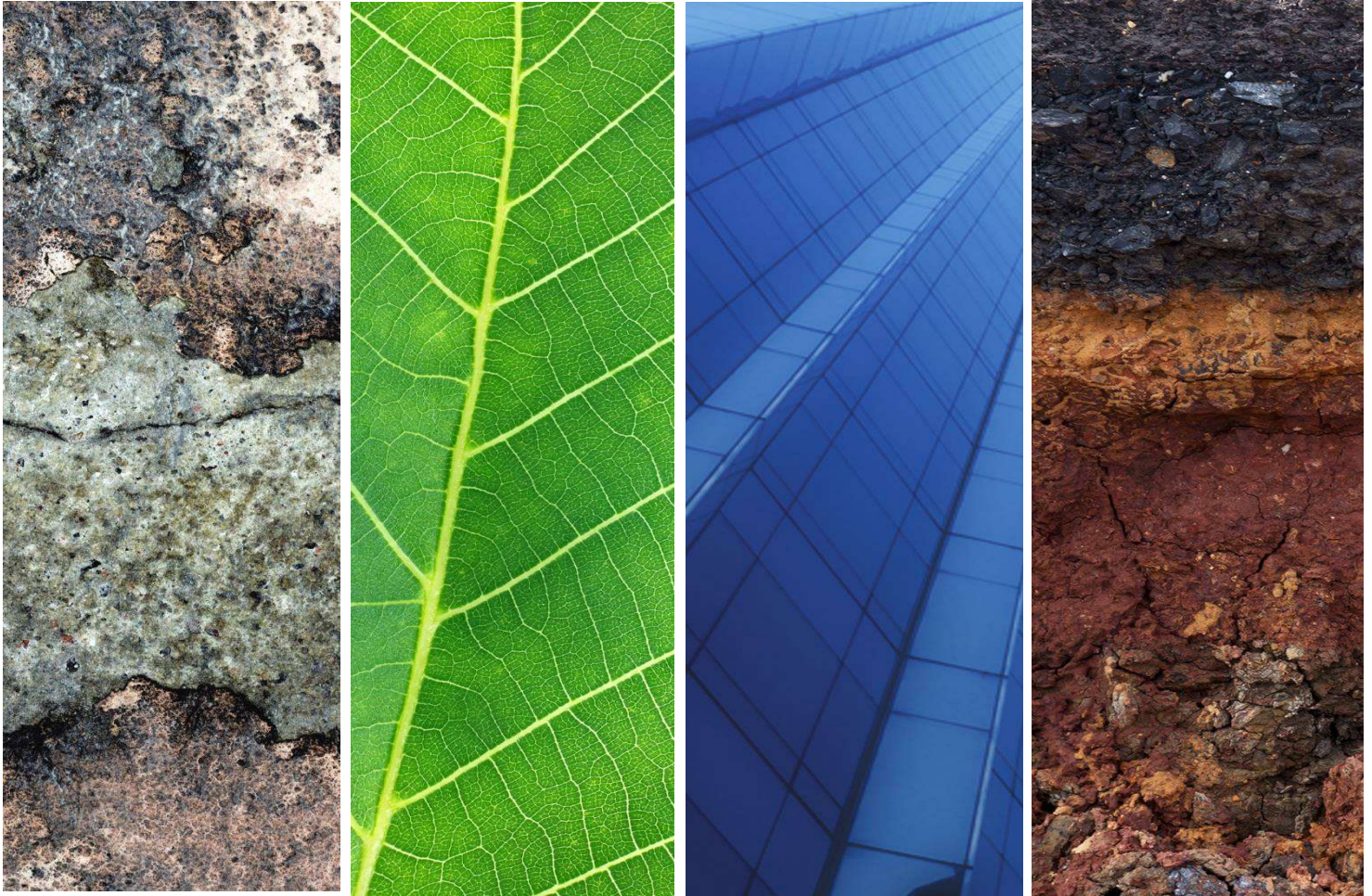


Asbestos & Air Quality Testing Services



Lake County

Asbestos & Air Quality Testing Services
Solicitation Number 21-0922

May 27, 2021

~ORIGINAL~

1675 Lee Road
Winter Park, Florida 32789
(407) 740 6110
terracon.com

Terracon

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Memorandum of Authority to Sign

