

**DELIVER TO:**

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

**MAIL TO:**

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



**INVITATION TO BID  
 and  
 BIDDER ACKNOWLEDGMENT**

**Bid Writer:** Latonya Hubbard, 772-467-3102

**Bid No:** 2026-017

**Pre-Bid Conference:**

N/A

**Bid Title:** FORT PIERCE REDEVELOPMENT  
 AGENCY TRASH AND RECYCLING  
 RECEPTACLES – DOWNTOWN, JETTY PARK,  
 AND RIVER WALK

**Mandatory Site-Visit Location:**

N/A

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

**Bid Due Date & Time:**

3:00 PM, TUESDAY, DECEMBER 16, 2025

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.

**Bidder Name:**

Big Belly Solar LLC

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

**Mailing Address:**

150 A Street, Suite 103

X Eric Hunt Jr

Authorized Signature (Manual)

**City, State, Zip Code:**

Needham, MA 02494

**Typed or Printed Name:** Eric Hunt, Jr.

**Type of Entity (Select one):**

Corporation \_\_\_\_\_

Partnership           X          

Proprietorship \_\_\_\_\_

**Title:** VP of Finance / Treasurer

**Incorporated in the State of:** DE (Organized) **Year:** 4/2/2003

**Delivery in** 120 **days, ARO**

**Phone Number:** 617-61B-6BB1

**Payment Terms:** Net 30 Days

**Fax Number:**

**FEIN or SS Number:** 84-3362657

**E-Mail Address:** jsherman@bigbelly.com

**Local Business:**   Y   X   N **MWBE:**   Y   X   N

**Bid Security is attached, when required, in the amount of \$** \_\_\_\_\_

F.O.B. DESTINATION

**If returning as a "No Bid" state reason:**

**THIS PAGE MUST BE COMPLETED AND RETURNED WITH YOUR BID**



## CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension (1986) and Executive Order 12689, Debarment and Suspension (1989) at 2 C.F.R. Part 180

- (1). The prospective recipient of Federal assistance funds certifies, by Response, that it is in compliance with the requirements of 2 C.F.R. Part 180 and that neither it, its principals, nor its subcontractors are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
  
- (2) Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this Response.

### ATTESTATION

By signing this report, I certify to the best of my knowledge and belief that the foregoing is true, complete, and accurate. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Sections 3729-3730 and 3801-3812).

#### Company Name

Big Belly Solar, LLC

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#### Name and Title of Authorized Representative

Eric Hunt, Jr. / VP of Finance and Treasurer

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Signed by:

*Eric Hunt Jr*

858DC688D339484...

**Signature**

12/16/2025

**Date**




# DRUG~FREE WORKPLACE FORM

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

Big Belly Solar, 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.

Signed by:  
  
 \_\_\_\_\_  
855DC886D339484...  
*Proposer's Signature*

12/16/2025  
 \_\_\_\_\_  
*Date*

**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 Eric Hunt, Jr. / VP of Finance and Treasurer  
(Print individual's name and title)

for Big Belly Solar, LLC

whose business address is 150 A Street, Ste 103, Needham, MA 02494

(If applicable) its Federal Employer Identification Number (FEIN) is 84-3362657

(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. A predecessor or successor of a person convicted of a public entity crime: or

An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls

another person. A person who knowingly enters into a joint venture with a person who has been

b. convicted of a public entity crime in Florida during the preceding 36 months shall

c. be considered an affiliate. I understand that a "person" as defined in Paragraph 287.133(1)(c), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

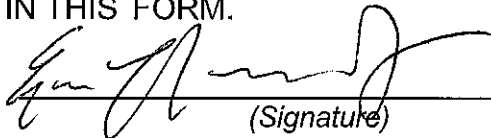
5. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(Please indicate which statement applies.)**

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)  
12.16.2025  
\_\_\_\_\_  
(Date)

STATE OF Massachusetts

COUNTY OF Norfolk

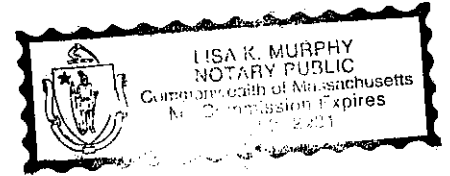
PERSONALLY APPEARED BEFORE ME, the undersigned authority Eric Hunt, Jr.  
(Name of individual signing)

Who, after first being sworn by me, affixed his/her signature in the space provided above on this  
day 16<sup>th</sup> of December, 2025.

