

DELIVER TO:
 City of Fort Pierce, Purchasing Division
 Room 101
 100 North U.S. #1
 Fort Pierce, FL 34950

MAIL TO:
 City of Fort Pierce Purchasing Division,
 Room 101
 P.O. Box 1480
 Fort Pierce, FL 34954-1480



**INVITATION TO BID
 and
 BIDDER ACKNOWLEDGMENT**

Bid Writer: Madison White, 772-467-3102

Bid No: 2025-023

Mandatory Site-Visit:
 10:00 A.M, THURSDAY, MARCH 6, 2025

Bid Title: CDBG Residential Rehabilitation –
 2803 Avenue M

Mandatory Site-Visit Location:
 2803 AVENUE M,
 FORT PIERCE, FL 34947

Bid Opening Location:
 Purchasing Division Conference Room, Room 101
 100 North U.S. #1, 1st Floor
 Fort Pierce, Florida 34950

Bid Due Date & Time:
 3:00 PM, WEDNESDAY, MARCH 19, 2025

If you need any reasonable accommodation for any type of disability in order to participate in this procurement, please contact this division as soon as possible.

Bidder Name:
 TELCO Investments LLC

I hereby certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a bid for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid for the bidder.

Mailing Address:
 P.O. Box 742371

X Terry Coley
 Authorized Signature (Manual)

City, State, Zip Code:
 Boynton Beach FL 33474

Typed or Printed Name:
 Terry Coley

Type of Entity (Select one):
 Corporation / LLC
 Partnership _____
 Proprietorship _____

Title:
 Manager

Incorporated in the State of: New Mexico **Year:** 2013

Delivery in _____ **days, ARO**

Phone Number: 786 508-5401

Payment Terms: Net 30 Days

Fax Number:

FEIN or SS Number: 80-0961875

E-Mail Address: telco_investments.com

Local Business: / Y / N **MWBE:** / Y / N

Bid Security is attached, when required, in the amount of \$ _____
 F.O.B. DESTINATION

If returning as a "No Bid" state reason:

THIS PAGE MUST BE COMPLETED AND RETURNED WITH YOUR BID



Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion

Contractor Covered Transactions

- (1) The prospective contractor of the Recipient, Terry Coley,
(Contractor's Name)
certifies by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency.
- (2) Where the Recipient's contractor's is unable to certify to the above statement, the prospective contractor shall attach an explanation to this form.

Terry Coley
(Contractor's Name)

Terry Coley
(Authorized Signature)

Terry Coley
(Print Name)

Manager
(Title)

P.O. Box 742371
(Street and Address)

Baynton Beach FL 33474
(City, State, Zip)

City of Fort Pierce
(Recipient's Name)

Date: MARCH 16, 2025

Division Contract Number



DRUG~FREE WORKPLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087 hereby certified that

TELCO Investments LLC 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 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 proposed 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 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 employees 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.

Terry Coley
Proposer's Signature
MARCH 16, 2025
Date



NON-COLLUSION AFFIDAVIT FOR PRIME BIDDER

STATE OF Florida

COUNTY OF Palm Beach

Terry Coley, being first duly sworn, deposes
and says:

That he is Manager
(a partner or officer of the firm, etc.)

the party making the foregoing proposal or bid, that such proposal or bid is genuine and not collusive or sham; that said bidder has not colluded, conspired, connived or agreed directly or indirectly with any bidder or person, to put in a sham bid or to refrain from bidding, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference with any person, to fix the bid price of affiant or of any other bidder, or to fix any overhead, profit or cost element of said bid price, or of that of any other bidder, or to secure any advantage against the City of Fort Pierce, of the County of St. Lucie, or any person interested in the proposed contract; and that all statements in said proposal or bid are true.

TECO Investments LLC
(Firm Name)

By: Terry Coley

Title: Manager

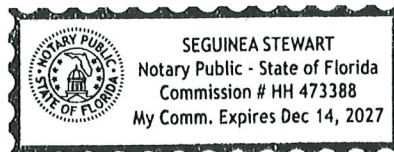
Subscribed and sworn to before me this 3

day of, 17, 2025.

Seguina Stewart
Notary Public

My Commission expires: (Seal)

12/14/27



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

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

This sworn statement is submitted by _____ City of Fort Pierce _____

by Terry Coley [©] MANAGER (Print name of the public entity).
_____ (Print individual's name and title)

for TELCO Investments LLC _____

whose business address is P.O. Box 742371 Boynton Beach FL 33474 _____

(If applicable) its Federal Employer Identification Number (FEIN) is 80-0961875 _____

(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: On the attached sheet). Required as per the IRS Form W-9.