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W-9 Form

Completed Addenda No. 1

Completed Attachment 2 – Pricing Sheet

Completed Attachment 3 – Reference Form

Proof of Insurance

Contractor Required Licenses

May 27, 2021

Lake County
315 West Main Street, Suite 441
Post Office Box 7800
Tavares, Florida 32778

RE: 21-0922; Asbestos & Air Quality Testing Services

Dear Mr. Tipton and Selection Committee Members:

Terracon Consultants, Inc. ("Terracon") is pleased to present our qualifications to Lake County for the **Asbestos & Air Quality Testing Services** solicitation. Terracon is an employee owned engineering firm (ENR Rank #1 Asbestos and Lead Abatement) in the U.S. that has been providing quality services to clients since 1965. Nationally, we have more than 150 offices and more than 5,000 employees that serve federal, state and municipal clients as well as private entities.

Our Florida operation includes 11 offices, including our Winter Park office located at 1675 Lee Road, Winter Park, FL 32789. Our local Central Florida staff includes 100+ employees (including 20 registered professional engineers, 3 registered professional geologists, 2 registered architects, 2 structural engineers, 15 project managers, 20 drillers, and 40 qualified technicians). In addition, we have 16 environmental professionals comprised of engineers, geologists, technicians and scientists in our Winter Park office with extensive experience conducting the services requested under this contract locally and state-wide. Our professional and technical staff also has significant experience with the geology and hydrogeology of Lake County and all of Florida. We are familiar with the typical projects and services listed in the scope of work and we are committed to performing the work assigned under this contract in a professional and timely manner. **We are confident in our ability to exceed your expectations with our project delivery.**

Terracon has provided a full range of Asbestos and Air Quality Testing services to our clients throughout the local area and across the State of Florida. Our Clients include cities, counties, school boards, banks, major land developers, and state agencies including our current continuing environmental consulting contracts with Lake County School Board as well as Orange/Seminole/Volusia/Brevard County Public Schools, Volusia County, City of Cocoa, City of Palm Bay, Canaveral Port Authority, City of Apopka, Brevard County, just to name a few. Our local Program Manager, Mark Mulligan, P.G. has performed services for Lake County throughout his 27-year career. He is thoroughly familiar with the County's improvement plans and is dedicated to serve you on all your project needs. Because of our extensive experience delivering projects to large clients like Lake County, Terracon is:

- **Responsive:** Acting quickly to meet your deadlines. Our employee owners are available to you 24/7 and can quickly mobilize to respond to your needs. We stand ready and commit to accommodate you for routine and emergency requests, should they arise.
- **Reliable:** With vast experience working locally throughout the County, providing services for the various Cities, Counties and many high-profile projects, Terracon is a dependable partner to Lake County.
- **Resourceful:** Applying new processes and state of the art techniques allows Terracon to proactively solve project challenges. We continue to expand our capabilities to ensure you receive the highest quality professional service available. Currently we have 11 offices and over 330 professionals available to meet your needs. We bring institutional knowledge that equals time savings and value to the citizens of Lake County.



Additionally, as a Florida-licensed professional engineering, geological, asbestos, mold assessor business organization, Florida Department of Health certified radon measurement business, AIHA-Certified Industrial Hygienist and Florida Department of Environmental Protection qualified petroleum cleanup contractor, Terracon can expeditiously and professionally respond to all the County's environmental needs.

Terracon's **Environmental Consulting Group** is supported with a team of highly experienced, long-time professional environmental scientists and engineers which includes seven Florida-licensed Professional Geologists, five Florida-licensed Professional Engineers, Certified Wetland Delineators, Professional Wetland Scientists (PWS), Ecologists, Authorized Gopher Tortoise Agents, Certified Florida Master Naturalists, Florida Licensed Asbestos Consultants; USEPA Certified Lead Inspectors, Risk Assessors and Project Designers; Florida-licensed Mold Assessors; Florida Department of Health-Certified Radon Measurement Specialist; several AHERA asbestos inspectors, management planners, project designers and contractor supervisors; CHMM-Certified Hazardous Materials Managers; Florida-Certified Indoor Environmental Consultant, AEE-Certified Indoor Air Quality Professionals.

Terracon understands and brings proven experience in providing the professional consulting services listed in the Scope of Work. These services may include, but are not limited to:

- Industrial hygiene/health and safety
- Asbestos/lead/mold/indoor air quality

We understand that selected firms will be responsible for providing testing, risk assessments, hazard screening, clearance activities, and consultation for lead-based paint, mold, and asbestos for the County.

