

**CITY OF FORT PIERCE**  
**CONTINUING SERVICES AGREEMENT**  
**RFP NO. 2024-048 NUISANCE ABATEMENT SERVICES**

This Agreement (“Agreement”), entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2025, is made and entered into by and between the City of Fort Pierce, Florida, a municipal corporation (“City”), and MOW 4 LESS LLC, a FLORIDA LIMITED LIABILITY COMPANY, with its principal place of business at 308 South 30<sup>th</sup> Street, Fort Pierce, FL 34947 (“Contractor”).

WHEREAS, on August 28, 2024, pursuant to RFP No. 2024-048, the City solicited the services of qualified vendors to provide nuisance abatement services; and

WHEREAS, the Contractor submitted a proposal that was evaluated by an evaluation committee who recommended award to Contractor; and

WHEREAS, on March 17, 2025, the City Commission authorized the award of RFP No. 2024-048 to Contractor and authorized staff to initiate contract negotiations with Contractor; and

WHEREAS, Contractor is qualified and experienced in providing nuisance abatement services; and

WHEREAS, the City is in need of such continued services for nuisance abatement; and

WHEREAS, Contractor has agreed to furnish nuisance abatement services to the City for the compensation set forth herein and subject to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of the mutual promises hereinafter contained, the Parties agree as follows:

1. Contractor Services.

- 1.1 Contractor will provide the services as set forth in **Exhibit A**, Scope of Work, attached hereto and incorporated for all purposes (“the Services”), to the satisfaction of the City.
- 1.2 Contractor will be available to begin work promptly after receipt of a fully executed copy of this Agreement. It is agreed that this Agreement shall be considered a continuing contract and work will be initiated on an assignment-by-assignment basis through a Specific Authorization. The City will notify all contractors, of which the City has entered a nuisance abatement agreement, of an assignment, and solicit from the contractors their proposed costs and time period for completion of the assignment. The City reserves the right to select the respective contractor who the City believes is in its best interest to perform the specified work. Contractor specifically acknowledges and agrees this Agreement is not a guarantee the City will select Contractor to perform any services, nor is Contractor guaranteed to receive any assignments for which Contractor will be compensated by City pursuant to this Agreement.

- 1.3 A Specific Authorization from the City will be provided to Contractor for each assignment awarded to Contractor. The Specific Authorization shall set out the Scope of Work for the assignment, time of performance, and any other necessary terms.
- 1.4 The Community Response Director can approve Specific Authorizations up to the limit established by the City Purchasing Policy for department heads. Specific Authorizations over the limit for department heads and up to \$50,000 must be authorized by the City Manager. Specific Authorizations over \$50,000 must be presented to the City Commission for authorization.
- 1.5 Notwithstanding any other provision of this Agreement, the Contractor's performance of the Services will (1) conform to the specifications and requirements contained in the RFP No. 2024-048 – Nuisance Abatement Services and the Contractor's Bid, attached as **Exhibit B**. To the extent that the Bid or Contractor's Bid conflict with the terms of this Agreement, the terms of this Agreement will control.

2. Compensation.

- 2.1 Total compensation to Contractor will not exceed \$75,000 (**Seventy-Five Thousand Dollars and 00/100**) within each fiscal year (October 1 to September 30) of the Agreement. Total compensation shall include all travel and expenses. Payment for the services performed will be processed within thirty (30) days of receipt and approval of an invoice in accordance with the Florida Prompt Payment Act, Florida Statutes § 218.70-79.
- 2.2 Upon completion of the services and acceptance by the City, Contractor will submit invoices, along with the required documentation, as set forth in **Exhibit A**, Scope of Work.
- 2.3 The City will, within thirty (30) days from the date it receives an invoice and supporting documentation, approve or disapprove the amount reflected in the invoice. If the City approves the amount or any portion of the amount, the City will promptly pay to Contractor the amount approved so long as Contractor is not in default under this Agreement. If the City disapproves any invoice amount, the City will give Contractor specific reasons for its disapproval in writing.

3. Term. This Agreement is effective as of the date last signed below ("Effective Date") and will terminate two years from the effective date, unless earlier terminated in accordance with Section 8. The City will have the option, in its sole discretion, to renew this Agreement for four (4) additional one (1) year terms.

4. Licenses, Permits, Taxes, Fees, Laws and Regulations.

- 4.1 Contractor warrants that it will obtain, maintain in effect, and pay the cost for all licenses, permits, or certifications that may be necessary for Contractor's performance of this Agreement.

- 4.2 Contractor will be responsible for the payment of all taxes, excises, fees, payroll deductions, employee benefits (if any), fines, penalties or other payments required by federal, state, or local law or regulation in connection with Contractor's performance of this Agreement.
- 4.3 Contractor will comply with and will be responsible for requiring its officers and employees to comply with, all applicable federal, state, and local laws and regulations.
5. Ownership and Use of Work Material.
- 5.1 All drawings, specifications, plans, computations, sketches, data, records, photographs, tapes, renderings, models, publications, statements, accounts, reports, studies, and other materials prepared by Contractor or any Contractor's subcontractor in connection with the Services (collectively, "Work Material"), whether or not accepted or rejected by the City, are the sole property of the City and for its exclusive use and reuse at any time without further compensation and without any restrictions.
- 5.2 Contractor grants and assigns to the City all rights and claims of whatever nature and whether now or hereafter arising in and to the Work Material.
- 5.3 Contractor will deliver all Work Material to the City upon expiration or termination of this Agreement. The City will have the right to use the Work Material for the completion of the Services or otherwise. The City may, at all times, retain the originals of the Work Material.
- 5.4 The Work Material will not be used or published by Contractor or any other party unless expressly authorized by the City in writing. Contractor will treat all Work Material as confidential.
6. Confidentiality and Safeguarding of City Records; Press Releases; Public Information.
- 6.1 Contractor shall not disclose, publish, or authorize others to disclose or publish Work Material or other information pertaining to the Services assigned to Contractor by the City or other information to which Contractor had access during the term of this Agreement without the prior written approval of the City.
- 6.2 Contractor will not make any press releases, public statements, or advertisement referring to the services or the engagement of Contractor as an independent Contractor of the City in connection with the Agreement or release any information relative to the Agreement for publication, advertisement or any other purpose without the prior written approval of the City.
- 6.3 The restrictions and obligations under this Section will survive expiration or termination of this Agreement for any reason.
7. Public Records. The City strictly adheres all statutes, court decisions and the opinions of the Florida Attorney General with respect to disclosure of public information under Chapter 119, Florida Statutes, Contractor shall comply with all public records laws, specifically to:

- 7.1 Keep and maintain public records required by the City to perform the service.
- 7.2 Upon request from the City's custodian of public records, provide the City with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes, or as otherwise provided by law.
- 7.3 Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract if Contractor does not transfer the records to the City.
- 7.4 Upon completion of the contract, transfer, at no cost, to the City all public records in possession of Contractor or keep and maintain public records required by the City to perform the service. If Contractor transfer all public records to the City upon completion of the contract, Contractor shall destroy any duplicate public record that are exempt or confidential and exempt from public records disclosure requirements. If Contractor keeps and maintains public records upon completion of the contract, Contractor shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the City, upon request from the City's custodian of public records, in a format that is compatible with the information technology systems of the City.

**IF CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO CONTRACTOR'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS THROUGH THE CITY CLERK AT 772-467-3065, PUBLICRECORDS@CITYOFFORTPIERCE.COM, 100 NORTH U.S. HWY 1, FORT PIERCE, FL 34950.**

8. Termination.

- 8.1 If either party is in default of performance of any material obligation under this Agreement, the party that is not in default may give written notice of the default to the other party and if the party notified fails to correct the default within thirty (30) days or within such period fails to satisfy the party giving notice that the default does not exist, the party giving notice may terminate this Agreement upon expiration of the thirty (30) day period.
- 8.2 The City may terminate this Agreement immediately in the event of the filing by or against Contractor of a petition for relief in bankruptcy or for receivership, or in the event that Contractor becomes insolvent.
- 8.3 The termination of this Agreement will not affect any right or remedy that has accrued to either party at the time of termination.

