		For Vending Business Only Vending Type		:	
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	0.00	0.00	0.00	33.00

## THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

#### THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

#### Mailing Address:

MARIO SANTANA C/O: SANTANA PRESSUR 8506 N. DEXTER AVE TAMPA, FL 33604

Receipt #WWW-20-00225769 Paid 07/22/2021 33.00

### 2021 - 2022

# **BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 - 954-831-4000 VALID OCTOBER 1, 2021 THROUGH SEPTEMBER 30, 2022

Rooms

DBA: SANTANA PRESSURE CLEANING SERVICES INC Receipt #: 329-301632 Business Type: ALL OTHERS (PRESSURE WASHING)

Owner Name: MARIO SANTANA Business Location: 1628 WILSON ST APT 2 HOLLYWOOD Business Phone: 813-932-2054

Canta

Business Opened: 09/24/2019 State/County/Cert/Reg: **Exemption Code:** 

Rooms		5113	Jeals	5 5	Machines	Profes	sionals
Sig	gnature	Number of Machir		Vending Business Only			
	Tax Amount	Transfer Fee	NSF Fee	Penalty	Vending Type: Prior Years		
	33.00	0.00			i noi reals	Collection Cost	Total Paid
	55.00	0.00	0.00	0.00	0.00	0.00	33.00

Receipt #WWW-20-00225769 Paid 07/22/2021 33.00



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/15/2021

THIS CERTIFICATE IS ISSUED AS CERTIFICATE DOES NOT AFFIRM BELOW. THIS CERTIFICATE OF REPRESENTATIVE OR PRODUCER	INSURAN	NCE DOES NOT CONST	TITUTE A CONTI	R ALTER THE RACT BETWEI	COVERAGE AFFORD	ed by Rer(s)	THE POLICIE
IMPORTANT: If the certificate hold If SUBROGATION IS WAIVED, subj this certificate does not confer right	er is an . ect to the	ADDITIONAL INSURED,	the policy(ies) m	ust have ADDI tain policies n	TIONAL INSURED prov nay require an endorse	isions o ment. /	r be endorse A statement o
PRODUCER Phone: (813)251-4		Fax: (813)253-2676	CONTACT	Professional Insur			
Professional Insurance Center, Inc.		(112)202 20/10	PHONE				
2003 West Kennedy Blvd			E-MAIL	(813)251-4900	IAIC, N	o): <sup>(813)25</sup>	3-2676
Tampa, Florida 33606			AODRESS:		ance@piconline.com		
				INSURER(S) AFE	ORDING COVERAGE	·	NAIC #
INSURED	··				y Insurance Company		44520
Santana Pressure Cleaning Services Inc. 8506 N Dexter Avenue			INSURER B : Tec	hnology Insurance Co	ompany, Inc.		42376
Tampa, FL 33604			INSURER C :				
			INSURER D :		······································		
			INSURER E :				1
COVERAGES CF	DTIEICA	TE NUMBER: 2179	INSURER F :	····			
THIS IS TO CERTIEV THAT THE BOUCH	OF IN	NUDANOT LIGHT			<b>REVISION NUMBER:</b>		
INDICATED. NOTWITHSTANDING ANY CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUC ISR TYPE OF INSURANCE	V DEDTAI	N, THE INSURANCE AFFO ES. LIMITS SHOWN MAY H/	AVE BEEN REDUCE	ACT OR OTHER	R DOCUMENT WITH RES BED HEREIN IS SUBJECT MS.	TO ALL	WHICH THIS
COMMERCIAL GENERAL LIABILITY		BAK-81463-1	6/5/2021	6/5/2022			
CLAIMS-MADE CLAIMS-MADE	-			0.012022	EACH OCCURRENCE	\$	1,000,000
					PREMISES (Ea occurrence)	5	100,000
					MED EXP (Any one person)	\$	5,000
GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY	\$	1,000,000
POLICY PRO- JECT LOC				j	GENERAL AGGREGATE	\$	2,000,000
OTHER:			1		PRODUCTS - COMP/OP AGG		2,000,000
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT	\$	
ANY AUTO					(Ea accident)	\$	
AUTOS ONLY SCHEDULED					BODILY INJURY (Per person)	\$	
AUTOS ONLY					BODILY INJURY (Per accident PROPERTY DAMAGE		
				1	(Per accident)	\$	
UNBRELLA LIAB OCCUR		······································				\$	
EXCESS LIAB CLAIMS-MADE	Í				EACH OCCURRENCE	; <b>\$</b>	
DED RETENTION\$				ł	AGGREGATE	5	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		TWC4033134	10/17/2021	10/17/2022	V PER OTH-	\$	
ANY PROPRIETOR/PARTNER/EXECUTIVE							
(Mandatory in NH)	N/A				E.L. EACH ACCIDENT	\$	1,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE		1,000,000
					E.L. DISEASE - POLICY LIMIT	\$	1,000,000
			ļ				
SCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACOR	D 191, Additional Remarks Scher	duie, may be attached if				
SSURE CLEANING OPERATION, CLEANING OUTS	IDE SURFA	CES OF BUILDINGS & WALKWAY	YS	more space is requ	neci)		[
TIFICATE HOLDER IS AN ADDITIONAL INSURE	D AS REQU	IRED BY CONTRACT ON GENERA	AL LIABILITY POLTO	Ŷ			
DENCE OF COVERAGE ONLY ON WORKER'S COMPL	ENSATION (	COVERAGE		-			
RTIFICATE HOLDER			CANCELLATE				
der's Nature of Interest : Additional Insured			CANCELLATIO	N			
•			SHOULD ANY O THE EXPIRATIO ACCORDANCE V	JN DAIE THE	ESCRIBED POLICIES BE CA REOF, NOTICE WILL B Y PROVISIONS.	ANCELLE Le delf	D BEFORE VERED IN
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			AUTHORIZED REPRES		in Michael Rotion	)	
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ORD 25 (2016/03)	The AC	ORD name and loop ar	I ₩ ···· bereteinen 6	000-2015 ACU	RD CORPORATION.	All right	s reserved.

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# **CERTIFICATE OF INSURANCE**

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. Alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Certificate Holder:	Named Insured:
22	SANTANA PRESSURE CLEANING SERVICES, INC.
	8506 N DEXTER AVE TAMPA FL 33604-1304

_				Automobile Liability			
In	surer Nan	ne: Allstate Insurance Con	npan	iy			
Po	licy Num	ber: 648884585					
	1 - Any	Auto		2 - Owned Autos Only	3 - Owned Priv	Pass. Autos Only	
4 - Owned Autos Other Than Priv.		5 – Owned Autos Subject to No Fault		os Subject to a Compulsory UM Law			
X	7 - Spe	cifically Described Autos	X	8 - Hired Autos Only	9 - Non-owned	Autos Only	
Po	licy Effec	tive Date: 04-27-2021		Policy Expiration Date: 0	4-27-2022		
		\$ 1,000,000 Co		Combined Single Limit (each	Combined Single Limit (each accident)		
Ins	surance:	BI Per Person		son BI Pe	BI Per Accident		
		Description of	of Op	perations/Locations/Vehicles/Endo	rsements/Special I	PD Per Accident Provisions	

Interested Party Type: ADDITIONAL INSURED - OTHER

THIS CERTIFICATE DOES NOT GRANT ANY COVERAGE OR RIGHTS TO THE CERTIFICATE HOLDER.

IF THIS CERTIFICATE INDICATES THAT THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST EITHER BE ENDORSED OR CONTAIN SPECIFIC LANGUAGE PROVIDING THE CERTIFICATE HOLDER WITH ADDITIONAL INSURED STATUS. THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED ONLY TO THE EXTENT INDICATED IN SUCH POLICY LANGUAGE OR ENDORSEMENT.

Producer:	
REDSHIFT GROUP LLC	
Authorized Representative:	
	Date: 05-21-21

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# SAFETY DATA SHEET

### 1. Identification

Product identifier Product Code Recommended use Restrictions Manufacturer Company name Address Degreaser # 212 Cleaner Industrial use only

Newagain Inc 4613 N. Thatcher Ave Tampa, FL 33614 United States 813-247-4969 800-255-3924

# Emergency phone 2. Hazard identification

Physical hazards

Telephone

Skin irritation. Eye damage/eye irritation

Label elements



Signal word	Caution
Hazard statement	Causes skin irritation and eye damage.

Precautionary statement	
Prevention	

Wash thoroughly after handling. Wear protective gloves/clothing/eye/face protection.
If swallowed, rinse mouth. <b>Do not</b> induce vomiting. Drink plenty of water.
If on skin rinse with soap and water. If inhaled, remove to fresh air.
If in eyes, rinse cautiously with water for several minutes.
In case of fire: Use appropriate media to extinguish.
Store ia a well-ventillated place. Keep cool.
Dispose of contents/container in accordance with local
regional, national, and international regulations.