We appreciate the opportunity to submit our proposal in accordance with the requirements of Lake County Solicitation Number 21-0922 for Asbestos & Air Quality Testing Services. Terracon looks forward to the opportunity to further present our qualifications to you. If you have any questions or comments regarding the information presented herein, please feel free to contact us.

Sincerely,

TERRACON CONSULTANTS, INC.



Mark Mulligan, P.G.
Program Manager



The undersigned hereby declares that: Terracon Consultants, Inc. has examined and accepts the specifications, terms, and conditions presented in this Solicitation, satisfies all legal requirements to do business with the County, and to furnish **ASBESTOS AND AIR QUALITY TESTING SERVICES** for which Submittals were advertised to be received no later than 3:00 P.M. Eastern time on the date stated in the solicitation or as noted in an addenda. Furthermore, the undersigned is duly authorized to execute this document and any contracts or other transactions required by award of this Solicitation.

All pricing will be FOB Destination unless otherwise specified in this solicitation document. Pricing submitted will remain valid for a ninety (90) day period.

Vendor will accept payment through the County VISA-based payment system: YES

1.0 TERM OF CONTRACT

The Contract will be awarded for an initial one (1) year term with the option for four (4) subsequent one (1) year renewals. Renewals are contingent upon mutual written agreement.

The Contract will commence upon the date of execution. The Contract remains in effect until completion of the expressed and implied warranty periods. The County reserves the right to negotiate for additional services/items similar in nature not known at time of solicitation.

Contract prices resultant from this solicitation will prevail for the full duration of the Contract unless otherwise indicated elsewhere. Prior to completion of each exercised term, the County may consider an adjustment to price based on changes as published by the U.S. Department of Labor, Bureau of Labor Statistics. Refer to Exhibit A – Scope of Services. It is the Contractor's responsibility to request in writing any pricing adjustment under this provision.

2.0 METHOD OF PAYMENT

The Contractor must submit an accurate invoice to the County's using department. The date of the invoice must be after delivery but no more than 30 calendar days after delivery. Invoices must reference the: purchase or task order; delivery date, delivery location, and corresponding packing slip or delivery ticket signed by a County representative at the time of acceptance. Failure to submit invoices in the prescribed manner will delay payment.

Payments will be tendered in accordance with the Florida Prompt Payment Act, Part VII, Chapter 218, Florida Statutes. The County will remit full payment on all undisputed invoices within 45 days from receipt by the appropriate County using department. The County will pay interest not to exceed 1% per month on all undisputed invoices not paid within 30 days after the due date.

3.0 CERTIFICATION REGARDING LAKE COUNTY TERMS AND CONDITIONS:

I certify that I have reviewed the [Lake County General Terms and Conditions page](#) and accept the Lake County General Terms and Conditions dated 10/10/2019 as written including the Proprietary/Confidential Information section. YES Failure to acknowledge may result in Submittal being deemed non-responsive.

4.0 CERTIFICATION REGARDING FELONY CONVICTION:

Has any officer, director, or an executive performing equivalent duties, of the bidding entity been convicted of a felony during the past ten (10) years? NO

5.0 CONFLICT OF INTEREST DISCLOSURE CERTIFICATION:

Except as listed below, no employee, officer, or agent of the firm has any conflicts of interest, real or apparent, due to ownership, other clients, contracts, or interests associated with this project; and, this Submittal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a proposal for the same services, and is in all respects fair and without collusion or fraud. None.

6.0 CERTIFICATION REGARDING BACKGROUND CHECKS:

Under any County Contract that involves Contractor or subcontractor personnel working in proximity to minors, the Vendor hereby confirms that any personnel so employed will have successfully completed an initial, and subsequent annual, Certified Background Check, completed by the Contractor at no additional cost to the County. The County retains the right to request and review any associated records with or without cause, and to require replacement of any Contractor employee found in violation of this requirement. Contractor shall indemnify the County in full for any adverse act of any such personnel in this regard. Additional requirements may apply in this regard as included within any specific contract award. YES

7.0 DISADVANTAGED BUSINESS ENTERPRISE PROGRAM

The County does not establish specific goals for minority set-asides however, participation by minority and non-minority qualified firms is strongly encouraged. If the firm is a minority firm or has obtained certification by the State of Florida, Office of Supplier Diversity, (OSD) (CMBE), please indicate the appropriate classification(s) not applicable not applicable and enter OSD Certification Number [Click or tap here to enter text.](#) and enter effective date [Click or tap to enter a date.](#) to date [Click or tap to enter a date.](#)