- 8.4 Upon termination of this Agreement, Contractor will deliver to the appropriate representative of the City all Work Material related to the services performed by Contractor in the format requested by the City together with any keys, identification badges, or equipment owned by the City.
- 8.5 Termination under Sections 8.1 or 8.6 will not relieve Contractor from liability for any default or breach under this Agreement or any other act or omission of Contractor.
- 8.6 The City may terminate this Agreement, for any reason, without cause, in its sole discretion, upon written notice to Contractor. At such time, Contractor will be compensated only for that work which has been satisfactorily completed to the date of termination. No compensation shall be paid for de-mobilization, take-down, disengagement wind-down or other costs incurred due to termination of this Agreement.
9. Indemnification. Contractor will indemnify and hold harmless the City, and its members, officials, officers, attorneys, employees, representatives and agents from all claims, demands, causes of action, and judgments for taxes, license fees, excises, fines, and penalties; for supplies, services, or merchandise purchased by Contractor; for wages and fringe benefits of Contractor's employees; and for injury or death of any person or damage to property that result directly or indirectly from the negligent or intentional acts or omissions of Contractor or its officers, agents, or employees in the performance of this Agreement.

10. Insurance.

Contractor shall, at its own expense, procure and maintain throughout the term of this Agreement, with insurers acceptable to the City, the types and amounts of insurance conforming to the minimum requirements set forth herein. Contractor shall not commence work until the required insurance is in force and evidence of insurance has been provided to and approved by the City. As evidence of compliance with the insurance required herein, Contractors shall furnish the City with:

A fully completed satisfactory Certificate of Insurance evidencing all coverage required. Also, a copy of the actual notice of cancellation endorsement(s) as issued on the policy(ies) and a copy of the actual additional insured endorsement as issued on the Commercial General Liability policy, signed by an authorized representative of the insurer(s) verifying inclusion of the City and its board members, officials, officers and employees as additional insureds in the Commercial General Liability coverage;

The original of the policy(ies); or

Other evidence satisfactory to the City.

Until such insurance is no longer required by this Agreement, Contractor shall provide the City with renewal or replacement evidence of insurance at least thirty (30) days prior to the expiration or termination of such insurance.

If requested to do so by the City, Contractor shall, within thirty (30) days after receipt of a written request from the City, provide the City a certified, complete copy of the policies of insurance of insurance providing the coverage required.

Workers' Compensation/Employers' Liability - Such insurance shall be no more restrictive than that provided by the Standard Workers' Compensation Policy, as filed for use in Florida by the National Council on Compensation Insurance, without restrictive endorsements. In addition to coverage for the Florida Workers' Compensation Act, where appropriate, coverage is to be included for the Federal Employer's Liability Act and any other applicable Federal or State law. The policy must be endorsed to provide the City with thirty (30) days written notice of cancellation.

The minimum amount of coverage (inclusive of any amount provided by an umbrella or excess policy) shall be:

Part One:	“Statutory”
Part Two:	\$1,000,000 (Each Accident)
	\$1,000,000 (Disease-Policy Limit)
	\$1,000,000 (Disease-Each Employee)

The Workers' Compensation Policy must be endorsed to waive the insurer's right to subrogate against the City and its respective members, officials, officers, and employees in the manner which would result from the attachment of the NCCI Waiver Of Our Right To Recover From Others Endorsement (Advisory Form WC 00 03 13) with City and their respective members, officials, officers, and employees scheduled thereon.

Commercial General Liability - Such insurance shall be no more restrictive than that provided by the most recent version of standard Commercial General Liability Form (ISO Form CG 00 01) as filed for use in the State of Florida without any restrictive endorsements. other than those required by ISO or the state of Florida or those described below. The policy must be endorsed to provide the City with thirty (30) days written notice of cancellation. The coverage may include restrictive endorsements which exclude coverage for liability arising out of:

- Mold, fungus, or bacteria
- Terrorism
- Sexual molestation

The City and its officials, officers, agents and employees shall be included as “Additional Insureds” on a form no more restrictive than the latest edition of ISO Form CG 20 10 (Additional Insured – Owners, Lessees, or Contractors – Scheduled Person or Organization Endorsement).

The minimum limits (inclusive of amounts provided by an umbrella or excess policy) shall be:

General Aggregate	\$1,000,000
Products/Completed Operations Aggregate	\$1,000,000
Personal and Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000

Fire Damage (any one fire) \$Nil

Medical Expense (any one person) \$Nil

Automobile Liability - Such insurance shall be no more restrictive than that provided by Section II (Liability Coverage) of the most recent version of standard Business Auto Policy (ISO Form CA 00 01) without any restrictive endorsements, including coverage for liability contractually assumed. The policy shall cover all owned, non-owned, and hired autos used in connection with the performance of the work and must be endorsed to provide the City with thirty (30) days written notice of cancellation. The minimum limits (inclusive of any amounts provided by an umbrella or excess policy) shall be:

Each Occurrence

Bodily Injury and Property Damage Liability Combined \$1,000,000

General Conditions - The insurance provided by Contractor shall apply on a primary basis. Any insurance, or self-insurance, maintained by the City shall be excess of, and shall not contribute with, the insurance provided by Contractor.

Except where prior written approval has been obtained hereunder, the insurance maintained by Contractor shall apply on a first dollar basis without application of a deductible or self-insured retention. Contractor shall pay on behalf of the City or its officials, officers, agents and employees any deductible or self-insured retention applicable to a claim against the City or its officials, officers, agents and employees.

The insurance provided by the Contractor shall be endorsed to provide that the Insurer waives its rights against the City and their officials, officers and employees.

Compliance with these insurance requirements shall not limit the liability of Contractor. Any remedy provided to the City by the insurance provided by the Contractor shall be in addition to and not in lieu of any other remedy (including, but not limited to, as an indemnitee of Contractor) available to the City under this Agreement or otherwise.

Neither approval nor failure to disapprove insurance furnished by Contractor shall relieve Contractor from responsibility to provide insurance as required by this Agreement.

Certificates of Insurance must be completed as follows:

1. Certificate Holder:

City of Fort Pierce  
Attention: Risk Manager  
100 N. U.S. Hwy 1  
Fort Pierce, FL 34954-1480

2. Additional Insured for General Liability:

City of Fort Pierce and its officials, officers and employees.

11. Alterations or Additional Work. Contractor shall not make changes in the job scope or perform any additional work or provide any additional material, under this Agreement without first obtaining written authorization from the City for such additional work or materials. Additional labor or materials provided without written authorization shall be done at Contractor's risk and without payment.
12. Waiver of Jury Trial.

**BOTH THE CITY AND CONTRACTOR HEREBY KNOWINGLY AND INTENTIONALLY WAIVE THEIR RIGHT TO A TRIAL BY JURY AND ANY ISSUE ARISING OUT OF OR RELATING IN ANY WAY TO THIS AGREEMENT SHALL BE RESOLVED BY NON-JURY TRIAL.**

13. Notice. All notices to be given with respect to this Agreement shall be in writing. Each notice shall be sent by hand delivery, Unites Sates certified mail, postage prepaid, return receipt requested, or overnight courier services (e.g. FedEx, UPS) to the party to be notified at the addresses set forth below or at such other addresses as the parties shall designate to each other in the manner prescribed for notice herein:

AS TO CITY:  
City Manager  
100 N US Highway 1  
Fort Pierce, FL 34954

WITH A COPY TO:  
City Attorney  
100 N US Highway 1  
Fort Pierce, FL 34954

AS TO CONTRACTOR:  
Andrew Kissoon  
Owner-President  
308 S 30<sup>th</sup> Street  
Fort Pierce, FL 34947

Any notice shall be deemed received on the date of actual receipt or refusal. Changes of address shall be effective when provided in writing to the other party in the manner described herein.