1. 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.
2. I understand that "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.
3. I understand that an "affiliate" as defined in paragraph 287.133(1)(a), Florida Statutes, means:
 - a. A predecessor or successor of a person convicted of a public entity crime: or

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

- b. convicted of a public entity crime in Florida during the preceding 36 months shall
- c. be considered an affiliate. I understand that a "person" as defined in Paragraph 287.133(1)(c), Florida Statutes, 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, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

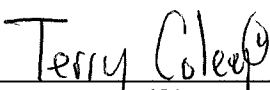
4. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(Please indicate which statement applies.)**

Neither the entity submitted this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity nor 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, member, or agents who are active in management of the entity, or an 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 its officers, directors, executives, partners, shareholders, employees, member, 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. However, there has been subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearing and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. **(Attach a copy of the final order)**

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FWRIDA STATUTES, FOR CATEGORY TWO OR ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.



 (Signature)
 MARCH 14, 2025

 (Date)

STATE OF Florida

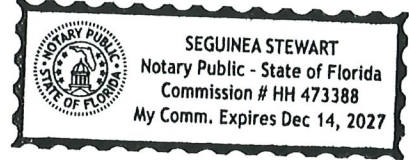
COUNTY OF Palm Beach

PERSONALLY APPEARED BEFORE ME, the undersigned authority Terry Coley
(Name of individual signing)

Who, after first being sworn by me, affixed his/her signature in the space provided above on this
day 3 of 17, 2025.

Sequinea Stewart
(NOTARY PUBLIC)

My Commission Expires: 12/14/27





E-VERIFY AFFIRMATION STATEMENT

Description: CDBG RESIDENTIAL REHABILITATION – 2803 AVENUE M

Pursuant to Section 448.095, Florida Statutes, Contractor/Proposer/Responder acknowledges and agrees:

- (a) to register with and use the E-Verify System to verify the work authorization status of all persons employed by the Contractor/Proposer/Responder to perform employment duties during the term of the Contract, and
- (b) to require any subcontractor (as defined in Section 448.095, Florida Statutes) assigned by Contractor/Proposer/Respondent to perform work pursuant to the Contract to register with and use the E-Verify System to verify the work authorization status of all persons employed by the subcontractor during the term of the Contract, and
- (c) if Contractor/Proposer/Responder enters into a contract with a subcontractor, Contractor/Proposer/Responder shall obtain an affidavit from every subcontractor stating the subcontractor does not employ, contract with, or subcontract with an unauthorized alien and the Contractor/Proposer/Responder shall maintain a copy of such affidavit for the term of the Contract, and
- (d) the Contractor/Proposer/Bidder shall use the E-Verify System during the term of the Contract, as a condition of the Contract.

Contractor/Proposer/Bidder Company Name: TELED Investments LLC

Authorized Company Person's Signature: Terry Coley

Authorized Company Person's Title: MANAGER

Date: MARCH 16, 2025

STATE OF FLORIDA
 COUNTY OF palm beach

Sworn (or affirmed) and subscribed before me by means of physical presence or online notarization this 3 day of 17, 2025 by Terry Coley, who is personally known or produced identification (ID produced: drivers license).

Signature: [Signature] (Seal)
 NOTARY PUBLIC
 My Commission Expires: 12/14/27





CERTIFICATION REGARDING SCRUTINIZED COMPANIES LISTS

Respondent Name:	Terry Coley [®] Telco Investments LLC		
Respondent's Authorized Representative Name and Title:	Terry Coley [®] Manager		
Address:	P.O. Box 742371		
City:	Boynton Beach	State:	FL
		Zip:	33474
Phone Number:	786-508-5400	Respondent FEIN:	80-0961875
Email Address:	telco_inv@yahoo.com		

Section 287.135, Florida Statutes prohibits a company from bidding on, submitting a proposal for, or entering into or renewing a contract for goods or services of any amount if, at the time of contracting or renewal, the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, Florida Statutes, or is engaged in a boycott of Israel. Section 287.135, Florida Statutes, also prohibits a company from bidding on, submitting a proposal for, or entering into or renewing a contract for goods or services of \$1,000,000 or more, that are on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector Lists which were created pursuant to s. 215.473, Florida Statutes.