### 3. Composition/information on ingredients

Mixture		
Chemical name	CAS number	<u>%</u>
Soda Ash	497-19-8	05-15
Glycol Ether DPM	34590-94-8	05-15
Mixed Surfactants	Trade secrets	01-05
4. First Aid		
Inhalation	Move to fresh air.	
Skin contact	If on skin rinse with soap and water. Get medical attention if irritation develops or persist.	
Eye contact	If in eyes, rinse cautiously with water for several minutes. Call physician.	
Ingestion	If swallowed,rinse mou	uth. <b>Do not</b> induce vomiting. Drink plenty of water. Call physician .

### 5. Fire Fighting

Extinguishing media	Use extinguishing measures that are appropriate to local circumstances and enviroment.
Flash point	Not flammable
Hazardous combustion	Carbon oxides
Explosion data	Not sensitive
Protective Equipment	As in any fire, wear sellf-contained breathing apparatus pressure-demand, and full protective gear.
<u>NFPA</u>	Health Hazard 1 Flammability 0 Stability 0

Revision Date 4/2015

SAFETY DATA SHEET Degreaser 212

Page 1/3

### 6. Accidental Release Measures

Personal precautions	Wear protective gloves/clothing and eye/face protection.
Methods for containment	Prevent further leakage or spillage if safe to do so.
Methods for clean up	Wear protective equipment when handling material to prevent contact. Avoid dust formation. Clean up promptly by scoop or vacuum. Pick up and transfer to properly labeled containers.
7. Handling and Storage	Avoid breathing dust. Avoid contact with skin and eyes. Handle in accordance with good

industrial hygiene and safety.

### 8. Exposure controls / personal protection

Exposure guidelines	This product does not contain any hazardous material with occupational exposure limits
	established by the region specific regu; atory bodies.
Engineering measures	Showers, eyewash stations, and ventilation systems.

### 9. Physical and chemical properties

Appearance	Clear red/orange liquid
Odor	Mild
рН	11 pH
Freeze point	Not available
Flash Point	Not Flammable
Evaporation rate	1 (water=1)
Flammability	Not applicable
Vapor Pressure	Not determined
Relative density	1.05
Solubility	Easily soluble with water
VOC	0%

#### 10. Stability and reactivity

Stability and reactivity	Stable
Incompatibility	Acids
Hazardous Polymerization	Will not occur
Hazardous Decomposition	Carbon oxides

### 11. Toxicological

Relevent LD/LC50 Values Skin / Eyes Respiratory

12.	Ecological Information	Do not contaminate water by cleaning of equipment or disposal of wastes.	
-----	------------------------	--	--

**13. Disposal information**Waste must be disposed of in accordance with federal, state, and local environmental<br/>control regulations. Consult your local or regional authorities for additional information.

14. Transport information Non Regulated Compound Cleaning liquid

15. Regulatory information	
Sara Title 355	
Sara Title 313	
Clean Water Act 302	
Clean Water Act 311/312	
Clean Air Act 112	

No products found No products found No products found Acute Health Hazard No products found

Page 2/3 SAFETY DATA SHEET Degreaser 212 NFPA/HMIS Health 1 Flammability 0 Physical 0

**Other Information** 

To best of our knowledge, the information contained herein is accurate. However, neither the above named supplier nor any of its subsidiaries assume any liability whatsoever for the accuracy or completeness of the information contained herein. Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although certain hazards are described herein, we cannot guarantee that these are the only hazards that exist.

BID NO. 04-13-22-11

### DRUG-FREE WORKPLACE FORM

The undersigned vendor in accordance with *Florida Statutes*, Chapter 287, Section 287.087 hereby certifies that <u>Sandaro Pressure Cleaning Services</u>, <u>Inc.</u> does: (Name of Business)

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of *Florida Statutes*, Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

sut.

Date

### E-VERIFY FORM

Project Name:	Pressure Cleaning Services
Project No.:	IFB 04-13-22-11

### Definitions:

"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration.

"Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

Effective January 1, 2021, public and private employers, contractors and subcontractors will begin required registration with, and use of the E-verify system in order to verify the work authorization status of all newly hired employees. Vendor/Consultant/Contractor acknowledges and agrees to utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:

- (a) All persons employed by Vendor/Consultant/Contractor to perform employment duties within Florida during the term of the contract; and
- (b) All persons (including subvendors/subconsultants/subcontractors) assigned by Vendor/Consultant/Contractor to perform work pursuant to the contract with the Department. The Vendor/Consultant/Contractor acknowledges and agrees that use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Coconut Creek; and
  - Should vendor become successful Contractor awarded for the above-named project, by entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The contractor shall maintain a copy of such affidavit for the duration of the contract. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

z	Company Name: Santana Pressure Cleaning Services, Frc
INFORMATION	Authorized Signature: Marca autor
<b>VFOR</b>	Print Name: Mario, Santana
101/06/8	Title President
CONTACT	Date: 4-12-2022
	Phone: 813-932-2054
COMPANY	Email: mario enerd pressure clean.com
0	Website: www.needpressurection.com

### EXCEPTION TO THE INVITATION FOR BIDS

**NOTE:** Bids that are exceptions to that which are specified and outlined below. (Additional sheets may be attached.) However, all alterations or omissions of required information or any change in bid requirements is done at the risk of the Bidder presenting the bid and may result in the rejection thereof.

NA 

Receipt	# 1256946	Control No. 0078506	2022			
		JULY 1ST, 2021 and	ending September 30, 2022			
For Peri	od Commencing					
		125.76 Dated 07/22/2021	Application No.	Zoning and other land		
This Busi	ness Tax Receipt does	not permit the holder to operate in violation of any City L	aw or Ordinance including, but not Development oning by calling the Office of Land Development	nt Coordination at		
use regu	ations. If in doubt, the	nolder should verify that he or she has the appropriate sceipt must be conspicuously posted in place of business	3.	Amount	1	
274-3100	assification	Description		\$115.76	2022	
	045	PRESSURE WASHING	10	\$10.00	CITY OF TAMP	
	000	ADMIN HANDLING FEE			TAX RECEIPT BUSINESS TAX DIVISION	
	1				By: WEB	
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Busi	ness Name and	URE CLEANING SERVICES INC	SANTANA PRESSURE 8506 N DEXTER AVE	CLEANING OLIV		
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21 - 202	2 HILLSBOR	DUGH COUNTY BUSINESS TAX RE	ECEIPT EXPIRES SEPTE	MBER 30 2022	ACCOUNT NO. 268886	
C. CODE				MBER 30, 2022	268886	
CODE		DUGH COUNTY BUSINESS TAX RE		F	268886 RENEWAL Receipt Fee	
CODE				F Hazardous Waste	268886 RENEWAL Receipt Fee	
CODE				F Hazardous Waste	268886 RENEWAL Receipt Fee	
C. CODE	5050 PRESSUF SANTANA PR SERVICES ING 8506 N DEXTE	RE CLEANING HOUSES, MOBILE HOM	ES 1 Employees	F Hazardous Waste Law	268886 RENEWAL Receipt Fee 2 Surcharge 2	
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**BUSINESS TAX RECEIPT** 

HAS HEREBY PAID A PRIVILEGE TAX TO ENGAGE IN BUSINESS, PROFESSION, OR OCCUPATION SPECIFIED HEREON NANCY C MILLAN, TAX COLLECTOR 813-635-5200 THIS BECOMES A TAX RECEIPT WHEN VALIDATED.

07/22/2021 62.00

### INDEMNIFICATION CLAUSE

The parties agree that one percent (1%) of the total compensation paid to Contractor for the work of the contract shall constitute specific consideration to Contractor for the indemnification to be provided under the contract. The Contractor shall indemnify and hold harmless the City Commission, the City of Coconut Creek, and their agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the performance of the work provided that any such claim, damage, loss or expense (1) is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property (other than the work itself) including the loss of use resulting therefrom, and (2) is caused in whole or in part by any negligent act or omission of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder.

In any and all claims against the City, or any of their agents or employees by any employee of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation under this Paragraph shall not be limited in any way by any limitation on this amount or type of damages compensation or benefits payable by or for the Contractor or any subcontractor under Workers' Compensation Acts, Disability Benefit Acts or other Employee Benefit Acts.

Nothing in this section shall affect the immunities of the City pursuant to Chapter 768, *Florida Statutes*, as amended from time to time, nor shall it constitute an agreement by the City to indemnify Contractor, its officers, employers, subcontractors or agents against any claim or cause of action. This section shall not be construed as consent to be sued by any third parties in any matter arising out of this Agreement. The foregoing indemnification and release shall survive the termination of this Agreement.