14. Independent Contractor. The Contractor is and shall at all times be deemed to be an independent contractor for all purposes under this Agreement and shall not be deemed to be a representative, agent, or employee of the City in the performance of the Services.
15. Sovereign Immunity. Nothing contained in this Agreement shall be deemed or otherwise interpreted as waiving the City's sovereign immunity protections existing under the laws of the State of Florida or as increasing the limits of liability as set forth in Section 768.28, Florida Statutes.

16. Miscellaneous

- 16.1 Assignment. Neither party may assign this Agreement, in whole or in part, without the prior written consent of the other party.
- 16.2 Representations and Warranties by Contractor. If Contractor is a corporation or a limited liability company, Contractor warrants, represents, covenants, and agrees that it is duly organized, validly existing and in good standing under the laws of the state of its incorporation or organization and is duly authorized and in good standing to conduct business in the State of Florida, that it has all necessary power and has received all necessary approvals to execute and deliver this Agreement, and the individual executing this Agreement on behalf of Contractor has been duly authorized to act for and bind Contractor.
- 16.3 Taxes. The City is exempt from Federal Excise and State Sales Taxes on direct purchases of tangible personal property. The City exemption number is on the face of the Purchase Order. Contractor shall not be exempt from paying sales tax to their suppliers for materials to fulfill contractual obligations with the City Tax Exemption Number in securing such materials. This exemption does not apply to purchases of tangible personal property in the performance of contracts for the City.
- 16.4 Entire Agreement; Modifications. This Agreement supersedes all prior agreements, written or oral, between Contractor and the City and will constitute the entire Agreement and understanding between the parties with respect to the subject matter hereof. This Agreement and each of its provisions will be binding upon the parties and may not be waived, modified, amended or altered except by a writing signed by authorized representatives of the City and Contractor.
- 16.5 Force Majeure. Neither party hereto will be liable or responsible to the other for any loss or damage or for any delays or failure to perform due to causes beyond its reasonable control including, but not limited to, acts of God, strikes, epidemics, war, riots, civil unrest, flood, fire, tsunami, volcano, sabotage, air space closure, ground stop(s), a U.S. Department of State Travel Warning or any other circumstances of like character (“force majeure occurrence”).
- 16.6 Venue; Governing Law. St. Lucie County, Florida, will be the proper place of venue for suit on or in respect of this Agreement. This Agreement and all of the rights and obligations of the parties hereto and all of the terms and conditions hereof will be construed, interpreted and applied in accordance with and governed by and enforced under the laws of the State of Florida.
- 16.7 Dispute Resolution. Any disputes relating to interpretation of the terms of this Agreement or a question of fact or arising under this Agreement shall be resolved through good faith efforts upon the part of the Contractor and the City. Unless otherwise directed by the City, Contractor shall carry on the work and maintain its progress schedule in

accordance with the requirements of the Contract and the determination of the City or its representatives, pending resolution of the dispute. Any dispute which is not resolved by mutual agreement shall be decided by the City Manager who shall reduce the decision to writing. The decision of the City shall be final and conclusive unless determined by a court of competent jurisdiction to be fraudulent, capricious, arbitrary, so grossly erroneous as to necessarily imply bad faith, or not be supported by substantial evidence.

- 16.8 Waivers. No delay or omission in exercising any right accruing upon a default in performance of this Agreement will impair any right or be construed to be a waiver of any right. A waiver of any default under this Agreement will not be construed to be a waiver of any subsequent default under this Agreement.
- 16.9 Conflict of Interest. Contractor represents that it presently has no interest and shall acquire no interest, either direct or indirect which would conflict in any manner with the performance of services required hereunder, as provided for in Section 112.311 et. seq., Florida Statutes. Contractor further represents that no person having any interest shall be employed for said performance.
- 16.10 E-Verify. All requirements of Section 448.095, Florida Statutes, shall be complied with by Contractor. In accordance with, Section 448.095, Florida Statutes, Contractor shall register with and utilize the E-Verify System operated by the United States Department of Homeland Security to verify the employment eligibility of all new employees hired during the term of the Agreement and shall expressly require any subcontractors performing work or providing services pursuant to this Agreement to likewise utilize the E-Verify System to verify the employment eligibility of all new employees hired by the subcontractor during the term of this Agreement. If Contractor enters into a contract with a subcontractor performing work or providing services on its behalf, Contractor shall also require the subcontractor to provide an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an unauthorized alien. Information on registration for and use of the E-Verify System can be obtained via the internet at the Department of Homeland Security Web site: <http://www.dhs.gov/E-Verify>. Contractor shall, upon request, provide evidence of compliance with this provision to the City. A contract terminated pursuant to Section 448.095 is not a breach of contract and may not be considered as such. If the City terminates this contract with Contractor, Contractor may not be awarded a public contract for at least 1 year after the date on which the contract was terminated. Contractor is liable for any additional costs incurred by the City as a result of the termination of this contract under Section 448.095, Florida Statutes.
- 16.11 Non-Discrimination. Contractor covenants and agrees that Contractor shall not discriminate against any employee or applicant for employment to be employed in the performance of the Agreement with respect to hiring, tenure, terms, conditions or privileges of employment, or any matter directly or indirectly related to employment because of age, sex or physical handicaps (except where based on a bonafide occupational qualification); or because of marital status, race, color, religion, national origin or ancestry.

IN WITNESS WHEREOF, the parties hereto have accepted, made and executed this Agreement in counterparts each of which shall be treated as an original upon the terms and conditions above stated.

CONTRACTOR,  
MOW 4 LESS LLC:

By: Andrew C. Kissoon

Name: Andrew Kissoon

Title: owner

Date: 8-13-2025

ATTEST:

By: \_\_\_\_\_  
Linda Cox, City Clerk

(seal)

CITY OF FORT PIERCE:

By: \_\_\_\_\_  
Linda Hudson, Mayor

Date: \_\_\_\_\_

APPROVED AS TO  
FORM AND CORRECTNESS:

By: \_\_\_\_\_  
Sara Hedges, City Attorney

Attached: Exhibit A – Scope of Work  
Exhibit B – Contractor’s Proposal

**EXHIBIT “A”**  
**SCOPE OF WORK**

**1. SERVICES TO BE PROVIDED**

The Contractor shall furnish all labor, equipment, supervision, transportation, materials, tools, and incidentals necessary to perform the following nuisance abatement tasks:

**a. Lot Clearing and Debris Removal**

- i. Removal of overgrown vegetation, including mowing, cutting, and trimming of grass, shrubs, and weeds to the following specifications:
  - Grass is to be neatly cut and mowed to the street edge.
  - Fence lines, trees, houses, etc. are to be weed wacked / trimmed.
  - Edging to be completed when needed.
- ii. Removal and disposal of garbage, litter, junk, tires, and debris.

**b. Trees – Removal / Trimming**

- i. All trees are to be trimmed up to seven feet (7') above grade and all bushes and shrubbery to be trimmed down to two and a half feet (2.5') above grade.
- ii. Tree removal is to be completed with the trunk cut level with the ground. Stump grinding is not required unless it is specified in the work order request and will be considered an extraordinary expense.

**c. Securing Structures / Pools**

- i. Secure vacant, abandoned, or unsafe structures as directed.
- ii. Use of materials and methods as directed by the Code Enforcement Officer. (i.e. Plywood vs. clear board)
- iii. Installation of temporary or permanent barriers to restrict access to unsafe or unsecured swimming pools.
- iv. Application of safety covers or fencing that complies with applicable codes and safety regulations.