*Lisa K. Murphy*

(NOTARY PUBLIC)

My Commission Expires: 4-3-2028





### E-VERIFY AFFIRMATION STATEMENT

**Description: FORT PIERCE REDEVELOPMENT AGENCY TRASH AND RECYCLING  
RECEPTACLES – DOWNTOWN, JETTY PARK AND RIVER WALK**

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: Big Belly Solar, LLC

Authorized Company Person's Signature:

Authorized Company Person's Title: VP of Finance and Treasurer

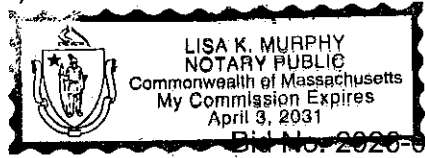
Date: 12-16-2025

STATE OF MASSACHUSETTS  
COUNTY OF NORFOLK

Sworn (or affirmed) and subscribed before me by means of  physical presence or  online notarization this 16<sup>th</sup> day of December, 2025 by Eric Hunt, Jr., who is  personally known or  produced identification (ID produced: \_\_\_\_\_).

Signature:  (Seal)

NOTARY PUBLIC  
My Commission Expires: 4-3-31  
E-Verify Affirmations Statement





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

Vendor name: Big Belly Solar, LLC

Authorized Representative's Name and Title: Eric Hunt, Jr. / VP of Finance and Treasurer

Address: 150 A Street, Ste 103

City: Needham State: NY Zip Code: 02494

Phone Number: 888.820.0300 Email Address: Contracts@bigbelly.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: \_\_\_\_\_ Eric Hunt, Jr. / VP of Finance and Treasurer

Authorized Signature	Printed Name and Title	Date
STATE OF MASSACHUSETTS		
COUNTY OF <u>NORFOLK</u>		

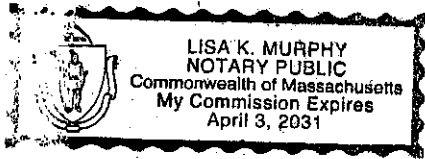
Sworn (or affirmed) and subscribed before me by means of  physical presence or  online notarization

this 16 day of December, 2026 by Eric Hunt, Jr., who is

personally known or  
 produced identification (ID produced: \_\_\_\_\_).

Notary Public Signature: Lisa K. Murphy (Seal)

Print Name: LISA K. MURPHY My Commission Expires: 04.03.2031





## REFERENCES

BID NO. 2026-017

### FORT PIERCE REDEVELOPMENT AGENCY TRASH AND RECYCLING RECEPTACLES – DOWNTOWN, JETTY PARK AND RIVER WALK

Contact Person & Title	Mr. Craig Clay / Deputy City Manager
Email Address	cclay@miamigardens-fl.gov
Phone No.	305.622.8000 x 2702
Company Name	City of Miami Gardens
Mailing Address	1515 NW 167th St.
City, State, Zip	Miami Gardens, FL 33169
Type of commercial work contracted	Current Bigbelly User
Contact Person & Title	Bobby Khan / Fiber Enterprise Mgr.
Email Address	akhan@mywinterhaven.com
Phone No.	407.463.8345
Company Name	City of Winter Haven
Mailing Address	451 Third St. NW
City, State, Zip	Winter Haven, FL 33881
Type of commercial work contracted	Current Bigbelly User

Form **W-9**  
(Rev. March 2024)  
Department of the Treasury  
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

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

Give form to the  
requester. Do not  
send to the IRS.

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) <b>BIG BELLY SOLAR LLC</b>	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>P</b> <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  <i>(Applies to accounts maintained outside the United States.)</i>
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. <b>150 A STREET, SUITE 103</b>		Requester's name and address (optional)
6 City, state, and ZIP code <b>NEEDHAM, MA 02494</b>		
7 List account number(s) here (optional)		

## Part I Taxpayer Identification Number (TIN)

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

Social security number	
or	
Employer identification number	
8 4	3 3 6 2 6 5 7


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

## Part II Certification

Under penalties of perjury, I certify that:

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

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

Sign Here	Signature of U.S. person 	Date <b>6.23.25</b>
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## General Instructions