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Contractor's Name

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# SAFETY DATA SHEET

### 1. Identification

Product identifier	Chlorine		
Other means of identification			
SDS number	AUC-005		
Synonyms	Liquid Chlorine * Elemental Chlorine * Molecular chlorine * Compressed Chlorine Gas		
Recommended use	Production of chlorinated inorganic and organic chemicals; bleaching agent for paper, textiles and		
	fabrics; used in water purification	on, sewage disi	nfection and food processing.
Recommended restrictions	Professional use only		
Manufacturer/Importer/Supplier/	Distributor information		
Manufacturer			
Company name	Allied Universal Corporation		
Address	3901 N.W. 115th Avenue		
	Miami, FL 33178		
	United States		
Telephone	General:	1-305-888-26	
Website	24-Hour alert: www.allieduniversal.com	1-786-522-02	07
E-mail	Not available.		
Contact person	Operations Department		
Emergency phone number	CHEMTREC	1-800-424-93	00 (US/Canada)
			3887 (International)
Supplier	Refer to Manufacturer		
2. Hazard(s) identification			
	Ovidizing gagage		Cotogon 1
Physical hazards	Oxidizing gases		Category 1
	Gases under pressure		Liquefied gas
Health hazards	Acute toxicity, inhalation		Category 2
	Skin corrosion/irritation		Category 1
	Serious eye damage/eye irritati	on	Category 1
	Specific target organ toxicity, si	ngle exposure	Category 3 respiratory tract irritation
Environmental hazards	Hazardous to the aquatic environ long-term hazard	onment,	Category 1
OSHA defined hazards	This mixture does not meet the	classification of	criteria according to OSHA HazCom 2012.
Label elements			
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			$\times$ ! >
		<i>" \/</i>	
Signal word	Danger	•	•

Signal word Hazard statement

May cause or intensify fire; oxidizer. Contains gas under pressure; may explode if heated. Causes severe skin burns and eye damage. Fatal if inhaled. May cause respiratory irritation. Very toxic to aquatic life.

Precautionary statement Prevention

Keep/Store away from clothing and other combustible materials. Keep reduction valves free from grease and oil. Do not breathe gas. Use only outdoors or in a well-ventilated area. Wear respiratory protection. Wash hands and face thoroughly after handling. Wear protective gloves/clothing and eye/face protection. Avoid release to the environment.

Response	Specific treatment is urgent (see this label). IF SWALLOWED: Rinse mouth. Do NOT induce vomiting. IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower. Wash contaminated clothing before reuse. IF INHALED: Remove person to fresh air and keep comfortable for breathing. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER or doctor/physician. In case of fire: Stop leak if safe to do so. Collect spillage.
Storage	Store in a well-ventilated place. Keep container tightly closed. Store locked up. Protect from sunlight.
Disposal	Dispose of contents/container in accordance with local/regional/national/international regulations.
Hazard(s) not otherwise classified (HNOC)	No OSHA defined hazard classes. Other hazards which do not result in classification: Toxic fumes, gases or vapors may evolve on burning. Chlorine is extremely corrosive to most metals in the presence of moisture (> 150 ppm water and/or -40 degrees F dew point) or at high temperatures. Combines with water to produce hydrochloric and hypochlorous acid. Severe, short-term exposures may cause long-lasting respiratory effects, e.g. Reactive Airways Dysfunction (RADS), due to the material's severe irritating properties. Contact with liquefied gas might cause frostbites, in some cases with tissue damage. Direct contact with liquefied gas may cause frostbite and corrosive injury to the eyes.
Supplemental information	Keep away from heat. Make sure valves on gas cylinders are fully opened when gas is used. Open cylinder valve slowly to prevent rapid decompression and damage to valve seat. Use smallest possible amounts in designated areas with adequate ventilation. Liquid chlorine lines must have suitable expansion chambers between block valves due to high coefficient of expansion. Shut flow off at cylinder valve and not just at the regulator after use. Use a suitable hand truck to move cylinders; do not drag, roll, slide, or drop. Secure cylinders in an upright position at all times, close all valves when not in use. Establish written emergency plan and special training where chlorine is used. Regularly inspect and test piping and containers used for chlorine service.

### 3. Composition/information on ingredients

# Chemical name Common name and synonyms Chlorine Liquid Chlorine Chlorine Elemental Chlorine Molecular chlorine Compressed Chlorine Gas

4. First-aid measures	
Inhalation	Take proper precautions to ensure your own safety before attempting rescue (e.g. wear appropriate protective equipment, use the buddy system). IF INHALED: Remove person to fresh air and keep comfortable for breathing. If breathing is difficult, trained personnel should give oxygen. If breathing stops, provide artificial respiration. Induce artificial respiration with the aid of a pocket mask equipped with a one-way valve or other proper respiratory medical device. Immediately call a POISON CENTER or doctor/physician.
Skin contact	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower. Do not rub area of contact. Gently remove clothing or jewelry. Carefully cut around clothing that sticks to the skin. Wash contaminated clothing before reuse. Immediately call a POISON CENTER or doctor/physician. Discard any shoes or clothing items that cannot be decontaminated.
Eye contact	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Take care not to rinse contaminated water into the unaffected eye or onto the face. Do not rub eyes. Immediately call a POISON CENTER or doctor/physician.
Ingestion	Not an expected route of entry under normal conditions of use. If ingestion of a large amount does occur, call a poison control center immediately. Do not induce vomiting. Never give anything by mouth to a victim who is unconscious or is having convulsions.

**CAS** number

7782-50-5

%

99.5

Most important symptoms/effects, acute and delayed	Fatal if inhaled. Immediately dangerous to life or health (IDLH) at 10 ppm. May cause severe irritation to the nose, throat, and respiratory tract. Symptoms may include coughing, choking and wheezing. Could also cause tightness in the chest, a blue discolouration of the skin (cyanosis), severe headache, nausea, vomiting and fainting. Inhalation could result in pulmonary edema (fluid accumulation). Symptoms of pulmonary edema (chest pain, shortness of breath) may be delayed. May result in unconsciousness and possibly death. Severe, short-term exposures may cause long-lasting respiratory effects, e.g. Reactive Airways Dysfunction (RADS), due to the material's severe irritating properties. With this condition, asthma-like symptoms and increased reactivity of the airways is experienced. Direct skin contact may cause corrosive skin burns, deep ulcerations and possibly permanent scarring. If product is sprayed directly on skin, symptoms of frostbite may be experienced including numbness, prickling and itching. Corrosive to the eyes and may cause severe damage including blindness. Symptoms may include stinging, tearing, redness, swelling, and blurred vision. If product is sprayed directly into the eyes, could cause freezing of the eye.
Indication of immediate medical attention and special treatment needed	Immediate medical attention is required. Fatal if inhaled. Causes chemical burns. Symptoms may be delayed. Keep victim under observation. Medical supervision for minimum 48 hours. Provide general supportive measures and treat symptomatically.
General information	First-aid procedures should be reviewed by appropriate personnel familiar with chlorine and its conditions of use in the workplace. Ensure that medical personnel are aware of the material(s) involved, and take precautions to protect themselves. Show this safety data sheet to the doctor in attendance.
5. Fire-fighting measures	
Suitable extinguishing media	Extinguishing media - small fires: Dry chemicals. Carbon dioxide (CO2). Extinguishing media - large fires: Water Spray or Fog. Foam.
Unsuitable extinguishing media	Use water with caution. May react with water. Do not use direct water spray or water jet as an extinguisher, as this will spread the fire.
Specific hazards arising from the chemical	Pressurized container may explode when exposed to heat or flame. May react to cause fire and or explosion upon contact with many organic compounds, ammonia, hydrogen and with many metals at elevated temperatures. Chlorine will support the burning of most combustible materials. Combines with water to produce hydrochloric and hypochlorous acid. Liquefied chlorine can accumulate static charge by flow or agitation, since it has a very low electrical conductivity. Chlorine containers or cylinders may vent rapidly or rupture violently, if exposed to fire or excessive heat for a sufficient period of time. Intense local heat (above 200 deg C) on the steel walls of chlorine cylinders can cause an iron/chlorine fire resulting in rupture of the container. Vapors are heavier than air and may spread along floors. Toxic fumes, gases or vapors may evolve on burning.
Special protective equipment and precautions for firefighters	Firefighters should wear full protective clothing including self contained breathing apparatus. Firefighters must use standard protective equipment including flame retardant coat, helmet with face shield, gloves, rubber boots, and in enclosed spaces, SCBA. A full-body chemical resistant suit should be worn.
Fire fighting equipment/instructions	Fight fire from maximum distance or use unmanned hose holders or monitor nozzles. Move containers from fire area if you can do so without risk. Remove combustible materials. Stop the flow of gas before extinguishing fire, if safe to do so. Use water spray to direct escaping gas away from workers if it is necessary to stop the flow of gas. Cool containers exposed to heat with water spray and remove container, if no risk is involved. Stay away from ends of cylinders and withdraw immediately in case of rising sounds or discolouration of containers. Do not allow run-off from fire fighting to enter drains or water courses. Dike for water control.
Specific methods	Use standard firefighting procedures and consider the hazards of other involved materials.
General fire hazards	The product itself does not burn. However, material is considered to be an oxidizing gas. Supporter of combustion and can intensify a fire.
Hazardous combustion products	Toxic chemicals are formed when combustible materials burn in chlorine. These may include corrosive hydrogen chloride gas and other chlorine compounds.
6. Accidental release meas	ures
Personal precautions.	Restrict access to area until completion of clean-up. Keep unnecessary personnel away. Keep