**d. Graffiti Abatement**

- i. Removal or painting over graffiti on public or private properties, using approved methods and matching paint colors where possible.

**2. WORK ORDER PROCESS**

Work order requests (also referred to as “Specific Authorizations”) shall be provided to the Contractor by the City and shall include the following information:

- a. Services shall be requested through written requests for bid.
- b. Each request will specify the location and nature of services.

- i. The address and parcel number for the property to be addressed.
  - ii. A map of the location of the property, including the property line measurements. If needed, the map will be marked to show more specific details of the work to be performed.
  - iii. A description of the work required. Ex) Grass in excess of 18"; Trees/shrubs to be lifted and trimmed; Visible large debris; Tires; Secure structure – 2 doors and 4 windows.
  - iv. The name of the Code Officer responsible for the work order request and contact information.
- c. Response to the City's request for services shall not exceed seven (7) days from the time the request is initiated.
  - d. The Contractor should be on site, capable of starting the work, within three (3) days of acceptance of response.
  - e. The time required for completion of more extensive work will be established prior to the execution of a work order.

### **3. STANDARDS OF PERFORMANCE**

- a. Contractor shall complete all tasks in a timely, professional, and workmanlike manner. Unless specified differently in the request for bid, all work is to be completed within seven (7) days of bid acceptance.
- b. Delays due to weather, equipment malfunction, or similar are to be reported to the assigned Code Officer prior to the expiration of the approved work window. Certain delays may need to be approved by management.
- c. All work shall be subject to inspection and approval by the Code Enforcement Officer or Department Management.
- d. All debris, including all loose, broken, or cut branches, is to be removed by the Contractor daily. Disposal shall be done off the site and the Contractor shall pay all disposal fees.

### **4. INVOICING AND REPORTING**

- a. All invoices are to be submitted in a timely manner, no later than seven (7) days after the work has been completed.
- b. Invoices shall include detailed descriptions of services performed, including code case #, property address, date of service, and before/after photos.
- c. Supporting documentation for certain services, including disposal receipts, may be required for payment approval.

## **5. CONTRACTOR RESPONSIBILITIES**

- a. The Contractor is responsible for confirming they are working on property identified in the work order.
  - i. Familiarity with the St. Lucie County Property Appraiser's website is required.
  - ii. A measuring wheel or similar measuring device is required.
- b. Clear before and after photographs of each parcel, submitted electronically and accompanying the invoice.
  - i. Photos are to be date/time stamped.
  - ii. Before and after photos should be taken from the same spot providing the same view.
  - iii. A minimum of two (2) before and two (2) after photos must be submitted for each work order.
  - iv. Failure to provide clear before and after photos may result in non-payment of the invoice.
- c. If needed, the Contractor or a representative must be available to respond in person to code enforcement hearings resulting from action taken by the City in which the Contractor provided nuisance abatement services. The Contractor may provide supporting testimony regarding the abatement activities taken and to validate documents such as the required photographs and submitted invoices for service.
- d. Any damage(s) due to negligence or improper conduct of the Contractor occurring to such properties shall be immediately repaired at the expense of the Contractor to a condition equal to or better than that existing before such damage occurred.

**EXHIBIT "B"**  
**CONTRACTOR'S PROPOSAL**

## Letter of Transmittal

To whom it may concern,

*This letter will summarize in a brief and concise manner our understanding of the Scope of Work.*

*We at Mow 4 Less LLC have been servicing municipalities for many years. Our staff and management have decades of experience in grounds maintenance and property preservation. We are currently doing this type of work, so we have a clear and concise understanding of the City's requirements. Our reputation speaks for itself. We are committed to quality service which in turn produces an exceptional product. We are goals oriented. Meeting set deadlines are, are first priority. We strive for the innovation our craft.*

*Andrew Kissoon is the owner and operator. We look forward for the opportunity to continue serve you.*

Sincerely,



Mow 4 Less LLC.  
Andrew Kissoon, owner  
308 S. 30 St  
Fort Pierce FL. 34947  
772-201-7655

## ***Organizational Profile***

Mow 4 Less LLC. is a solely owned corporation by Andrew Kissoon. We are a family run business. Our staff includes field managers, team leaders and hands on ownership. Management and team leaders work together daily with staff, to produce a flawless product.

We have been managing and maintaining large projects for many years. And we have not lost or forfeited any project due to management, quality or lack of funding.

Andrew Kissoon manages and supervises all projects. Our primary work force is locals. This not only benefits our local economy, it also strengthens it. We employ on average 8-12 individuals year round.

We are steps above our competition by implementing our key management strategies.

The key components of our project management plan are as follows:

- \* *Project Objectives*
- \* *Schedule Management*
- \* *Cost Management*
- \* *Resource Management*
- \* *Communication Plan*
- \* *Procurement Management*
- \* *Project Organization*

We have been awarded and fulfilled several multi-million dollar contracts in and around the county throughout the years. And we have never filed for bankruptcy or hardships. We have the resources and cash flow to handle this project.

We are financially stable, with various streams of income. Below are some key points.

***Current cash flow:*** .Our monthly income and monthly expenses leave us with a surplus. Surplus funds each month are then allocated to various projects the following months.

***Net worth:*** The business is valued over several million dollars.

***Goals:*** As any business profitability and sustainability is what to strive for.

***Asset allocation:*** Includes but not limited to, lines of credit, short term loans and cash surplus.

# ANDREW KISSOON

308 S. 30 St. | Fort Pierce Fl. 34947 | 772-201-7655 | Andrewkissoon@aol.com

## OBJECTIVE

*Promote and implement effective property management practices.*

## SKILLS PROFILE

- *20 years of residential construction and property management*
- *Commercial Landscape maintenance Holder license #LC216453 Florida Dept. Of Agriculture*
- *Licensed Commercial fertilizer Applicator*
- *FDOT certified traffic maintenance operator*
- *Arborist*
- *Certified in the removal of Brazilian pepper, Tropical Soda apple*
- *Over ten years of experience in the landscaping industry*
- *Heavy Equipment operator*
- *Certified Handyman License St. Lucie County*

## EDUCATION

<i>High School of Graphic Communication Arts</i>	<i>Graduated 1991</i>
<i>New York City Technical College</i>	
<i>Associates Degree in Graphic Communications</i>	<i>Graduated 1995</i>
<i>Bachelors Degree in Arts</i>	<i>Graduated 1998</i>

## EMPLOYMENT HISTORY

<b>Owner, Mow4 Less Lawn Care LLC.</b>	2008— present
<i>Fort Pierce, Fl</i>	

- *Manage daily operations*
- *Scheduling and estimating of projects*
- *Bid procurement*
- *Maintenance and repair of equipment*
- *Employee training and staffing*

<b>Manager, First Choice Enterprises</b>	1994 — 2006
<i>New York, NY</i>	

- *Manage daily operations*
- *Employee scheduling*
- *Sales and service*
- *Equipment repair*



# City of Fort Pierce LOCAL BUSINESS TAX RECEIPT

Please post in a conspicuous place or keep on person.

<b>Business Name / Mailing Address:</b>	<b>Owner:</b>
MOW 4 LESS LAWN CARE LLC 308 S 30TH ST  FT PIERCE FL 34950	MOW 4 LESS LAWN CARE LLC

**Parcel ID/Business Location\*:** 2408-806-0008-000/8, 308 S 30TH ST

**\*This local business tax receipt is valid at this location only.**

<b>Date Issued</b>	<b>Expiration Date</b>	<b>Control Number</b>
November 30, 2023	September 30, 2024	0043527

The business stated above may be engaged in the following business, profession or occupation at the location above-described.