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

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

## What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



# BID RESPONSE FORM



<b>Bid Item</b>	<b>FORT PIERCE REDEVELOPMENT AGENCY TRASH AND RECYCLING RECEPTACLES – DOWNTOWN , JETTY PARK AND RIVER WALK</b>		
<b>Bid Number</b>	<b>2026-017</b>	<b>Due Date &amp; Time</b>	<b>3:00 PM, TUESDAY, DECEMBER 16, 2025</b>

The Offeror hereby submits a bid in accordance with the specifications provided. The Offeror agrees to furnish all items and/or services to the City of Fort Pierce at the locations designated, in full compliance with the specifications, and at the prices listed below:

DESCRIPTION	QUANTITY	PER UNIT	TOTAL COST
Greater than 45-gallon, fully enclosed, full graphic wrap, non-powered	9	\$2622.28	\$ 23,600.52
Greater than 45-gallon, fully enclosed, front & back graphic wrap, non-powered	20	\$2317.33	\$ 46,346.60
Greater than 45-gallon, fully enclosed, front & back graphic wrap with side inserts, non-powered	9	\$2627.03	\$ 23,643.27
150-gallon, fully enclosed, full graphic wrap, solar-powered compactors with fullness indicator	32	\$5300.90	\$ 169,628.80
150-gallon, fully enclosed, front & back graphic wrap with inserts on the side, solar-powered compactors with fullness indicator	19	\$5305.65	\$ 100,807.35
Double Station – waste and recycling combo, 150 Gallon, fully enclosed, full graphic wrap, solar powered compactor with fullness indicator	2 – waste 2 - recycling	\$8211.03	\$ 16,422.06
<b>Total</b>	<b>93</b>		<b>\$380,448.60</b>

**Bid Response Form**  
**Page 2 of 2**

The Bidder hereby acknowledges receipt of the following addenda:

ADDENDUM NO.	ADDENDUM DATE
1	Dec 12, 2025

Vendor: Big Belly Solar, LLC

Address: 150 A Street, Ste. 103

City, State, Zip Code: Needham, MA 02494

Email Address: contracts@bigbelly.com

Typed Name <sup>Printed by:</sup> Eric Hunt, Jr.

Signature *Eric Hunt Jr* Date 12/16/2025

Telephone # 888.820.0300 Fax #  

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

Remit To: \_\_\_\_\_

\_\_\_\_\_

Check block below for applicable minority indicator:

MINORITY	CHECK BOX
Asian Indian	
Black	
Asian Pacific	
Hispanic	
Native American	
Small Business	
Women Owned	
Small Disadvantage Business	

**December 12, 2025**



**CITY FORT PIERCE**

**FORT PIERCE REDEVELOPMENT AGENCY TRASH AND RECYCLING  
RECEPTABLES – DOWNTOWN, JETTY PARK, AND RIVER WALK**

**ADDENDUM NO. 1**

The purpose of this addendum is to respond to questions submitted by potential bidders for clarification of the bid specifications:

1. **Question:** We are interested in submitting a bid on this bid for Trash and Recycling Receptables however on page 20 it says the products must be manufactured in the US. Ours are not manufactured in the US so I'm wondering if that requirement can be changed so we can submit a bid.

**Answer:** We prefer to maintain the requirement that the receptacles be manufactured in the United States. U.S. manufactured products generally offer more reliable quality and durability and allow us to access timely warranty service, replacement parts, and customer support. Sourcing domestically also helps minimize shipping delays and supply chain disruptions, which is important for maintaining project schedules.

2. **Question:** I could not find when the purchase order would be sent out and paid by the city? I know the city will front the money for necessary insurance if need be however I'm trying to figure out if I need the capital to purchase all the materials and installation fees beforehand and then the city pay the bill afterwards, or if I send the city a bill and they pay it then I order all the materials and get everything completed?

**Answer:** The city will not front for any money , including for insurance. The city will pay for the receptables directly, and we expect them to be installed promptly.

3. **Question:** Page 8 clause 24, Patents and Royalties need a clause that protects Bidder from copyright infringement for any wrap designs requested by the City.

**Answer:** If the City provides any artwork, images, logos, wrap designs, or other graphic materials to be used in the production of any required work, the City shall be solely responsible for ensuring that such materials do not infringe on any copyright, trademark, or other intellectual property rights. The Bidder shall not be held liable for copyright infringement arising from the City's requested designs.

**The Bidder's responsibility for copyright compliance applies only to original artwork or designs created directly by the Bidder.**

4. **Question:** Page 10 Clause #35, Cooperative Purchasing – is any governmental purchasing authority defined as any FLORIDA governmental purchasing authority? Or can the governmental purchasing authority be from a different state?