Personal precautions, protective equipment and emergency procedures Restrict access to area until completion of clean-up. Keep unnecessary personnel away. Keep people away from and upwind of spill/leak. Consider initial downwind evacuation for at least 500 meters (1/3 mile). Ensure clean-up is conducted by trained personnel only. Ventilate closed spaces before entering them. Many gases are heavier than air and will spread along ground and collect in low or confined areas (sewers, basements, tanks). Eliminate all ignition sources (no smoking, flares, sparks, or flames in immediate area). Do not touch damaged containers or spilled material unless wearing appropriate protective clothing. Wear appropriate protective equipment and clothing during clean-up. For personal protection, see section 8 of the SDS.

Methods and materials for containment and cleaning up	Stop the flow of material, if this is without risk. Use only non-sparking tools. Keep combustibles (wood, paper, oil, etc.) away from spilled material. Remove or isolate incompatible materials as well as other hazardous materials. Do not spray leak with water since a reaction producing corrosive hypochlorous and hydrochloric acids occurs, which can aggravate the leak. May be absorbed and neutralized into solutions of caustic soda, or lime and placed in polypropylene, polyvinyl chloride, fibreglass or lead containers. Since hypochlorites are formed, the solutions must be treated with a reducing agent such as sodium sulfite before disposal. Do not immerse container in caustic solution.	
	evacuation of the surrounding area. When possible draw off chlorine to process or disposal system .	
	Contact the proper local authorities.	
	For waste disposal, see section 13 of the SDS.	
Environmental precautions	Avoid release to the environment. Prevent entry into waterways, sewer, basements or confined areas. Contact local authorities in case of spillage to drain/aquatic environment.	
7. Handling and storage		
Precautions for safe handling	Establish written emergency plan and special training where chlorine is used.	
	Use only outdoors or in a well-ventilated area. Wear respiratory protection. Wear protective gloves/clothing and eye/face protection. See Section 8 of the SDS for Personal Protective Equipment. Do not breathe gas. Avoid contact with eyes, skin, and clothing. Regularly inspect and test piping and containers used for chlorine service. Liquid chlorine lines must have suitable expansion chambers between block valves due to high coefficient of expansion. Keep away from heat. Keep/Store away from clothing and other combustible materials. Keep reduction valves free from grease and oil. Use only chlorine compatible lubricants. Use smallest possible amounts in designated areas with adequate ventilation. Shut flow off at cylinder valve and not just at the regulator after use. Use a suitable hand truck to move cylinders; do not drag, roll, slide, or drop. Protect against physical damage. Wash hands after handling and before eating.	
Conditions for safe storage, including any incompatibilities	Store in steel pressure cylinders in a cool, dry area outdoors or in well-ventilated, detached or segregated areas of non-combustible construction. Keep container tightly closed. Store locked up. Protect from sunlight. Storage area should be clearly identified, clear of obstruction and accessible only to trained and authorized personnel. Do not store near combustible materials. Wood and other organic materials should not be used on floors, structural materials, or ventilation systems in the storage area. Store away from incompatible materials (see Section 10 of the SDS). Secure cylinders in an upright position at all times, close all valves when not in use. Use a "first in - first out" inventory system to prevent full cylinders from being stored for excessive periods of time. Store at temperatures not exceeding 55°C (131°F). For the specified temperature the system pressure is 225 psig (1551 kPa).	
8. Exposure controls/personal protection		

## Occupational exposure limits

Material	Туре	Value	
Chlorine (CAS 7782-50-5)	Ceiling	3 mg/m3	
		1 ppm	
US. ACGIH Threshold Limit	Values		
Material	Туре	Value	
Chlorine (CAS 7782-50-5)	STEL	1 ppm	
	TWA	0.5 ppm	
US. NIOSH: Pocket Guide to	o Chemical Hazards		
Material	Туре	Value	
Chlorine (CAS 7782-50-5)	Ceiling	1.45 mg/m3	
		0.5 ppm	
logical limit values	No biological exposure limits noted for the in	gredient(s).	
osure guidelines The NIOSH IDLH concentration for Chlorine is 10 ppm.			

Appropriate engineering controls	Ensure adequate ventilation, especially in confined areas. Good general ventilation (typically 10 air changes per hour) should be used. Ventilation rates should be matched to conditions. If applicable, use process enclosures, local exhaust ventilation, or other engineering controls to maintain airborne levels below recommended exposure limits. If exposure limits have not been established, maintain airborne levels to an acceptable level. In case of insufficient ventilation, wear suitable respiratory equipment.
Individual protection measures	, such as personal protective equipment
Eye/face protection	Wear eye/face protection. Chemical goggles are recommended. Wear a full-face respirator, if needed. A full face shield may also be necessary. Eye wash fountains are required.
Skin protection	
Hand protection	Wear appropriate chemical-resistant gloves. Advice should be sought from glove suppliers.
Other	Wear appropriate chemical-resistant clothing. Where contact is likely, wear chemical-resistant gloves, a chemical suit and rubber boots. Eye wash facilities and emergency shower must be available when handling this product.
Respiratory protection	Up to 5 ppm: A NIOSH/MSHA approved air-purifying respirator with the appropriate chemical cartridges or a positive-pressure, air-supplied respirator may be used to reduce exposure. Up to 10 ppm: A SAR (supplied air respirator) operated in a continuous flow mode or powered air purifying respirator with cartridge(s); a full facepiece chemical cartridge respirator with cartridge(s); a gas mask with canister; a full facepiece SCBA (self contained breathing apparatus) ; or a full facepiece SAR may be used to reduce exposure. EMERGENCY OR PLANNED ENTRY INTO UNKNOWN CONCENTRATIONS OR IDLH CONDITIONS: Positive pressure, full-facepiece SCBA; or positive pressure, full-facepiece SAR with an auxiliary positive pressure SCBA. Respirators should be selected based on the form and concentration of contaminants in air, and in accordance with OSHA (29 CFR 1910.134). Advice should be sought from respiratory protection specialists.
Thermal hazards	Wear appropriate thermal protective clothing, when necessary.
General hygiene considerations	Do not breathe gas. Avoid contact with eyes, skin and clothing. Handle in accordance with good industrial hygiene and safety practice. Do not eat, drink or smoke when using the product. Wash hands before breaks and immediately after handling the product. Remove soiled clothing and wash it thoroughly before reuse. Inform laundry personnel of contaminant's hazards.

## 9. Physical and chemical properties

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Appearance	
Physical state	Gas (or liquid under pressure).
Form	Compressed liquefied gas.
Color	Amber color; vaporizes to greenish, yellow gas.
Odor	Pungent suffocating odor
Odor threshold	0.02 - 3.4 ppm (detection)
рН	Not applicable (reacts with water to form an acidic solution)
Melting point/freezing point	-149.8 °F (-101 °C)
Initial boiling point and boiling range	-30.28 °F (-34.6 °C)
Flash point	Not Applicable
Evaporation rate	Not Applicable.Gas at normal temperatures.
Flammability (solid, gas)	The product is not flammable.
Upper/lower flammability or exp	losive limits
Flammability limit - lower (%)	Not Applicable
Flammability limit - upper (%)	Not Applicable
Explosive limit - lower (%)	Not available.
Explosive limit - upper (%)	Not available.
Vapor pressure	638.4 kPa @ 20°C (68°F) 4788 mm Hg @ 20°C (68°F)
Vapor density	2.49 @ 0°C (32°F) (Air = 1)
Relative density	3.21 kg/m³ @ 0°C (32°F)