BTR #	Classification	Restrictions
24-00025572	LAWN SERVICE AND CARE	LAWN CARE - HOME OCCUPATION. MUST COMPLY SEC 22-63

<b>Tax Amount</b>	\$93.36
<b>New/Renewal Fee</b>	\$5.00
<b>Penalty</b>	\$14.00
<b>Total</b>	\$112.36

*Linda W Cox*

Linda W. Cox, City Clerk (SEAL)



THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE. This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and 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 receipt becomes null and void if business name, classification, ownership or address is changed.



THE SUNRISE CITY  
**FORT PIERCE**  
*Florida*

### ***Scope of Work***

We have read over the bid documents in its entirety and have the skills, resources, funding and man power to execute this contract. Our company has been doing this type of work for over a decade.

### ***Technical Approach***

*Duration- 1 day, (based on an average size lot)*

*Number of employees- minimum of 6*

*Skilled positions- Mowers- 2*

*Supervisor/Staff support/ Driver-1*

*Trimmers/weedeaters-2*

*Edgers /Blowers- 1*

*Trash/ Debris- 1 (more if needed)*

All trash on turf areas will be picked up before mowing. Mowing, weed eating and edging will be done simultaneously. After these tasks are completed the crew will clean up all serviced areas. Concluding with blowing and any residual trash removal. This is all based on ideal weather conditions.

### ***Technical Capabilities***

As a company we are technically capable managing this project. One of our main attributes is our low turnover rate. This ensuring tenured and competent staffing are employed permanently. Additionally this maintains our core workforce. In house and update training of company techniques, policy and procedures are continuously available for staff. The majority of our equipment is new, ensuring zero down time. Each staff member is proficient in specific and broad technical skills ensuring a high quality of service. A supervisor will be onsite delegating work and positions daily.

### ***Demonstrated Experience***

We have been servicing municipalities for many years. Our scheduling and management techniques allow us to stay on schedule and under budget. Quality control is our first priority. All of our staff monitor and maintain job awareness ensuring an excellent final product. Here's a brief list of satisfied customers.

*St. Lucie County Road and Bridge*

*St. Lucie County School District*

*St. Lucie County Bailing and Recycling*

*Fort Pierce Utilities Authorities*

*City Of Fort Pierce /Code Enforcement*

## ***Staffing Standards***

**Training-** All staff has a minimum of one year experience in grounds maintenance. We also educate when new techniques and procedures are available. We implement an employee training and development program that helps our employees become better at their jobs and overcome performance gaps that are based on lack of knowledge or skills. This can help us and our teams be more productive and obtain improved business outcomes, leading to a competitive advantage over other companies. In addition our employee training programs and development also helps with succession planning by helping to identify high-performing employees and then assisting those employees with the development of the knowledge and skills they need to advance into more senior roles.

**Monitoring-** All staff are monitored daily. On the job site a supervisor will observe and enforce safe working conditions, he will also ensuring a high quality of workmanship.

**Screening-** Staff is screened at the local level to meet company standards. We promote a drug free work place.

**Retained-** Our retention policy promotes career development, rewards and recognition (R&R), and flexible working arrangements have been put in place to offer a great employee experience. All of our staff is employed from the community. They are given equal opportunity to excel based on performance, attendance, punctuality and teamwork to name a few.

## ***Performance Monitoring***

What staff performance monitoring means to us. It is using specific methods to identify whether employees are completing their tasks effectively and to a high standard. It is essential to monitor employee performance to ensure that they are aligned with our goals and objectives.

An onsite supervisor will monitor daily activity. He will report to staff any discrepancies and oversights to get them rapidly resolved. Quality control is our number one goal.

Evaluation format as follows.

- 1- *Reviewing work, either total output or samples.*
- 2 -*Observing employee work activities.*
- 3 -*Reading reports, charts, time sheets, work records, or logs, etc.*
- 4 -*Self-reporting on progress by the employee.*
- 5 -*Surveying others, the public, or clients of the services.*
- 6 -*Noting and investigating complaints and commendations.*

**PROPOSAL PRICE SHEET**

Cost of Work shall cover all work to be performed by the Contractor under this section including all labor, supervision, equipment, machinery, tools, materials, transportation, insurance, and all other incidentals necessary to comply with the specifications required to perform nuisance abatement services requested by the City.

JOB TITLE	DESCRIPTION	PROPOSED PRICE (HOURLY)
Lot Clearing	Lift trees / remove underbrush / cut grass / trim bushes – per man hour.	\$ 35.00 per hr.
Junk / Debris Removal	Price per pound or per man hour.	\$ 35.00 per hr.
Tree Timming / Removal Services	Cost per tree or per man hour.	\$ 35.00 per hr.
Tire Disposal	Price per tire or per pound.	\$ 60.00 per 100lbs
Securing Vacant Structures	Windows and doors secured either with painted wood supplied by the vendor or with clear board provided by the City – per man hour.	\$ 65.00 per hr.
Mowing	Grass only / minor trash and debris – per man hour.	\$ 35.00 per hr.

The hourly rate is fully burdened to include all costs. No additional reimbursement expenses shall be billed.

Company: Mow 4 Less LLC.

Address: 308 S. 30 St.

City, State, Zip code: Fort Pierce FL 34947

Phone Number: 772-201-7655 Email: Mow4Less.AK@gmail.com

Authorized Signature: *Andrew Kissoon*

Printed Name: Andrew Kissoon

Title: owner Date: 9.23.24

EQUIPMENT 2024	COST	DEPRECIATED VALUE	PURCHASED CONDITION	Hours Of Use	Comments
John Deere WG36A (2019)	3600		NEW	75	
John Deere BC1324 (2020)	2160		NEW	10	
John Deere Z925A 54 (2022)	6500		USED	1400	
John Deere Z930M (2023)	13099.10		2023		
Dixie Chopper 44 (2015)	5600		NEW	204	
John Deere Z930M 60 (2023)	9800		New	68	
Toro Z master 61	7500		used	1200	
John Deere Z920(2023)	9200		new	605	
John Deere Z920(2020)	9200		new	766	
John Deere Z920(2023)	9200		new	550	
John Deere Z920(2018)	9200		new	805	
John Deere WH48A(2018)	4800		new	100	
John Deere 636 (2017)	8600		new	2	
Enclosed Trailer 7x20	6200		new		
John Deere 5075	28920		New		
7x16 Utility Trailer	2000		new		
Enclosed Trailer 7x18	4500		new		
18 x 6.10 Utility Trailer	2200		new		
7.5 x 12 Utility Trailer	1800		new		
Stihl Hedge Trimmer HL 90	439.95		NEW		
Stihl Hedge Trimmer HL 90	439.95		NEW		
Stihl Pole Saw HT 130	529.95		NEW		
Stihl Edger FC 90	349.95		NEW		
Stihl Edger FC 90	349.95		NEW		
Stihl Edger FC 90	349.95		NEW		
Stihl Edger FC 90	349.95		NEW		
Stihl Chain saw 192 TC	319.95		NEW		
Stihl Blower BG 55	149.95		NEW		
Stihl Trimmer FS 130	399.95		NEW		
Stihl Blower BG 86	249.95		NEW		
Stihl Blower BG 56	209.95		NEW		
Echo Trimmer GT 225	159.99		NEW		
Echo Trimmer GT 230	249.99		NEW		
Echo Edger 225	230.99		new		
Echo Hedge Trimmer HC-235	489.99		NEW		
Echo Hedge Trimmer HC-235	489.99		NEW		
Echo Hedge Trimmer SHC-225	359.99		new		
Echo Hedge Trimmer HC-152	289.99		NEW		
Echo Hedge Trimmer HC-165	469.99		new		
Echo CS310	212.98		new		
Echo CS330T	269.99		new		
Echo CS450	389.99		new		