8.0 RECIPROCAL VENDOR PREFERENCE:

Vendors are advised the County has established, under Lake County Code, Chapter 2, Article VII, Sections 2-221 and 2-222; a process under which a local vendor preference program applied by another county may be applied in a reciprocal manner within Lake County. The following information is needed to support application of the Code:

- A. Primary business location of the responding Vendor: Winter Park, Florida
- B. Does the responding vendor maintain a significant physical location in Lake County at which employees are located and business is regularly transacted: NO If “yes” is checked, provide supporting detail: [Click or tap here to enter text.](#)

9.0 GENERAL VENDOR INFORMATION:

Firm Name: Terracon Consultants, Inc.

Street Address: 1675 Lee Road

City: Winter Park State and ZIP Code: Florida 32789

Mailing Address (if different): [Click or tap here to enter text.](#)

Telephone: 407-740-6110 Fax: 407-740-6112

Federal Identification Number / TIN: 42-1249917

DUNS Number: 078462524

10.0 SUBMITTAL SIGNATURE:

I hereby certify the information indicated for this Submittal is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an authorized representative of this Vendor and/or empowered to execute this Submittal on behalf of the Vendor. I, individually and on behalf of the Vendor, acknowledge and agree to abide by all terms and conditions contained in this solicitation as well as any attachments, exhibits, or addenda.

Name of Legal Representative Submitting this Proposal: [Click or tap here to enter text.](#)

Date: 5/21/2021

Print Name: Mark Mulligan, P.G.



Title: Principal

Primary E-mail Address: Mark.Mulligan@terracon.com

Secondary E-mail Address: John.O'Reilly@terracon.com

The individual signing this Submittal affirms that the facts stated herein are true and that the response to this Solicitation has been submitted on behalf of the aforementioned Vendor.

[The remainder of this page is intentionally blank]

CORPORATE RESOLUTION OF AUTHORITY

Please be advised that Mark W. Mulligan, P.G. is the for Environmental Dept. Manager for the Winter Park, FL office of Terracon Consultants, Inc. Mr. Mulligan is authorized to execute contracts and proposals on behalf of Terracon Consultants, Inc. for services to be provided by Terracon Consultants, Inc.



Michael J. Yost, Corporate Secretary

11-1-18

Date



2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400000114

Entity Name: TERRACON CONSULTANTS, INC.

Current Principal Place of Business:

10841 S RIDGEVIEW ROAD
OLATHE, KS 66061

FILED
Jan 09, 2020
Secretary of State
8115446990CC

Current Mailing Address:

10841 S RIDGEVIEW ROAD
OLATHE, KS 66061 US

FEI Number: 42-1249917

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title TREASURER, VP
Name VRANA, DONALD J
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Title DIR
Name COVERT, MICHAEL E
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Title DIR
Name COBB, C. HAROLD
Address 11555 CLAY ROAD, SUITE 100
City-State-Zip: HOUSTON TX 77043

Title DIRECTOR
Name PAVLICEK, ROBERT W.
Address 2401 BRENTWOOD ROAD, STE 107
City-State-Zip: RALEIGH NC 27604

Title SECRETARY
Name YOST, MICHAEL J
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Title DIRECTOR
Name ANDERSON, TIMOTHY W
Address 4685 S. ASH AVE
 #H4
City-State-Zip: TEMPE AZ 85282

Title ASST. SECRETARY
Name COURTNEY, PATRICK L
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS

Title ASST. TREASURER
Name PARIS, BRYAN M
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL J. YOST

SECRETARY

01/09/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT/CEO
Name PACKER, M. GAYLE
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Title VP
Name MINICHIELLO, RICHARD A
Address 5371 NW 33RD AVE
 STE 201
City-State-Zip: FORT LAUDERDALE FL 33309

Title VP
Name ANSTETT, CRAIG M.
Address 5463 W WATERS AVE.
 STE 830
City-State-Zip: TAMPA FL 33634

Title VP
Name KIMBERLY , JOHN B IV
Address 2930 WELLINGTON CIR
 STE 201
City-State-Zip: TALLAHASSEE FL 32309

Title CHAIRMAN
Name PACKER, M. GAYLE
Address 10841 S RIDGEVIEW ROAD
City-State-Zip: OLATHE KS 66061