Certification:

As the person authorized to sign on behalf of Respondent, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or the Scrutinized Companies that Boycott Israel List. I further certify that the company is not engaged in a boycott of Israel. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject a company to civil penalties, attorney's fees, and/or costs.



**CITY OF FORT PIERCE
AFFIDAVIT REGARDING THE USE COERCION FOR
LABOR OR SERVICES**

Vendor name: Telco Investments LLC
Authorized Representative's Name and Title: Terry Coley[®] MANAGER
Address: P.O. Box 742371 Boynton
City: Boynton Beach State: Florida Zip Code: 33471
Phone Number: 786-508-5400 Email Address: telco_invo@yahoo.com

Section 787.06(13), Florida Statutes, requires all nongovernmental entities executing, renewing, or extending a contract with a governmental entity to provide an affidavit signed by an officer or representative of the nongovernmental entity under penalty of perjury that the nongovernmental entity does not use coercion for labor or services as defined in that statute. As the person authorized to sign on behalf of Vendor, I certify that the company identified does not:

1. Use or threaten to use physical force against any person;
2. Restrain, isolate, or confine or threaten to restrain, isolate, or confine any person without lawful authority and against her or his will;
3. Use lending or other credit methods to establish a debt by any person when labor or services are pledged as a security for the debt, if the value of the labor or services as reasonably assessed is not applied toward the liquidation of the debt, the length and nature of the labor or services are not respectively limited and defined;
4. Destroy, conceal, remove, confiscate, withhold, or possess any actual or purported passport, visa, or other immigration document, or any other actual or purported government identification document, of any person;
5. Cause or threaten to cause financial harm to any person;
6. Entice or lure any person by fraud or deceit; or
7. Provide a controlled substance as outlined in Schedule I or Schedule II of section 893.03, Florida Statutes, to any person for the purpose of exploitation of that person.

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

By: Terry Coley[®] Terry Coley MANAGER MARCH 16, 2025
Authorized Signature Printed Name and Title Date

STATE OF FLORIDA
COUNTY OF Palm Beach

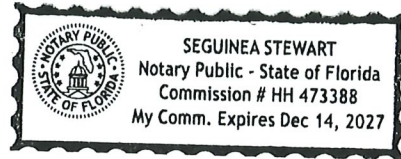
Sworn (or affirmed) and subscribed before me by means of physical presence or online notarization
this 3 day of 17, 2025 by Terry Coley, who is

personally known or
 produced identification (ID produced: drivers license).

Notary Public Signature: [Signature] (Seal)

Print Name: Seguinea Stewart

My Commission Expires 12/14/27





REFERENCES

BID NO. 2025-023

CDBG RESIDENTIAL REHABILITATION — 2803 AVENUE M

Contact Person & Title	Quinton Jink Owner
Email Address	iq.jink@hotmail.com
Phone No.	786 262-8597
Company Name	IQI 15820-39 LLC
Mailing Address	8152 ^{NW} 14th Place
City, State, Zip	Miami, Florida 33147
Type of commercial work contracted	Remodel & Repair burnt out duplex
Contact Person & Title	Johnny White Owner
Email Address	Platinumhomesinvestment@gmail.com
Phone No.	305 409-3504
Company Name	Platinum Homes Investments Inc
Mailing Address	3511 NW 209th Ter
City, State, Zip	Miami Gardens FL 33056
Type of commercial work contracted	Remodel & Repair burnt out house.

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.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. TECO Investments LLC</p> <p>2 Business name/disregarded entity name, if different from above</p>	
	<p>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.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>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.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <p>6 City, state, and ZIP code</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

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	
261 - 63 - 8623	
or	
Employer identification number	
80 - 0961875	

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 ▶ **Terry Coley** Date ▶ **MARCH 16, 2025**

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.*

March 13, 2025



CITY OF FORT PIERCE

CDBG RESIDENTIAL REHABILITATION – 2803 AVENUE M

BID NO. 2025-023

ADDENDUM NO. 1

The purpose of this addendum is to modify the scope of work and to include revised bid response form.

Scope of Work Modifications

The following items were added to the Scope of Work:

- **Replace front entry light fixture**
- **Replace rear entry light fixture**
- **Repair ceiling and drywall damage from roof leak**

Revised Bid Response Form

See attached the Revised Bid Response Form. This form should be used for submitting your bid response.

All other conditions of this bid remain the same.

Please acknowledge receipt of this addendum and include it with your submittal.