Material name: Chlorine

Solubility(ies)	
Solubility (water)	6.3 mg/l (Slightly soluble)
Solubility (other)	Soluble in dimethylformamide, disulfur dichloride, benzene, chloroform, carbon tetrachloride, hexachlorobutadiene, tetrachloroethane, pentachloroethane, chlorobenzene, nitrobenzene, glacial acetic acid (99.84%) and other chlorides
Partition coefficient (n-octanol/water)	Not applicable (gas)
Auto-ignition temperature	Not available.
Decomposition temperature	Not available.
Viscosity	Not available.
Viscosity temperature	Not Applicable (Gas)
Other information	
Critical temperature	290.75 °F (143.75 °C)
Explosive properties	Not explosive.
Molecular weight	70.91
Oxidizing properties	Strong oxidizing agent because of its electron-transfer capabilities. Supporter of combustion and can intensify a fire. Note, that Chlorine does not yield oxygen or any other oxidizing substance.
Specific gravity	0.003 @ 0°C (32°F)
10. Stability and reactivity	
Reactivity	Combines with water to produce hydrochloric and hypochlorous acid. These acids can decompose to hydrochloric acid and oxygen. Contact with combustible material may cause fire.
Chemical stability	Material is stable under normal conditions.
Possibility of hazardous reactions	Hazardous polymerization does not occur.Chlorine is extremely corrosive to most metals in the presence of moisture (> 150 ppm water and/or -40 degrees F dew point) or at high temperatures. Will support or initiate combustion or explosion of organic matter and other oxidizable material. Note, that Chlorine does not yield oxygen or any other oxidizing substance. Liquid or gaseous chlorine can react violently with many combustible materials, and other chemicals, including water. Metal halides, carbon, finely divided metals and sulfides can accelerate the rate of chlorine reactions. Chlorine reacts with carbon monoxide to produce toxic phosgene, and sulfur dioxide to produce sulfuryl chloride. Intense local heat (above 200 deg C) on the steel walls of chlorine cylinders can cause an iron/chlorine fire resulting in rupture of the container.
Conditions to avoid	Keep away from combustible materials. Avoid contact with incompatible materials. Keep away from heat. Do not use in areas without adequate ventilation.
Incompatible materials	Tin; Metals; Sulfides; Titanium. Reacts with most metals at high temperatures. Reacts with water to produce hydrochloric aids, which are corrosive to most metals. Ammonia, elemental metals, certain metal hydroxides, carbides, nitrides, oxides, phosphides and sulfides, easily oxidized materials, organic materials, reducing agents, alkalis and unstable and reactive compounds.
Hazardous decomposition products	Hydrogen chloride gas. Hydrochloric acid. Hypochlorous acid.

### 11. Toxicological information

### Information on likely routes of exposure

Inhalation	Very toxic by inhalation. Fatal if inhaled. May cause severe irritation to the nose, throat, and respiratory tract.	
Skin contact	Causes skin burns. Contact with liquefied gas might cause frostbites, in some cases with tissue damage. Not expected to be absorbed through the skin.	
Eye contact	Causes severe eye burns. If product is sprayed directly into the eyes, could cause freezing of the eye.	
Ingestion	Not an expected route of entry under normal conditions of use.	

Most important symptoms/effects, acute and delayed	Fatal if inhaled. Immediately dangerous to life or health (IDLH) at 10 ppm. May cause severe irritation to the nose, throat, and respiratory tract. Symptoms may include coughing, choking and wheezing. Could also cause tightness in the chest, a blue discolouration of the skin (cyanosis), severe headache, nausea, vomiting and fainting. Inhalation could result in pulmonary edema (fluid accumulation). Symptoms of pulmonary edema (chest pain, shortness of breath) may be delayed. May result in unconsciousness and possibly death. Severe, short-term exposures may cause long-lasting respiratory effects, e.g. Reactive Airways Dysfunction (RADS), due to the material's severe irritating properties. With this condition, asthma-like symptoms and increased reactivity of the airways is experienced. Direct skin contact may cause corrosive skin burns, deep ulcerations and possibly permanent
	scarring. If product is sprayed directly on skin, symptoms of frostbite may be experienced including numbness, prickling and itching.
	Corrosive to the eyes and may cause severe damage including blindness. Symptoms may include stinging, tearing, redness, swelling, and blurred vision. If product is sprayed directly into the eyes, could cause freezing of the eye.

### Information on toxicological effects

Acute toxicity

Hazardous by OSHA criteria. Classification: Acute Toxicity (inhalation - gas) - Category 2. Fatal if inhaled. See below for individual ingredient acute toxicity data.

	See below for individual ingree	dient acute toxicity data.		
Product	Species	Test Results		
Chlorine (CAS 7782-50-5)				
Acute				
Dermal				
LD50	Rabbit	No data in literature.		
Inhalation				
LC50	Rat	147 ppm, 4 Hours		
Oral				
LD50	Rat	No data in literature.		
Skin corrosion/irritation	Hazardous by OSHA criteria. Classification: Skin corrosion/irritation - Category 1. Causes severe skin burns.			
Serious eye damage/eye irritation	Hazardous by OSHA criteria. ( Serious eye damage/eye irrita	Classification: tion - Category 1. Causes serious eye damage.		
Respiratory or skin sensitizatio	n			
<b>Respiratory sensitization</b>	This product is not expected to	o cause respiratory sensitization.		
Skin sensitizer	This product is not expected to	o cause skin sensitization.		
Germ cell mutagenicity	Not expected to be mutagenic			
Carcinogenicity	This product is not considered to be a carcinogen by IARC, ACGIH, NTP, or OSHA. See below t ingredients present on regulatory lists.			
OSHA Specifically Regulate	ed Substances (29 CFR 1910.10	)01-1050)		
Not listed.				
Reproductive toxicity	This product is not expected to cause reproductive or developmental effects.			
Specific target organ toxicity - single exposure	<ul> <li>Hazardous by OSHA criteria. Classification: Specific Target Organ Toxicity (STOT), Single Exposure. Category 3. May cause respiratory irritation.</li> </ul>			
Specific target organ toxicity - repeated exposure	Not expected to be hazardous by OSHA criteria.			
Aspiration toxicity	Not likely, due to the form of the product. Not expected to be an aspiration hazard.			
Chronic effects	Prolonged or repeated exposure to low concentrations may cause drying and cracking of the skin respiratory effects, gum disorders and painless destruction of teeth Limited occupational studies with long-term exposure to low concentrations, have not shown significant respiratory effects. Long-term animal studies confirm that chlorine is a severe irritant to the upper and lower respiratory tract.			
12 Ecological information	n			

### 12. Ecological information

Ecotoxicity

Very toxic to aquatic life. See below for individual ingredient ecotoxicity data.

Product		Species	Test Results
Chlorine (CAS 7782-50-5)			
Aquatic			
Acute			
Crustacea	EC50	Water flea (Daphnia magna)	0.005 mg/l, 48 hours (mg Free Available Chlorine/L)
Fish	LC50	Rainbow trout,donaldson trout (Oncorhynchus mykiss)	0.014 mg/l, 96 hours
Persistence and degradability		is consumed upon contact with living tiss nd unnecessary.	sues making measurement of biodegradation
Bioaccumulative potential	Not expected	l to be bio accumulative.	
Mobility in soil	The product i	itself has not been tested.	
Other adverse effects		erse environmental effects (e.g. ozone de docrine disruption, global warming potenti	
13. Disposal consideration	ons		
Disposal instructions		eclaim or dispose in sealed containers at tainer in accordance with local/regional/na	
Local disposal regulations	Dispose in a	ccordance with all applicable regulations.	
Hazardous waste code	The waste co disposal com		ween the user, the producer and the waste

 Waste from residues / unused products
 Dispose of in accordance with local regulations. Empty containers or liners may retain some product residues. This material and its container must be disposed of in a safe manner (see: Disposal instructions).

 Contaminated packaging
 Empty containers should be taken to an approved waste handling site for recycling or disposal. Since emptied containers may retain product residue, follow label warnings even after container is

### 14. Transport information

emptied.

DOT	
UN number	UN1017
UN proper shipping name	Chlorine (CHLORINE)
Transport hazard class(es)	
Class	2.3
Subsidiary risk	5.1, 8
Label(s)	2.3, 5.1, 8
Packing group	Not applicable.
Environmental hazards	
Marine pollutant	Yes
Special precautions for user	Read safety instructions, SDS and emergency procedures before handling.
	US CERCLA Reportable Quantity (RQ): 10 lbs / 4.54 kg
Special provisions	2, B9, B14, N86, T50, TP19
Packaging exceptions	None
Packaging non bulk	304
Packaging bulk	314, 315
ΙΑΤΑ	
UN number	UN1017
UN proper shipping name	Chlorine
Transport hazard class(es)	
Class	2.3
Subsidiary risk	5.1, 8
Packing group	Not applicable.
Environmental hazards	Yes
ERG Code	2CP
Special precautions for user	Read safety instructions, SDS and emergency procedures before handling. Refer to Special Provision A2 for shipping information.
Other information	
Passenger and cargo aircraft	Forbidden



Not regulated.