Title VP
Name ACREE, RICHARD G
Address 1675 LEE ROAD
City-State-Zip: WINTER PARK FL 32789

Title VP
Name CORDS, ROBERT M
Address 9655 FLORIDA MINING BLVD, W
 STE 509
City-State-Zip: JACKSONVILLE FL 32256

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
 See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Terracon Consultants, Inc.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <u> 5 </u> Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 10841 S Ridgeview Road	Requester's name and address (optional)
6 City, state, and ZIP code Olathe, Kansas 66061	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

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

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

Social security number	
or	
Employer identification number	
4	2
-	1
2	4
9	9
1	7

Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign Here	Signature of U.S. person ▶	Date ▶ 05/04/2021
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General Instructions

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

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

Purpose of Form

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

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



REAL FLORIDA • REAL CLOSE
Office of Procurement Services

P.O. Box 7800 • 315 W. Main St., Suite 441 • Tavares, FL 32778

SOLICITATION: Asbestos and Air Quality Testing

05/18/2021

Vendors are responsible for the receipt and acknowledgement of all addenda to a solicitation. Confirm acknowledgement by including an electronically completed copy of this addendum with submittal. Failure to acknowledge each addendum may prevent the submittal from being considered for award.

THIS ADDENDUM DOES NOT CHANGE THE DATE FOR RECEIPT OF PROPOSALS.

QUESTIONS/RESPONSES

Q1. Who is the current the incumbent(s) on this contract?

R1. The current incumbent is Wood Environment & Infrastructure Solutions, Inc. under Contract 16- 0212

Q2. How much has Lake County spent annually on this contract over the past contract period?

R2. The Purchase Orders for 2017 total \$12,500, 2018 (\$14,620), 2019 (\$12,500), 2020 (\$19,360) and 2021 (\$14,360)

Q3. How much is budgeted annually going forward with this contract?

R3. The projected spend will be in-line with what was previously spent annually

Q4. How many firms will be selected?

R4. The county is currently looking for one (1) firm to award.

Q5. Please provide a copy of the current existing contract(s) with the existing consultants. Or provide a web link where they can be viewed.

R5. The previous solicitation and current contract can be found online via the link below:

https://www.lakecountyfl.gov/offices/procurement_services/bid_details.aspx?bid_number=16-0212

Q6. Will selection be based solely on price or will past performance and references be considered?

R6. See Section 5.0 of the solicitation documents

Q7. Is it a requirement to complete every line of the pricing sheet or is it acceptable to leave some lines blank?

R7. Some of the lines on Attachment 2 - Pricing Sheet may be left blank by the proposer.

Q8. Is the prime contractor required to self-perform all disciplines, or is it acceptable to subcontract some services?

R8. Subcontracting is permitted

ACKNOWLEDGEMENT

Firm Name: Terracon Consultants, Inc.

I hereby certify that my electronic signature has the same legal effect as if made under oath; that I am an authorized representative of this vendor and/or empowered to execute this submittal on behalf of the vendor.

Signature of Legal Representative Submitting this Bid: [Click or tap here to enter text.](#)

Date: 5/21/2021

Print Name: Mark Mulligan, P.G.

Title: Principal

Primary E-mail Address: Mark.Mulligan, P.G.

Secondary E-mail Address: John.O'Reilly@terracon.com

A handwritten signature in black ink that reads "Mark Mulligan". The signature is written in a cursive style with a large, sweeping initial "M".

Terracon Consultants, Inc.

DESCRIPTION	UOM	COST
GENERAL HOURLY RATES		
Program Manager	HR	90
Corporate Consultant	HR	90
Principal Professional	HR	120
Senior Professional	HR	92
Project Manager	HR	92
Project Professional	HR	82
Staff Professional	HR	76
Senior Technician	HR	72
Project Technician	HR	72
Staff Technician	HR	70
Technician	HR	70
Secretary	HR	38
Administration	HR	38
MONITORING OF A BUILDING OR AN AREA OF A BUILDING		
Comprehensive Asbestos Hazard Assessment	SF	0.4
Pre-DEMOLITION Asbestos Hazard Assessment	SF	0.45
Asbestos Abatement Monitoring Plan	EA	275
Asbestos Abatement Project Monitoring	8 HR Shift	560
Infrared Camera Testing	HR	15
IAQ Field Survey (under 10,000 SF)	SF	0.45
IAQ Field Survey (over 10,000 SF)	SF	0.35
IAQ Remediation Monitoring Plan	EA	300
IAQ Remediation Monitoring	HR	75
PER SAMPLE PRICING		
Airborne Bacteria Culture	Per Sample	42
Airborne Fungal Culture	Per Sample	42
Asbestos	Per Sample	7.5
Carbon Dioxide	Per Sample	0
Carbon Monoxide	Per Sample	0
Formaldehyde	Per Sample	54
Hydrogen Sulfide	Per Sample	35
Lead in Paint	Per Sample	9.5
Lead in Water	Per Sample	14
Mold Spore trap by optical microscopy	Per Sample	27
Mold Tape Lift	Per Sample	27
Ozone	Per Sample	95