Signature: Terry Coley Manual Date: March 16, 2025

Signature: Terry Coley Typed or Printed

Company Name: TELCO Investments LLC

Address: P.O. Box 742371 Boynton Beach FL 33494 mailing address



REVISED BID RESPONSE FORM

Bid Item	CDBG RESIDENTIAL REHABILITATION – 2803 AVENUE M		
Bid Number	2025-023	Due Date & Time	3:00PM, WEDNESDAY, MARCH 19, 2025

This project should be bid on according to the housing rehabilitation specifications. The offeror agrees to furnish the following items or services to the City of Fort Pierce at the place specified, in accordance with specifications herein at the prices quoted below:

ITEM DESCRIPTION	TOTAL COST
Repair bathroom – ADA compliant	\$ 6500.00
Replace main entry door	\$ 3497.00
Replace 2 exterior doors	\$ 1100.00
Replace patch/flat roof	\$ 21365.00
Misc. wood trim/drywall repair (include bullet hold impression)	\$ 1200.00
Replace garage door and opener	\$ 5066.00
Replace 12-impact windows	\$ 6418.00
Replace wall condition/engineer (rear porch)	\$ 1500.00
Replace 2 sliding doors – impact	\$ 5770.00
Replace 2 interior doors	\$ 996.00
Install doorbell	\$ 175.00
Remove wood siding with stucco	\$ 3500.00
Replace front entry light fixture	\$ 175.00
Replace rear entry light fixture	\$ 175.00
Repair ceiling and drywall damage from roof leak	\$ 4000.00
Permits	\$ 600.00
Performance Bond	\$ 650.00
TOTAL	\$ 58437.00 59,087.00

Please respond to the following questions:

This project will be completed within how many calendar days after the notice to proceed is issued.	90
Work is guaranteed for how many years?	1

Materials are guaranteed for how many years? 1

Bid Response Form
Page 2 of 2

Vendor: TELCO Investments LLC

Address: P.O Box 742371

City, State, Zip Code: Bourton Beach Florida 33474

Email Address: telco_invest@bcs.com

Typed Name & Title: Terry Coley[©] MANAGER

Signature: Terry Coley[©] Date: MARCH 10, 2025

Telephone No.: 786-508-5400 Fax No.: _____

(*Please include Remit to address if different than address stated above)

Remit To: _____

Check block below for applicable minority indicator:

MINORITY	CHECK BOX
Asian Indian	
Black	<input checked="" type="checkbox"/>
Asian Pacific	
Hispanic	
Native American	
Small Business	
Women Owned	
Small Disadvantage Business	



City of Fort Pierce

Fort Pierce, FL 34950
772-467-3065

Certificate of Use

Business Name: TELCO INVESTMENTS LLC
DBA: DND CONSTRUCTION

Business Location: 511 N 9TH ST A
Fort Pierce, FL 34950

Owner:

License Number: CU-2025-000147

Issued Date: 2/24/2025

Expiration Date: 2/24/2026

Approved Business Use: Real Estate & Property Management
Services & Building Contractor

Mailing Address: 511 N 9TH ST A
Fort Pierce, FL 34950

License Type: Certificate of Use

Classification: Home-based Certificate of Use

Fees Paid: \$125.00

Linda W. Cox, City Clerk

This certificate does not warrant that the holder is competent to perform in the business, but that the holder has provided the necessary documentation (if required) for this business. Valid only when all state and local regulated trade licenses/competency cards are valid for the current fiscal year as required by law. This certificate becomes null and void if business name, location, ownership or address is changed. All certificates automatically expire if not renewed within 60 days of expiration date shown.

TO BE POSTED IN A CONSPICUOUS PLACE

CITY OF FORT PIERCE BIDDER'S CHECKLIST

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

Check "Yes" or "No" to each of the following:

	YES	NO
Is Invitation to Bid cover page (page 1) completed, signed, and attached?	/	
Include proof of proper insurance as stated in bid documents.	/	
Are all of the Required forms complete and included?	/	
Is Bid Response Form completed, signed, and attached?	/	
All prices have been reviewed for mathematical accuracy, all price corrections initialed, and all price extensions and totals thoroughly checked?	/	
Did you submit your bid electronically?		/
For Hard Copy Submissions Only: Are two (2) complete bid packages included (one original and one copy)		
For Hard Copy Submissions Only: Bid envelope is marked accordingly.	/	
Have you made sure your corporate address matches your Sunbiz information ?		
Is each Bid Addendum (when issued) signed and included?	/	

PLEASE SIGN AND RETURN WITH BID

Terry Colee