CERCLA Hazardous Substance List (40 CFR 302.4)

Chlorine (CAS 7782-50-5)

Listed.

Chlorine (CAS 77			10 LBS		
OSHA Specifically Re	egulated Substance	es (29 CFR 1910	0.1001-1050)		
Not listed.					
uperfund Amendments	and Reauthorizatio	n Act of 1986 (	SARA)		
Hazard categories	Delayed Ha Fire Hazarc Pressure H				
SARA 302 Extremely					
Chemical name	CAS number	Reportable quantity	Threshold planning quantity	Threshold planning quantity, lower value	Threshold planning quantity, upper value
Chlorine	7782-50-5	10	100 lbs		
SARA 311/312 Hazaro chemical	<b>dous</b> Yes				
SARA 313 (TRI report	ting)				
Chemical name			CAS number	% by wt.	
Chlorine			7782-50-5	99.5	
ther federal regulations					
Clean Air Act (CAA) S Chlorine (CAS 77 Clean Air Act (CAA) S Chlorine (CAS 77	82-50-5) Section 112(r) Accio			8.130)	
Clean Water Act (CW Section 112(r) (40 CF 68.130)	-	substance			
Section 112(r) (40 CF	R	substance			
Section 112(r) (40 CF 68.130) Safe Drinking Water	R Act 4 mg/l	substance			
Section 112(r) (40 CF 68.130) Safe Drinking Water (SDWA) S state regulations	R Act 4 mg/l 4.0 mg/l		of Justice (California	Health and Safety Coc	de Section 11100)
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Country(s) or region	Inventory name	On inventory (yes/no)*
Philippines	Philippine Inventory of Chemicals and Chemical Substances (PICCS)	Yes

United States & Puerto Rico Toxic Substances Control Act (TSCA) Inventory

Yes

\*A "Yes" indicates that all components of this product comply with the inventory requirements administered by the governing country(s) A "No" indicates that one or more components of the product are not listed or exempt from listing on the inventory administered by the governing country(s).

### 16. Other information, including date of preparation or last revision

Issue date	01-07-2015
Version #	01
HMIS	H: 4 F: 0 R: 1
NFPA	H: 4 F: 0 R: 0 Other: OX
NSE	Maximum use level for Chlorine in potable water is 30 mg/L.
Certified to	
List of abbreviations	ACGIH: American Conference of Governmental Industrial Hygienists CAS: Chemical Abstract Services CERCLA: Comprehensive Environmental Response, Compensation and Liability Act of 1980 CFR: Code of Federal Regulations
	DOT: Department of Transportation EPA: Environmental Protection Agency EPCRA: Emergency Planning and Community Right-to-Know Act ERG: Emergency Response Guidebook HSDB® - Hazardous Substances Data Bank
	IARC: International Agency for Research on Cancer IATA: International Air Transport Association IBC: Intermediate Bulk Container IDLH: immediately dangerous to life or health
	IMDG: International Maritime Dangerous Goods LC: Lethal Concentration LD: Lethal Dose
	NIOSH: National Institute of Occupational Safety and Health NOEC: No observable effect concentration NTP: National Toxicology Program
	OECD: Organization for Economic Cooperation and Development OEL: National occupational exposure limits OSHA: Occupational Safety and Health Administration PEL: Permissible exposure limit
	RCRA: Resource Conservation and Recovery Act RQ: Reportable Quantity RTECS: Registry of Toxic Effects of Chemical Substances SAR: supplied-air respirator
	SCBA: self-contained breathing apparatus SDS: Safety Data Sheet STEL: Short Term Exposure Limit TWA: Time Weighted Average UN: United Nations
Disclaimer	Prepared by: ICC The Compliance Center Inc. 1-888-442-9628 http://www.thecompliancecenter.com
	Disclaimer This Safety Data Sheet was prepared by ICC The Compliance Center Inc. using information provided by / obtained from Allied Universal Corporation and CCOHS' Web Information Service. The information in the Safety Data Sheet is offered for your consideration and guidance when exposed to this product. ICC The Compliance Center Inc. and Allied Universal Corporation expressly disclaim all expressed or implied warranties and assume no responsibilities for the accuracy or completeness of the data contained herein. The data in this SDS does not apply to use with any other product or in any other process.
	This Safety Data Sheet may not be changed, or altered in any way without the expressed knowledge and permission of ICC The Compliance Center Inc. and Allied Universal Corporation

ACGIH Documentation of the Threshold Limit Values and Biological Exposure Indices (2014) Canadian Centre for Occupational Health and Safety, CCInfoWeb Databases, 2014 (Chempendium, RTECs, HSDB, INCHEM) International Agency for Research on Cancer Monographs (2014) Material Safety Data Sheet from manufacturer. OECD - The Global Portal to Information on Chemical Substances - eChemPortal, 2014.

BID NO. 04-13-22-11

### NON-COLLUSIVE AFFIDAVIT

- (1) He/she is the <u>Maric Santana President Owner</u> (Owner, Partner, Officer, Representative or Agent) of <u>Santana Pressure Cleaning Santas</u> the Contractor that has submitted the attached bid;
- (2) He/she is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such bid;
- (3) Such bid is genuine and is not a collusive or sham bid;
- (4) Neither the said Contractor nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Contractor, firm, or person to submit a collusive or sham bid in connection with the work for which the attached bid has been submitted; or to refrain from bidding in connection with such work; or have in any manner, directly or indirectly, sought by agreement or collusion, or communication, or conference with and Contractor, firm or person to fix the price or prices in the attached bid or of any other Contractor, or to fix an overhead, profit, or cost elements of the bid price or the bid price of any other Contractor, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed work;
- (5) The price or prices quoted in the attached bid are fair and proper and are not tainted by any collusion, conspiracy, connivance, or unlawful agreement on the part of the Contractor or any other of its agents, representatives, owners, employees or parties in interest, including this affiant.

Name)

PSI
#### REFERENCES

The following is a list of at least four (4) references that Bidder has provided similar service in the past three (3) years. Government agency references are preferred. <u>Bidder is responsible for verifying correct phone numbers, email address and current contract information</u>. Failure to provide accurate data may result in the reference not being considered.

	ReferenceSheets
Contact:	
	Fax:
Email Address:	
Scope of Work:	
Name of Firm, City, County or Age	ency:
City/State/Zip:	
Contact:	Title:
	Fax:
Email Address: Scope of Work: Name of Firm, City, County or Age	ency:
Email Address: Scope of Work: Name of Firm, City, County or Age Address: City/State/Zip: Contact:	ency:
Email Address: Scope of Work: Name of Firm, City, County or Age Address: City/State/Zip: Contact: Telephone:	ency: Title: Fax:
Email Address: Scope of Work: Name of Firm, City, County or Age Address: City/State/Zip: Contact: Telephone: Email Address:	ency:
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NOTE: Additional references may be attached and provided.



COMMERCIAL • RESIDENTIAL licenced / insured office: 813.932.2054 fax: 813.932.2053 Mario@NeedPressureClean.com www.NeedPressureClean.com

## REFERENCES

City of Parkland Attn: Anthony F. Scerbo 6500 Parkside Dr. Parkland, Fl 33067 <u>ascerbo@cityofparkland.org</u> Bid # 2020 - 01 Citywide Pressure Cleaning Services June 28, 2020 - Ongoing

City of Hollywood - CRA - Pressure Cleaning Services Contract # F-4527-16- RL Attn: Tony Tiru 2600 Hollywood Blvd. Hollywood, FL 33022 <u>ttiru@hollywoodfl.org</u> 954-815-5941 Jan. 01, 2017 - Dec. 31, 2022

Hillsborough County Public Schools Maintenance East - Attn: Michael Tucker 3102 Airport Rd., Plant City, FL 33567 813-757-9399 Michael.Tucker@sdhc.k12.fl.us ITB# 18168 - MST - CK Pressure Washing and Cleaning Services Feb. 6, 2019 - Ongoing

Hillsborough County Board of County Commissioners Real Estate & Facilities Services Attn: Doug Taylor 601 E Kennedy Blvd. 23<sup>rd</sup> Floor P.O. Box 1110 Tampa, FL 33601 813-276-2533 taylorde@hillsboroughcounty.org

ITB-17563,1, Window Washing and Pressure Cleaning Services April 26, 2019 - Ongoing

#### SANTANA PRESSURE CLEANING SERVICES, INC.

### REFERENCES

City of Naples Attn: Travis Delashmet Facilities Maintenance Superintendent Community Services Department 280 Riverside Circle Naples, FL 34102 239-213-7114 <u>tdelashmet@naplesgov.com</u>