DESCRIPTION	UOM	COST
Radon	Per Sample	25
Surface Wipe / Bacteria Culture	Per Sample	45
Surface Wipe / Fungal Culture	Per Sample	35
Temperature & Relative Humidity	Per Sample	0
Volatile Organic Compounds (Air)	Per Sample	55
Volatile Organic Compounds (Water)	Per Sample	75
Lake County is exempt from all taxes (Federal, State, Local). A Tax Exemption Certificate will be furnished upon request for any direct purchasing. Contractor will be responsible for payment of taxes on all materials purchased by the Contractor for the project.		
Lake County will not accept nor authorize payment for travel time or expenses of service personnel to any of Lake County's facility locations. The hourly rate must commence on the job site. Billable time will be for service work performed.		
This is an indefinite quantity contract with no guarantee use of services. The County does not guarantee a dollar amount to be expended on any contract resulting from this solicitation.		
Lake County reserves the right to negotiate for additional services similar in nature but not known at time of solicitation.		

List no more than five projects which best illustrates qualifications relevant to the Solicitation. References must be less than five years old. LIST no more than two LAKE COUNTY GOVERNMENT PROJECTS (past, current, prime, and subcontractor) FIRST.

Terracon Consultants, Inc.

PROJECT NAME: Beverly Shores Elementary School – Media Center

Agency: Lake County Schools

Address: 201 West Burleigh Boulevard

City, State, Zip code: Tavares, Florida 32778

Contact Person: Robert Oyer

Title: Loss Control Officer

Email: oyerr@lake.k12.fl.us

Telephone: 352-253-6669

Project Cost: \$2,233.80

Contract Start and End Dates: 10/26/20 – 11/16/20

SCOPE of Project (list tasks, outlines or descriptions of items): Indoor Air Quality Assessment for mold included evaluating carbon dioxide, carbon monoxide, temperature and relative humidity monitoring, use of moisture meter and infrared camera, surface sampling for mold and spore trap sampling for mold and other particles, such as pollen, animal fragments and non-biological items.

PROJECT NAME: Clermont Middle School

Agency: Lake County Schools

Address: 201 West Burleigh Boulevard

City, State, Zip code: Tavares, Florida 32778

Contact Person: David Parker

Title: Director of Facilities Construction & Compliance

Email: Parkerd3@lake.k12.fl.us

Telephone: 352-800-2520

Project Cost: PO Budget \$18,214, invoiced \$17,944.75

Contract Start and End Dates: 9/30/20-10/30/20

SCOPE of Project (list tasks, outlines or descriptions of items): Asbestos demolition survey of 24 school buildings and 8 portables built in various phase dating back to the 1960s. The survey included roof core sampling and professional roof contractor patching.

PROJECT NAME: Silver Sands Middle School – Buiding 7

Agency: Volusia County Schools – Facilities Services & Operations

Address: 3750 Olson Drive

City, State, Zip code: Daytona Beach, Florida 32124

Contact Person: Alex Ulin

Title: Environmental Specialist

Email: aulin@volusia.k12.fl.us

Telephone: 386-947-8786

Project Cost: \$1,452.50

Contract Start and End Dates: 4/14/21-4/21/21

SCOPE of Project (list tasks, outlines or descriptions of items): Terracon conducted post-abatement clearance observations by an accredited asbestos abatement project monitoring with NIOSH 582 training and collected 5 air samples for on-site microscope analysis by Phase Contrast Microscopy (PCM) for comparison with the cleanup standard of 0.01 fibers per cubic centimeter.

PROJECT NAME: Mold Assessment and Post-Remediation Observations and Testing Report

Agency: Jones Lang LaSalle Americas, Inc.