Echo CS370	279.99		NEW		
Echo CS341	225		USED		
Echo SRM 225 Trimmer	219.99		NEW		
Echo SRM 225 Trimmer	160		USED		
Echo SRM 230 Trimmer	289.99		NEW		
Echo SRM 230 Trimmer	289.99		NEW		
Echo SRM 230 Trimmer	289.99		NEW		
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Echo SRM 230 Trimmer	289.99		NEW		
Echo SRM 230 Trimmer	289.99		NEW		
Echo SRM 266 Trimmer	309.99		NEW		
Echo SRM 266 Trimmer	250		USED		
Echo SRM 230 (2013)	289.99		NEW		
Echo Pas 266	299.99		NEW		
Echo Pas Pole saw	199.99		NEW		
Echo Blower PB 250	199.99		NEW		
Echo Pole Saw PPF210	250		USED		
Echo Edger PE- 266	349.99		NEW		
Echo Blower PB265	269.99		NEW		
Echo Blower PB 500	329.99		NEW		
Echo Blower PB 500	329.99		NEW		
Echo Blower PB755	369.99		new		
Echo Blower PB755	369.99		new		
Ford F250			2003		
Ford F150			2008		
GMC 3500			2004		
Ram 3500			2023		
Ford E350			2010		















05/10/2024  
16:10



05/10/2024  
16:10

## ***Additional Services***

We are a full service landscape management/ property preservation company. We specialize in neglected properties. Below is a list of some additional services we provide, but not limited too.

*Bush Hogging/ extreme mowing*

*Landscaping*

*Tree trimming, pruning, removal*

*Planting*

*Hurricane Cleanup*

*Pest control*

*Fertilization*

*Weed control*

*Beautification*

*Sod Installation*

*Garbage trash removal*

*Property securement*

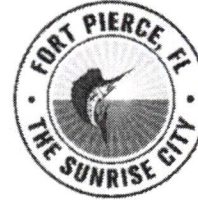
*Painting*

**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



**REQUEST FOR PROPOSALS  
and  
PROPOSER ACKNOWLEDGMENT**

Bid Writer: Madison White, 772-467- 3102

RFP No: 2024-048

Pre-Proposal Conference Date:  
N/A

RFP Title: NUISANCE ABATEMENT  
SERVICES (REBID)

Mandatory Pre-Proposal Location:  
N/A

RFP Opening Location:  
City of Ft. Pierce Purchasing Division  
Room 101  
100 North U.S. #1, 1st Floor  
Ft. Pierce, Florida 34950

RFP Due Date & Time:  
3:00 PM, MONDAY, SEPTEMBER 30, 2024

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

Proposer Name: Mow 4 Less LLC.

Mailing Address: 308 S. 30 St.

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.

X Andrew Kissoon  
Authorized Signature (Manual)

City, State, Zip Code:  
Fort Pierce FL 34947

Typed or Printed Name:  
Andrew Kissoon

Type of Entity (Select one):  
Corporation X  
Partnership \_\_\_\_\_  
Proprietorship \_\_\_\_\_

Title: owner

Incorporated in the State of: FL Year: 2013

Delivery in \_\_\_\_\_ days, ARO

Phone Number: 772-201-7655

Payment Terms: Net 30 Days

Fax Number: 772-595-6505

FEIN or SS Number: 46-2009882

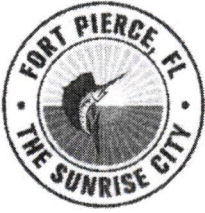
E-Mail Address: Mow 4 Less.AK@gmail.com

Local Business: X 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**



## DRUG FREE WORKPLACE FORM

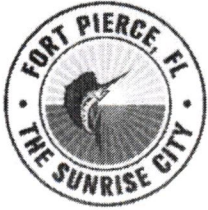
The undersigned vendor in accordance with Florida Statute 287.087 hereby certified that  
Mow 4 Less LLC. does:  
(Name of Business)

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.

  
Proposer's Signature

9.23.24  
Date



# NON-COLLUSION AFFIDAVIT FOR PRIME BIDDER

STATE OF Florida

COUNTY OF St. Lucie

Andrew Kissoon, being first duly sworn, deposes  
and says:

That he is owner  
(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.

Mow A Less LLC.  
(Firm Name)

By: [Signature]

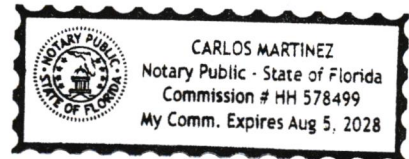
Title: owner

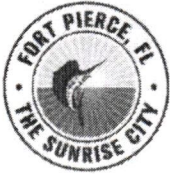
Subscribed and sworn to before me this 23  
day of September, 2024.

[Signature]  
Notary Public

My Commission expires: (Seal)

08/05/2028





**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.**

1. This sworn statement is submitted by City of Fort Pierce  
(Print name of the public entity).  
by Andrew Kissoon, owner  
(Print individual's name and title)  
for Mow 4 Less LLC.  
whose business address is 308 S. 30 St. Fort Pierce Fl. 34947  
(If applicable) its Federal Employer Identification Number (FEIN) is 46-2009882

(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.

2. 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.
3. 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.
4. I understand that an "affiliate" as defined in paragraph 287.133(1)(a), Florida Statutes, means:
- 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 convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

5. 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.
6. 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.)**

X 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, FLORIDA STATUTES, FOR CATEGORY TWO OR ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

  
(Signature)

9-23-24  
(Date)

STATE OF Florida

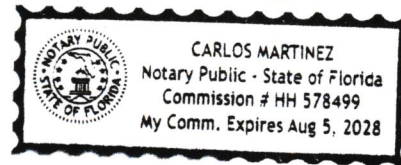
COUNTY OF St. Lucie

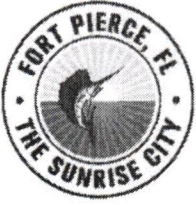
PERSONALLY APPEARED BEFORE ME, the undersigned authority Andrew Kissoon  
(Name of individual signing)

Who, after first being sworn by me, affixed his/her signature in the space provided above on this  
day 23 of September, 2024.

Carlos Martinez  
(NOTARY PUBLIC)

My Commission Expires: 08/05/2028





## CERTIFICATION REGARDING SCRUTINIZED COMPANIES LISTS

Respondent Name: <u>Mow 4 Less LLC.</u>		
Respondent's Authorized Representative Name and Title: _____ <u>Andrew KISSOON, owner</u>		
Address: <u>308 S. 30 St.</u>		
City: <u>Fort Pierce</u>	State: <u>Fl.</u>	Zip: <u>34986</u>
Phone Number: <u>772-201-7655</u>	Respondent FEIN: <u>46-2009882</u>	
Email Address: <u>Mow4Less.AK@gmail.com</u>		

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 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: Mow 4 Less LLC.  
Authorized Representative's Name and Title: Andrew KISSOON, owner  
Address: 308 S. 30 St.  
City: Fort Pierce State: Fl. Zip Code: 34947  
Phone Number: 772-201-7655 Email Address: Mow4Less.AK@gmail.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:  Andrew Kisson, owner 9-23-24  
Authorized Signature Printed Name and Title Date

STATE OF FLORIDA  
COUNTY OF St. Lucie

Sworn (or affirmed) and subscribed before me by means of

physical presence or  online notarization

this 23 day of September, 2024 by Andrew Kissoon, who is

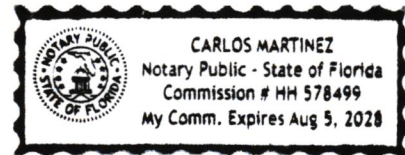
personally known or

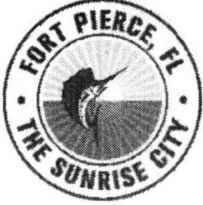
produced identification (ID produced: FL Driver License).

Notary Public Signature: [Signature] (Seal)

Print Name: Carlos Martinez

My Commission Expires: 08/05/2028





# E-VERIFY AFFIRMATION STATEMENT

## Description: Nuisance Abatement Services (Rebid)

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: Mow 4 LESS LLC.