**Answer:** Yes, that agency can be from another state.

5. **Question:** Page 21 clause #8, Business Tax Receipt. What is this? There is no such license.

**Answer:** In the state of Florida a Business Tax Receipt, sometimes referred to as an “Occupational License”, a local license issued by a city or county that gives a business the authority to operate within that jurisdiction.

**Please provide, with your submittal, a copy of the license required to operate as a business in your jurisdiction, renewed annually.**

6. **Question:** Page 22 clause #14 Licensing – What license are they looking for? Sec. of State registration?

**Answer:** All bidders must be properly licensed by the State of Florida and all other authorities having jurisdiction. Copies of all such licenses and/or permits are to be submitted with bid. Failure to submit copies of such may lead to bid rejection.

7. **Question:** Could you please confirm that delivery address for the units.

**Answer:** The delivery will be at the Public Works Compound, 52 Savannah Road, Fort Pierce, FL 34982.

8. **Question:** Are there any special delivery requirements: Liftgate Needed, Appointment, Specific Delivery Hours, etc.

**Answer:** Everything would be coordinated with the Public Works Facilities Manager, Rick Stauffer. A delivery date will be needed once we select the bidder, delivery hours should be between 8am to 5pm, liftgate might be needed.

9. **Question:** Is there appropriate space for 93 pallets once the truck(s) have been offloaded?

**Answer:** Yes, at the Public Works compound.

**Correction to Item #7 on Page 18**

Item #7 contains a typographical error. The corrected language is provided below and should be noted:

**Certificate of Use (Pass/Fail)**

Effective July 1, 2024, the City adopted Ordinance 24-019 amending Chapter 22. This ordinance removed the requirement for a Business Tax Receipt and replaced it with a mandatory **Certificate of Use**. A Certificate of Use is required for all businesses within the City limits, including those occupying commercial locations, home-based businesses, and non-profit organizations. **If your business or non-profit organization is located within the City of Fort Pierce city limits, you must include a copy of your Certificate of Use with your submittal.**

All other conditions of this bid remain the same.

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

Signature: Signed by:  
*Eric Hunt Jr*  
856DC686D339484... \_\_\_\_\_  
Manual

Signature: Eric Hunt, Jr. \_\_\_\_\_  
Typed or Printed

Company Name: Big Belly Solar, LLC \_\_\_\_\_

Address: 150 A Street, Ste. 103 \_\_\_\_\_  
Needham, MA 02494 \_\_\_\_\_

Date: 12/16/2025 \_\_\_\_\_

/gc



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## Detail by Entity Name

Foreign Limited Liability Company  
BIG BELLY SOLAR, LLC

### Filing Information

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<b>State</b>	DE
<b>Status</b>	ACTIVE

### Principal Address

150 A STREET, #103  
NEEDHAM, MA 02494

### Mailing Address

150 A STREET, #103  
NEEDHAM, MA 02494

### Registered Agent Name & Address

REGISTERED AGENT SOLUTIONS, INC  
2894 REMINGTON GREEN LN., STE A  
TALLAHASSEE, FL 32308

### Authorized Person(s) Detail

#### **Name & Address**

Title President

PHILLIPS, BRIAN  
150 A STREET, #103  
NEEDHAM, MA 02494

Title CEO

FELDT, RICHARD  
150 A STREET, #103  
NEEDHAM, MA 02494

Title Treasurer

HUNT, JR., ERIC  
150 A STREET, #103  
NEEDHAM, MA 02494

**Annual Reports**

<b>Report Year</b>	<b>Filed Date</b>
2024	04/03/2024
2025	04/07/2025

**Document Images**

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<a href="#">07/05/2023 -- Foreign Limited</a>	<a href="#">View image in PDF format</a>





**ADDITIONAL REMARKS SCHEDULE**

AGENCY <b>HUB International New England</b>		License # <b>1780862</b>	NAMED INSURED <b>Big Belly Solar LLC</b> 150 A Street, Suite 103 Needham, MA 02494
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Description of Operations/Locations/Vehicles:**  
policy provisions, if requirement is contained in written contract with the named insured and executed prior to a loss/claim/incident. Waiver of Subrogation applies to General Liability and Workers Compensation in favor of the certificate holder The City of Fort Pierce, and their respective members, officials, officers and employees if required by written contract.