Address: 390 N. Orange Avenue, Suite 220

City, State, Zip code: Orlando, Florida 32801

Contact Person: Samantha Hall

Title: Assistant General Manager

Email: Samantha.hall@am.jll.com

Telephone: 407-422-7773

Project Cost: \$4,025

Contract Start and End Dates: 1/20/21-1/29/21

SCOPE of Project (list tasks, outlines or descriptions of items): Terracon mobilized a Florida Licensed Mold Assessor to conduct a rush moisture and mold assessment on the 26th floor of an office building in downtown Orlando. Following remediation by others, Terracon verified moisture / mold impacted materials in five separate areas had been adequately removed and the air quality was suitable for new tenant occupancy.

PROJECT NAME: Flagler County Sheriff's Operations Building

Agency: Flagler County Engineering Department

Address: 1769 E. Moody Boulevard

City, State, Zip code: Bunnell, Florida 32110

Contact Person: Ms. Faith Alkhatib, P.E.

Title: Flagler County Engineer

Email: falkhatib@flaglercounty.org

Telephone: 407-302-7360

Project Cost: \$12,553.17

Contract Start and End Dates: 1/2/2019-4/8/2019

SCOPE of Project (list tasks, outlines or descriptions of items): Terracon performed a building envelope and IAQ assessment to evaluate reported employee illnesses in this office building. The assessment was high profile and included evaluating internal components of large HVAC systems, below floor finishes and within wall cavity cuts for moisture, sources of odors and swab sampling for avian pathogens (bats) and mold.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/1/2022

12/21/2020

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

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

PRODUCER Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906 (816) 960-9000	CONTACT NAME:	
	PHONE (A/C. No. Ext):	FAX (A/C. No):
	E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Lexington Insurance Company		19437
INSURER B: Travelers Property Casualty Co of America		25674
INSURER C: The Travelers Indemnity Company		25658
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES TERCO01 CERTIFICATE NUMBER: 13881552 REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CONTRACTUAL LIAB <input checked="" type="checkbox"/> XCU COVERAGE GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	N	N	TC2J-GLSA-1118L293	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	N	N	TC2J-CAP-131J3858.	1/1/2021	1/1/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
B B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	N	N	ZUP-91M46583 (EXCLUDES PROF. LIAB.)	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
B C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	TC2J-UB-6N32541-0 (AOS) TRK-UB-6N32384-6 (AZ,MA,WI)	1/1/2021 1/1/2021	1/1/2022 1/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	PROFESSIONAL LIABILITY	N	N	26030216	1/1/2021	1/1/2022	\$1,000,000 EACH CLAIM & \$1,000,000 ANNUAL AGGREGATE

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

PROOF OF COVERAGE. THE UMBRELLA LIABILITY IS FOLLOW FORM OVER THE GENERAL LIABILITY, AUTO LIABILITY, AND EMPLOYER'S LIABILITY PER THE POLICY TERMS, CONDITIONS, AND EXCLUSIONS.

CERTIFICATE HOLDER

13881552
SPECIMEN

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Joseph M. Agnello

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State of Florida

Department of State

I certify from the records of this office that TERRACON CONSULTANTS, INC. is a Delaware corporation authorized to transact business in the State of Florida, qualified on December 31, 2003.

The document number of this corporation is F04000000114.

I further certify that said corporation has paid all fees due this office through December 31, 2021, that its most recent annual report/uniform business report was filed on January 14, 2021, and that its status is active.

I further certify that said corporation has not filed a Certificate of Withdrawal.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Fourteenth day of January,
2021*



Ronald R. Lee
Secretary of State


Tracking Number: 0263819420CC


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

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

Terracon

* Note: Terracon is no longer required to hold a firm engineering (certificate of authority) or geology business license. However, the firm must have qualifying agents who hold individual licenses (provided below).