FWQ, # 19 - 012 Pressure Washing Various Locations July 24, 2019 - Ongoing

The School District of Lee County Attn: Demetrek Herring 3308 Canal Street Fort Myers, FL 33916 Demetrekjh@leeschools.net 239-479-4200 Ext. 4208 ITN. # N187342DG Pressure Washing District Wide Nov. 7, 2018 - Ongoing

> ST. Lucie County Public Schools Attn.: Ricky Isenhour 327 NW Commerce Park Drive Port St. Lucie, FL 34986 772-201-3709 <u>Ricky.isenhour@stlucieschools.org</u>

City of Tampa -Howard F. Curren AWTP Attn: Dan Arents 2700 Maritime Blvd. Tampa, FL 33605 813-267-9479 <u>Dan.Arents@tampagov.net</u>

BID NO. 04-13-22-11

## SCRUTINIZED COMPANIES CERTIFICATION PURSUANT TO FLORIDA STATUTE § 215.4725

	Santana Pressure	
	ario Santana, on behalf of Cleaning Services, Inc.,	
Prir	nt Name Company Name	
certifies that <u>Santana Pressure Cleaning Services, The</u> does not: Company Name		
1.	Participate in a boycott of Israel; and	
2.	Is not on the Scrutinized Companies that Boycott Israel list; and	
3.	Is not on the Scrutinized Companies with Activities in Sudan List; and	
4.	Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and	
5.	Has not engaged in business operations in Cuba or Syria.	
Signature Stand		
Title	esident	
	-932-2054 4-12-22	
Phone	Date Date	



Department of State / Division of Corporations / Search Records / Search by Entity Name /

#### Florida Profit Corporation SANTANA PRESSURE CLEANING SERVICES, INC. Filing Information P13000065442 Document Number FEI/EIN Number 46-3376737 08/06/2013 Date Filed State FL Status ACTIVE Principal Address 8506 N. DEXTER AVE TAMPA, FLORIDA, FL 33604

**Detail by Entity Name** 

Changed: 04/21/2014

#### <u>Mailing Address</u> 8506 N. DEXTER AVE

TAMPA, FL 33604 <u>Registered Agent Name & Address</u> SANTANA, MARIO 8506 N. DEXTER AVE TAMPA, FL 33604

Officer/Director Detail

Name & Address

Title President

SANTANA, MARIO 8506 N. DEXTER AVE TAMPA, FL 33604

Title Secretary

French, Kelly 8506 N. DEXTER AVE TAMPA, FLORIDA, FL 33604

#### Annual Reports

Report Year	Filed Date
2019	04/06/2019
2020	01/17/2020
2021	03/20/2021

#### Document Images

03/20/2021 ANNUAL REPORT	View image in PDF format
01/17/2020 ANNUAL REPORT	View image in PDF format
04/06/2019 ANNUAL REPORT	View image in PDF format
03/02/2018 ANNUAL REPORT	View image in PDF format
04/06/2017 ANNUAL REPORT	View image in PDF format
03/28/2016 ANNUAL REPORT	View image in PDF format
04/23/2015 ANNUAL REPORT	View image in PDF format
04/21/2014 ANNUAL REPORT	View image in PDF format
08/06/2013 Domestic Profit	View image in PDF format

Florida Department of State, Division of Corporations

## **SAFETY DATA SHEET**

<b>1. Identification</b> Product Identifier Product Code	SUPER DEGREASER SUPER DEGREASER	Revision Date	04/20 <sup>-</sup>
Recommended use	Cleaner		
Restrictions	None known		
Manufacturer	NEWAGAIN INC		
Company name Address	4613 N. Thatcher Ave		
Address	Tampa, FL 33614		
	United States		
Telephone	813-247-4969		
Emergency phone	800-255-3924		
2. Hazard identification			
Appearance	Blue clear liquid		
Physical hazards	Eye and skin irritant, may cause burning and redness.		
Label elements			
HMIS	Health Hazard 1 Flammability 0 Reactivity 0		
Signal word	Cautioin		
Hazard statement	Eye irritant, may cause burning and redness. May cause skin irri	tation.	
Precautionary statement			
Prevention	Wash thoroughly after handling. Wear protective gloves/clothing	/eye/face protect	tion
Response	If swallowed, rinse mouth. Do not induce vomiting. Drink plenty of		
	If on skin rinse with soap and water. If inhaled, remove to fresh a	air.	
	If in eyes, rinse cautiously with water for several minutes.		
Storage	In case of fire: Use appropriate media to extinguish. Store ia a well-ventillated place. Keep cool.		
Disposal	Dispose of contents/container in accordance with local		
	regional, national, and international regulations.		

## 3. Composition/information on ingredients

Chemical name	CAS number
Sodium Silicate	1344-09-8
Glycol Ether DPM	34590-94-8
Versene 100	64-02-8
Surfactants	Trade secrets
4. First Aid	
Inhalation	Move to fresh air.
Skin contact	If on skin rinse with soap and water. Get medical attention if irritation develops or persist.
Eye contact	If in eyes, rinse cautiously with water for several minutes. Consult physician.
Ingestion	If swallowed, rinse mouth. <b>Do not</b> induce vomiting. Drink plenty of water.
5. Fire Fighting	
Extinguishing media	Use extinguishing measures that are appropriate to local circumstances and environment.
Flash point	Not flammable
Hazardous combustion	Carbon oxides
Explosion data	Not sensitive
Protective Equipment	As in any fire, wear sellf-contained breathing apparatus pressure-demand, and full
	protective gear.
<u>NFPA</u>	Health Hazard 1 Flammability 0 Stability 0
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# SAFETY DATA SHEET **SUPER DEGREASER**

#### 6. Accidental Release Measures

Personal precautions	Wear protective gloves/clothing and eye/face protection.
Methods for containment	Prevent further leakage or spillage if safe to do so.
Methods for clean up	Wear protective equipment when handling material to prevent contact. Avoid dust formation. Clean up promptly. Pick up and transfer to properly labeled containers.

**7. Handling and Storage** Avoid contact with skin and eyes. Handle in accordance with good industrial hygiene and safety.

#### 8. Exposure controls / personal protection

Exposure guidelines	This product does not contain any hazardous material with occupational exposure limits
	established by the region specific regu; atory bodies.
Engineering measures	Showers, eyewash stations, and ventilation systems.

#### 9. Physical and chemical properties

2	
Appearance	Blue clear liquid
Physical state	Liquid
Odor	chemical
рН	11 (1% in water)
Flash point	Not Flammable
Explosion limits	Not applicable
Specific gravity	1.03 20'C
Solubility	Soluble in water
VOC	Not applicable

#### 10. Stability and reactivity

Stability	Stable under normal conditions
Incompatible products	Acid substances.
Conditions to avoid	High temperatures (130'F, 55'C). High humidity levels. Contaminates.
Hazardous Decomposition	None
Hazardous Polymerzation	Will not occur.

## 11. Toxicological Information

Acute I oxicity	
Product Information	Product is safe for its intended use based on the formulation, testing results, and long
	history of safe consumer use.
Irritation	Irritating to eyes and skin.
Chronic Toxicity	None known
Target organ effects	None known

#### 12. Ecological Information

Ecotoxicity	The environmental impact of this product has not been fully investigated.
Persistence& degradability	Product is biodegradable
Bioaccumulation	Not likely to bioaccumulate

#### 13. Disposal considerations

Waste disposal methods	This material supplied is not hazardous according to Federal regulations (40 CFR261)
	Consult the appropriate state, regional, local regulations for additional requirements.

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## SAFETY DATA SHEET

## SUPER DEGREASER

#### 14. Transport Information

DOT classification	Not regulated
TDG	Not regulated
ICAO	Not regulated
ΙΑΤΑ	Not regulated
IMDG/IMO	Not regulated

15. Regulatory Information	n	Informatio	v	Regulator	15.
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U.S. Regulations SARA 313

This product does not contain any chemicals which are subject to the reporting requirements.

	reporting requirements.
SARA 311/312	
Acute Health Hazard	No
Chronic Health Hazard	No
Fire Hazard	No
PressureRealease	No
Reactive Hazard	No
Clean Water Act	This product does not contain any chemicals regulated as pollutants pursuant to the Clean Water Act (40 CFR 122.21 and 40CFR 122.42)
Clean Air Act	This product does not contain any chemicals regulated as hazardous air pollutants (HAPS) under section 112 of the Clean Air Act Amendments of 1990
California	This product does not contain any Prop 65 chemicals
16. Other Information	
	To best of our knowledge, the information contained herein is accurate. However, neither the above named supplier nor any of its subsidiaries assume any liability whatsoever for the accuracy or completeness of the information contained herein. Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although

hazards that exist.

certain hazards are described herein, we cannot guarantee that these are the only

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## PROCUREMENT

## IFB No. 04-13-22-11 Addendum 1 SANTANA PRESSURE CLEANING SERVICES, INC.

## **Supplier Response**

## **Event Information**

Number:	IFB No.	04-13-22-11	Addendum 1
	-		

Title: Pressure Cleaning Services

Type: Invitation for Bids

Issue Date: 3/27/2022

Deadline: 4/20/2022 11:00 AM (ET)

Notes: The City of Coconut Creek is seeking Bids from experienced and qualified Contractors to provide pressure cleaning services to include, but not be limited to, curbs and gutters, medians and associated pavers, sidewalks, and barrel roof tiles for the specified facilities located in Coconut Creek along Coconut Cree, Broward County, and State of Florida right-of-ways. Services shall comply with the listed scope of work. The Successful Contractor and City will agree upon a reasonable schedule to perform the work, taking into consideration activities in the community including road work, special events, and other issues that may arise.