Authorized Company Person's Signature: Andrew Kissoon

Authorized Company Person's Title: owner

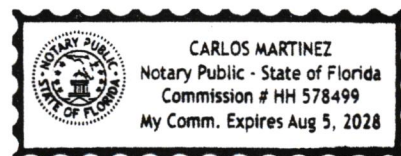
Date: 9.23-24

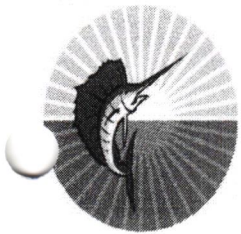
STATE OF FLORIDA  
COUNTY OF St. Lucie

Sworn (or affirmed) and subscribed before me by means of  physical presence or  online notarization this 23 day of September, 2024 by Andrew Kissoon, who is  personally known or  produced identification (ID produced: FL Driver License).

Signature: [Handwritten Signature] (Seal)  
NOTARY PUBLIC

My Commission Expires: 08/05/2028





THE SUNRISE CITY  
**FORT PIERCE**  
PURCHASING  
DEPARTMENT

**FORT PIERCE**  
*Florida*

## REFERENCES

### RFP NO. 2024-048 NUISANCE ABATEMENT SERVICES

Contact Person & Title	Dereck Moore
Email Address	MooreDe@StLucieco.org
Phone No.	772-267-0907
Company Name	St. Lucie County
Mailing Address	3071 Oleander Ave.
City, State, Zip	Fort Pierce Fl. 34982
Type of commercial work contracted	Mowing
Contact Person & Title	Joel Spades
Email Address	Jspades@FPUA.com
Phone No.	772-579-0916
Company Name	FPUA
Mailing Address	500 Boston Ave
City, State, Zip	Fort Pierce Fl. 34950
Type of commercial work contracted	Grounds Maintenance

## CITY OF FORT PIERCE CHECKLIST

This checklist is provided to assist each Proposer in the preparation of their bid response. Included in this checklist are important requirements, which is the responsibility of each Proposer 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 Proposer to read and comply with the Request for Qualifications in its entirety.

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

	YES	NO
Is Request for Qualifications 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 each Addendum (when issued) signed and included?	✓	
Have you checked your proposal for proper organization, tabs are correct?	✓	
Are you in compliance with the page limitations?	✓	
<b>Hard Copy Submissions.</b> Confirmation of one (1) original and one (1) copy on USB Drive.	✓	
Did you submit your proposal electronically?		✓
Have you made sure your corporate address matches your Sunbiz information ?	✓	
Are you registered on Demandstar to received addendums	✓	
Have all areas of the RFP forms and related documents been signed off by and authorized agent of the company and / or witnessed / notarized where applicable?	✓	

PLEASE SIGN AND RETURN WITH BID \_\_\_\_\_

*[Handwritten Signature]*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/27/2023

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 Agrillo Insurance Agency  49 SW Monterey Rd. Stuart, Fl. 34994	CONTACT NAME: Anthony Agrillo	
	PHONE (A/C, No, Ext): 772-287-1560	FAX (A/C, No):
	E-MAIL ADDRESS: tony@agrilloins.com	
INSURED  MOW 4 LESS LAWN CARE LLC  308 S. 30TH STREET Fort Pierce, Fl. 34957	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Burlington Insurance Company	NAIC #: 23620
	INSURER B: Progressive Express Ins.	10193
	INSURER C: Florida Citrus, Business & Industries Fund (FCBI)	31259
	INSURER D:	
	INSURER E:	
	INSURER F:	

**COVERAGES**      **CERTIFICATE NUMBER:** 26-19-8-1      **REVISION NUMBER:** updated Auto, WC, GL

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

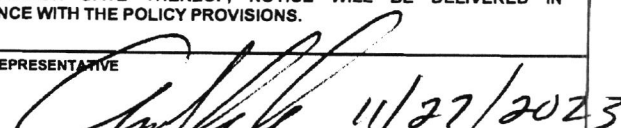
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		164B567585	09/26/2023	09/26/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		02484203-10	11/15/2023	11/15/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y    N/A	10664799-2023	10/04/2023	10/04/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

Lawn maintenance, Tree trimming from the ground-up and spraying.

1. As respect to Insured's General Liability (GL) Insurance # 164B567585 policy terms and conditions; it includes the Blanket Additional Insured; to the benefit of said Certificate Holder per written agreement. See attached Burlington Insurance endorsement terms & conditions (form # CG 20 33 12 19) .

**CERTIFICATE HOLDER****CANCELLATION**

City of Fort Pierce  P.O. Box 1480 Fort Pierce, FL 34994	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  11/27/2023
---	--

# Request for Taxpayer Identification Number and Certification

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

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

Print or type.  
 See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Mow 4 Less LLC.</b>	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <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  <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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 <b>not</b> 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) ▶	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
<b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>308 S. 30 St.</b>	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code <b>Fort Pierce Fl. 34947</b>	
<b>7</b> List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

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

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

<b>Social security number</b>															
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<b>or</b>															
<b>Employer identification number</b>															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">4</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">6</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">-</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">2</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">0</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">0</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">9</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">8</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">8</td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">2</td> </tr> </table>	4	6	-	2	0	0	9	8	8	2					
4	6	-	2	0	0	9	8	8	2						

### Part II Certification

Under penalties of perjury, I certify that:

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

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

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>5-1-24</b>
------------------	----------------------------	----------------------

### General Instructions

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

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

### Purpose of Form

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

- Form 1099-INT (interest earned or paid)

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

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

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



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/16/2025

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

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

<b>PRODUCER</b> Agrillo Insurance Agency  49 SW Monterey Rd. Stuart, Fl. 34994	<b>CONTACT NAME:</b> Anthony Agrillo <b>PHONE (A/C No. Ext):</b> 772-287-1560 <b>E-MAIL ADDRESS:</b> tony@agrilloins.com	<b>FAX (A/C. No.):</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b>  MOW 4 LESS LAWN CARE LLC  308 S. 30TH STREET Fort Pierce, Fl. 34957	<b>INSURER A:</b> Western World Insurance Co.	<b>NAIC #</b> 13196
	<b>INSURER B:</b> Progressive Express Ins.	10193
	<b>INSURER C:</b> Florida Citrus, Business & Industries Fund (FCBI)	31259
	<b>INSURER D:</b> Evanston Insurance Company	35378
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

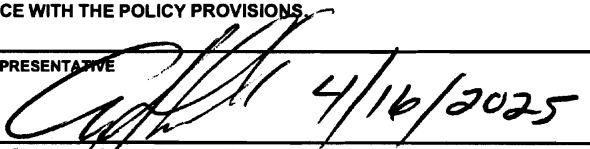
**COVERAGES**                      **CERTIFICATE NUMBER:** 39-26-19-08-01                      **REVISION NUMBER:** update Liab, Auto WC

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		NNP6205130	04/07/2025	04/07/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$	
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY		02484203-11	11/15/2024	11/15/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$	
C	<input checked="" type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	10664799-2024	10/04/2024	10/04/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Pollution Liability		CPLMOL130663	04/07/2025	04/07/2026	Combined Single Lim 1,000,000  Deductible \$10,000	

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

Lawn maintenance; no tree trimming :Project Info.: Bid No. 2025-020 - FPRA Properties Lawn Mowing and Maintenance  
1.As respect to the Insured's General Liability (GL) Insurance policy# NNP6205130 terms, definitions & exclusions; it includes the Additional Insured (form #s CG 2010 04 13 & CG 20 33 04 13), Trans of Rights Form # CG 24 04 05 09; Primary & Noncontributory form# CG 20 01 04 13, WW Projects form# CG 2503 0509 and 30 days Notice of Cancellation form # WW468. See the attached Western World Insurance endorsement terms & conditions forms - ((form # WW 180),( form # CG 20 33 12 19),( form # CG 24 04 05 09) , ( form # CG 20 01 04 13), ( form# CG 2503 0509) and ( form # WW 468 )) .  
See the attached Mow 4 Less Cert # 39 dated 04/16/25 form # 3101 (2012/02) page 2-Insured's Worker's Comp & Auto Insurance endorsements

<b>CERTIFICATE HOLDER</b>  City of Fort Pierce and its members, officials, officers and employees. P.O Box 1480 Fort Pierce, FL 34954-1480	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  4/16/2025
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# ADDITIONAL REMARKS SCHEDULE

<b>Intermediary</b> Agency -Agrillo Insurance Agency	<b>Insured</b> MOW 4 LESS LAWN CARE LLC
<b>Policy Number</b> see Additional Remarks- below	308 S. 30TH STREET , Fort Pierce,FL.34957
<b>Insurer</b> See dated 04/16/2025 Cert acord 25 page 1- Insurance carriers	<b>Effective Date:</b> 04-16-2025

**ADDITIONAL REMARKS**

**This Additional Remarks form is a schedule to ACORD form,**

**Form Number:** 25      **Form Title:** Mow 4 Less\_39-26-19-08-01Cert 041625 City of Fort Pierce

Project Info.: Bid No. 2025-020 - FPRA Properties Lawn Mowing and Maintenance

2. As respect to the Insured's Workers' Comp.(WC) policy #10664799-2024 terms, definitions & exclusions; it includes a Blanket Waiver of Subrogation endorsement; an executed written agreement prior to loss . See attached FCBI-(WC) terms & conditions-Form #WC 00 03 13 (ED.4-84).

3. As respect to the Insured's Auto Insurance policy # 02484203-11 terms, definitions and exclusions; it includes the Blanket Additional Insured and Waiver of Subrogation endorsements; an executed written agreement prior to loss. See attached Progressive Insurance endorsement terms & conditions (Additional Insureds (Form 2366 (02/11)) & Waiver of subrogation (Form 2367 (06/10)).

We will endeavor to provide 30 days notice of cancellation to the certificate holder, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
City of Ft Pierce Its members, official, officers and employees	PO Box 1480, Ft Pierce, FL 34994
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. Section II - Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III - Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED - OWNERS, LESSEES OR  
CONTRACTORS - AUTOMATIC STATUS WHEN  
REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**A. Section II - Who Is An Insured** is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured.

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
  - a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
  - b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.

2. "Bodily injury" or "property damage" occurring after:
- a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
  - b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III - Limits Of Insurance:**

The most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement you have entered into with the additional insured; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**PRIMARY AND NONCONTRIBUTORY –  
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

**Primary And Noncontributory Insurance**

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

**(1)** The additional insured is a Named Insured under such other insurance; and

**(2)** You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**DESIGNATED CONSTRUCTION PROJECT(S)  
GENERAL AGGREGATE LIMIT**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

<p><b>Designated Construction Project(s):</b> Lawn Care</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

- A.** For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section **I** - Coverage **A**, and for all medical expenses caused by accidents under Section **I** - Coverage **C**, which can be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:
  - 1.** A separate Designated Construction Project General Aggregate Limit applies to each designated construction project, and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.
  - 2.** The Designated Construction Project General Aggregate Limit is the most we will pay for the sum of all damages under Coverage **A**, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard", and for medical expenses under Coverage **C** regardless of the number of:
    - a.** Insureds;
    - b.** Claims made or "suits" brought; or
    - c.** Persons or organizations making claims or bringing "suits".
- 3.** Any payments made under Coverage **A** for damages or under Coverage **C** for medical expenses shall reduce the Designated Construction Project General Aggregate Limit for that designated construction project. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Designated Construction Project General Aggregate Limit for any other designated construction project shown in the Schedule above.
- 4.** The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expense continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Designated Construction Project General Aggregate Limit.

- B.** For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section **I** - Coverage **A**, and for all medical expenses caused by accidents under Section **I** - Coverage **C**, which cannot be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:
- 1.** Any payments made under Coverage **A** for damages or under Coverage **C** for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products-completed Operations Aggregate Limit, whichever is applicable; and
  - 2.** Such payments shall not reduce any Designated Construction Project General Aggregate Limit.
- C.** When coverage for liability arising out of the "products-completed operations hazard" is provided, any payments for damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard" will reduce the Products-completed Operations Aggregate Limit, and not reduce the General Aggregate Limit nor the Designated Construction Project General Aggregate Limit.
- D.** If the applicable designated construction project has been abandoned, delayed, or abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the project will still be deemed to be the same construction project.
- E.** The provisions of Section **III** - Limits Of Insurance not otherwise modified by this endorsement shall continue to apply as stipulated.

## **WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

### **SCHEDULE**

<b>Name Of Person Or Organization:</b>
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights Of Recovery Against Others To Us** of **Section IV - Conditions**:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

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**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

**Schedule**

All person or organizations that, in a written contract executed by both parties prior to the date of injury covered by this policy, require you to obtain this agreement with us.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

**(The Information below is required only when this endorsement is issued subsequent to preparation of the policy.)**

Endorsement Effective Date: 1/15/2025      Policy No. 10664799-2024      Endorsement No.

Policy Effective Dates: 10/04/2024 - 10/04/2025      Premium \$

Insured: MOW 4 LESS LAWN CARE LLC

Carrier Name / Code: Florida Citrus, Business & Industries Fund

WC 00 03 13

(Ed. 4-84)

Countersigned by \_\_\_\_\_

Form 2366 (02/11) M\_CL

### **Blanket Additional Insured Endorsement**

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This endorsement modifies insurance provided by the Commercial Auto Policy, Motor Truck Cargo Legal Liability Coverage Endorsement, and/or Commercial General Liability Coverage Endorsement, as appears on the **declarations page**. All terms and conditions of the policy apply unless modified by this endorsement.

If **you** pay the fee for this Blanket Additional Insured Endorsement, **we** agree with **you** that any person or organization with whom **you** have executed a written agreement prior to any **loss** is added as an additional **insured** with respect to such liability coverage as is afforded by the policy, but this insurance applies to such additional **insured** only as a person or organization liable for **your** operations and then only to the extent of that liability. This endorsement does not apply to acts, omissions, products, work, or operations of the additional **insured**.

Regardless of the provisions of paragraph a. and b. of the "Other Insurance" clause of this policy, if the person or organization with whom **you** have executed a written agreement has other insurance under which it is the first named **insured** and that insurance also applies, then this insurance is primary to and non-contributory with that other insurance when the written contract or agreement between **you** and that person or organization, signed and executed by **you** before the **bodily injury** or **property damage** occurs and in effect during the policy period, requires this insurance to be primary and non-contributory.

In no way does this endorsement waive the "Other Insurance" clause of the policy, nor make this policy primary to third parties hired by the **insured** to perform work for the **insured** or on the **insured's** behalf.

**ALL OTHER TERMS, LIMITS, AND PROVISIONS OF THE POLICY REMAIN UNCHANGED.**

Form 2367 (06/10)M\_CL

### **Blanket Waiver of Subrogation Endorsement**

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This endorsement modifies insurance provided by the Commercial Auto Policy, Motor Truck Cargo Legal Liability Coverage Endorsement, and/or Commercial General Liability Coverage Endorsement, as appears on the **declarations page**. All terms and conditions of the policy apply unless modified by this endorsement.

If **you** pay the fee for this Blanket Waiver of Subrogation Endorsement, **we** agree to waive any and all subrogation claims against any person or organization with whom a written waiver agreement has been executed by the named insured, as required by written contract, prior to the occurrence of any **loss**.

**ALL OTHER TERMS, LIMITS AND PROVISIONS OF THE POLICY REMAIN UNCHANGED.**