 Ron DeSantis, Governor

 **FBPE**
FLORIDA BOARD OF
PROFESSIONAL ENGINEERS

STATE OF FLORIDA

BOARD OF PROFESSIONAL ENGINEERS


THE PROFESSIONAL ENGINEER HEREIN IS LICENSED UNDER THE
PROVISIONS OF CHAPTER 471, FLORIDA STATUTES

ACREE, RICHARD G.
1675 LEE ROAD
WINTER PARK FL 32789

LICENSE NUMBER: PE53962


EXPIRATION DATE: FEBRUARY 28, 2023

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 Ron DeSantis, Governor

Halsey Beshears, Secretary

 **Florida dbpr**

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

BOARD OF PROFESSIONAL GEOLOGISTS

THE PROFESSIONAL GEOLOGIST HEREIN IS LICENSED UNDER THE
PROVISIONS OF CHAPTER 492, FLORIDA STATUTES

BEERBOWER, DAVID CHARLES
896 CRANES CT
MAITLAND FL 32751

LICENSE NUMBER: PG828

EXPIRATION DATE: JULY 31, 2022

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Ron DeSantis, Governor

Halsey Beshears, Secretary



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

ASBESTOS LICENSING UNIT

THE ASBESTOS BUSINESS ORGANIZATION HEREIN IS LICENSED UNDER THE
PROVISIONS OF CHAPTER 469, FLORIDA STATUTES

TERRACON CONSULTANTS INC

MICHAEL W SCHRUM
1675 LEE ROAD
WINTER PARK FL 32789

LICENSE NUMBER: ZA337

EXPIRATION DATE: NOVEMBER 30, 2021

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Center for Training, Research and Education for Environmental Occupations

certifies

John Lee O'Reilly

Terracon Consultants, 3876 Lower Union Road Orlando, FL 32814

Having passed a 25-question exam with a score of 70% or higher has successfully met training requirements for

Asbestos Refresher: Project Design Online

FDBPR Asbestos Licensing Unit: Provider #0000995; Course #FL490006403
(Reaccreditation for Project Design under TSCA Title II/AHERA)

Conducted

04/20/2021

Certificate #: 220084-1437

Exam Date: 04/20/2021

EPA accreditation expires: 04/20/2022

Principal Instructor: *Russell E. Stauffer, P.E.*

CEUs: 0.8

FBPR LAC: #0000995; Course #0006403

FBPE CEHs: #0009070 Educational Institutions: 8 CEHs

Carol Hinton

Carol Hinton, Associate Director

United States Environmental Protection Agency

This is to certify that



John L O'Reilly

has fulfilled the requirements of the Toxic Substances Control Act (TSCA) Section 402, and has received certification to conduct lead-based paint activities pursuant to 40 CFR Part 745.226 as:

Inspector

In the Jurisdiction of:

All EPA Administered Lead-based Paint Activities Program States, Tribes and Territories

This certification is valid from the date of issuance and expires August 29, 2022

LBP-I-6184-2

Certification #

May 07, 2019

Issued On

Adrienne Priselac, Manager, Toxics Office

Land Division





Ron DeSantis, Governor

Halsey Beshears, Secretary



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

MOLD-RELATED SERVICES LICENSING PROGRAM

THE MOLD ASSESSOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 468, FLORIDA STATUTES

O'REILLY, JOHN LEE

3876 LOWER UNION ROAD
ORLANDO FL 32814

LICENSE NUMBER: MRSA212

EXPIRATION DATE: JULY 31, 2022

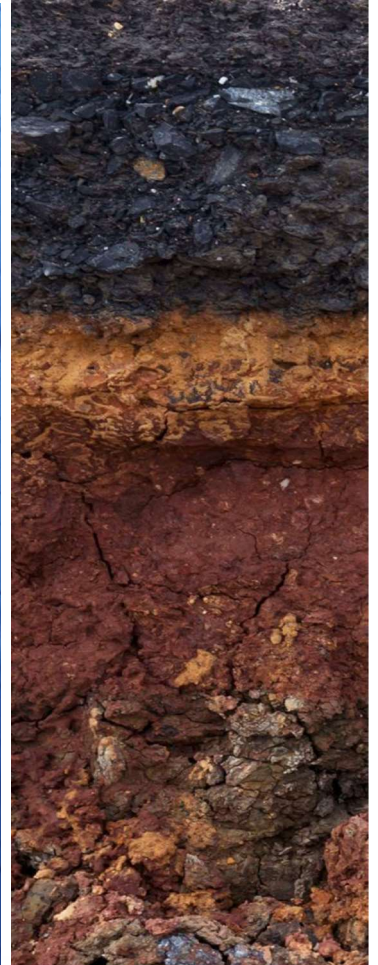
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Asbestos & Air Quality Testing Services



Terracon

CONTACT:

Mark Mulligan, P.G.
Program Manager
1675 Lee Road
Winter Park, FL 32789

Phone (407) 740 6110
Fax (407) 740 6112
terracon.com

RESPONSIVE.
RESOURCEFUL.
RELIABLE.

Environmental



Facilities



Geotechnical



Materials