## NOTES:

1. Upload completed solicitation package to "Response Attachments" tab.

2. Enter Proposed Pricing into the "Line Items" tab.

3. All inquiries concerning clarification of this bid or for additional information shall be submitted through the "Questions" tab.

## **Contact Information**

	Asha Benjamin, Procurement Analyst
Address:	Government Center
	4800 West Copans Road
	Coconut Creek, FL 33063
Phone:	1 (954) 956-1499
Fax:	1 (954) 973-6754
Email:	abenjamin@coconutcreek.net

## SANTANA PRESSURE CLEANING SERVICES, INC. Information

8506 N. Dexter Ave
Tampa, FL 33604
(813) 932-2054
(813) 932-2053
mario@needpressureclean.com
WWW.NEEDPRESSURECLEAN.COM

By submitting your response, you certify that you are authorized to represent and bind your company.

## Mario Santana Signature Submitted at 4/20/2022 8:59:04 AM

mario@needpressureclean.com

Email

## **Response Attachments**

Bid Confirmation.pdf	
Bid Confirmation	
Bid Schedule.pdf	
Bid Schedule	
References.pdf	
Reference Sheets	
Indemnification Clause.pdf	
Indemnification Clause	
Sworn Statement on Public Entity C	rimes.pdf
Sworn Statement on Public Entity Crimes	5
Non-Collusive Affidavit.pdf	
Non-Collusive Affidavit	
Bidder Qualifications.pdf	
Bidder Qualifications	
Drug Free Workplace.pdf	
Drug Free Workplace	
Exception.pdf	
Exception to the Invitation for Bids	
Certificate of Insurance.pdf	
Certificates of Insurance	
Scrutinized Companies Certification	.pdf
Scrutinized Companies Certification	
E-Verify Form.pdf	
E-Verify Form	
BROWARD CO. BUS LIC 21 - 22.pdf	
Broward County Tax Receipt	
HC & COT 21 - 22.pdf	
Hillsborough County and City of Tampa I	Business Licenses
Page 3 of 5 pages	Vendor: SANTANA PRESSURE CLEANING SERVICES, INC.

## Sunbiz - Santana Pressure Cleaning Services, Inc.pdf

Sunbiz - Santana Pressure Cleaning Services, Inc.

## ADDENDUM 1.pdf

Addendum #1

## **BIDDER INFORMATION.pdf**

Bidder Information

## MSDS CHLORINE.pdf

Chlorine MSDS

## Degreaser 212 180420.xls.pdf

Eco Friendly Degreaser

## Super Degreaser 150420.xls.pdf

Eco Friendly Super Degreaser

## **Bid Attributes**

### **1** Solicitation Acknowledgement Vendor has examined the solicitation in its entirety, including any addenda and understands in order to receive consideration, vendor shall adhere to the instructions outlined in the solicitation for submitting a response.

✓ Yes (Yes)

## 2 Section I - General Terms and Conditions

I acknowledge reading and understanding the General Terms and Conditions. Ves (Yes)

### 3 Section II - Special Conditions

I acknowledge reading and understanding the Special Conditions. ✓ Yes (Yes)

### 4 Section III - Detailed Specifications

I acknowledge reading and understanding the Detailed Specifications. ☑ Yes (Yes)

## 5 Required Forms

I acknowledge and understand that the Required Forms outlined in the Bid Requirements Checklist must be completed and notarized, if applicable and uploaded as a requirement of this bid. ✓ Yes (Yes)

### 6 Certificate of Insurance

I acknowledge and understand that a copy of any certificate of insurance shall be uploaded as evidence of having current/valid insurance, which is a requirement of this bid.

🗹 Yes (Yes)

## Visa Credit Card - Preferred Method of Payment

The City of Coconut Creek has implemented a Visa Procurement Card (P-Card) Program through SunTrust Bank. The City's preference is to pay for goods/services with the P-Card. This program allows the City to expedite payment to our vendors. Some of the benefits of the P-Card Program to the vendor are: payment received within 72 hours of receipt and acceptance of goods, reduced paperwork, issue receipts instead of generating invoices, resulting in fewer invoice problems, deal directly with the cardholder (in most cases). Vendors accepting payment by the P-Card may not require the City (Cardholder) to pay a separate or additional convenience fee, surcharge or any part of any contemporaneous finance charge in connection with a transaction. Such charges are allowable, however must be included in the total cost of their response. Vendors are not to add notations such as "+3% service fee" in their response. All responses shall be inclusive of any and all fees associated with the acceptance of the P-Card must presently have the capability to accept Visa or take whatever steps necessary to implement the ability before the start of the agreement term.

## 8 Purchase by other Governmental Agencies

Please indicate if you will permit other governmental entities to purchase from your agreement with the City of Coconut Creek.

Yes

## **Bid Lines**

1	Curbs				
	Quantity: 400000 UOM: LF	Unit Price:	\$0.06	Total:	\$24,000.00
2	Medians (Includes concrete/paver surfaces)				
	Quantity: 170000 UOM: SF	Unit Price:	\$0.05	Total:	\$8,500.00
3	Sidewalks / Concrete Walkways				
	Quantity: 300000 UOM: SF	Unit Price:	\$0.04	Total:	\$12,000.00
4	Pavers				
	Quantity: 100000 UOM: SF	Unit Price:	\$0.04	Total:	\$4,000.00
5	Wheel Stops				
	Quantity: 1000 UOM: EA	Unit Price:	\$1.00	Total:	\$1,000.00
6	Paver Sealing				
	Quantity: 400000 UOM: SF	Unit Price:	\$0.28	Total:	\$112,000.00
7	Ceramic / Concrete Roof Tile				
	Quantity: 25000 UOM: SF	Unit Price:	\$0.08	Total:	\$2,000.00
8	Boardwalks				
	Quantity: 10800 UOM: SF	Unit Price:	\$0.08	Total:	\$864.00
9	Building Walls				
	Quantity: <u>335000</u> UOM: <u>SF</u>	Unit Price:	\$0.05	Total:	\$16,750.00

## Response Total: \$181,114.00

#### SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a).

#### THIS FORM MUST BE SIGNED.

- 1. This sworn statement is submitted with Bid No. 04-13-22-11 for Pressure Cleaning Services.
- 2. This sworn statement is submitted by <u>CleaningServices, Irc</u> (name of entity submitting sworn statement) whose business address is <u>Stock D. Dexter Ave</u> <u>Tampe</u> <u>FL33(204)</u> and (if applicable) its Federal Employer Identification Number (FEIN) is <u>46-3516737</u>. (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: \_\_\_\_\_\_.)

3.	My name is	Mario Sontana	and my
		(Please print name of individual signing)	

relationship to the entity named above is <u>President</u>

- 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, or material misrepresentation.
- 5. I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
- 6. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, includes but is not limited to:
  - 1. A predecessor or successor of a person convicted of a public entity crime: or
  - 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Ownership by one person of shares constituting a 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 thirty-six (36) months shall be considered an affiliate.
- 7. I understand that a "person" as defined in Section 287.133(1)(e), Florida Statutes as amended from time to time, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts

or applies to transact business with a public entity. The term "person" includes those officers, who are active, or who have been active, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity within the last five (5) years of this sworn statement.

- 8. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **Please check all statements that are applicable.** 
  - ☑ Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
  - □ The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, <u>AND</u> (Please indicate which additional statement applies.)
  - □ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
  - □ The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)
- 9. Based on information and belief, the statement that I have marked below is true in relation to the entity submitting this sworn statement. **Please check if statement is applicable.**

The person or affiliate has not been placed on the convicted vendor list.

(If the box is not checked, please describe any action taken by or pending with the Department of General Services.)

- 10. The herein statement shall be subject to and incorporate all the terms and conditions contained in Section 287.133, Florida Statutes as amended from time to time.
- 11. Conviction of a public entity crime shall be cause for disqualification.

nrio Santano

Bidder's Name

4.12-22 Date: