

TK Elevator Corporation
Attn: Matt Ellinor
850 Blountstown Street
Tallahassee, FL 32303

Leon County Research and Development Authority
Attn: Ron Miller
2051 E. Paul Dirac Drive, Suite 100
Tallahassee, FL 32312
rmiller@inn-park.com

**PROPOSAL FOR ELEVATOR MODERNIZATION AT INNOVATION PARK,
August 23, 2022, 1:00 PM**

Due to pandemic restricted office hours, hand-delivered Proposals will only be accepted on the day of the Submission Deadline after 9:00am and before 1:00pm, or by appointment only if on days prior to the Submission Deadline. Please email rmiller@inn-park.com to make an appointment.

ORIGINAL



TK Elevator Corporation, 850 Blountstown St, Tallahassee FL 32304

Tab 1 – Title Page

8/8/2022

Ron Miller
Stephanie Shoulet
Leon County Research and Development Authority
2051 E Paul Dirac Dr, Suite 100 Tallahassee, FL 32312

Re: RFP Number 22-03: Elevator Modernization – Leon County Research and Development Authority

Dear Mr. Ron Miller:

We are thankful for this opportunity to provide a bid.

The name of the proposing Proposer is Matt Ellinor at 850-528-7590.

His email address is matt.ellinor@tkelevator.com and Morgan Sherwood at 850-524-3361.

My email address is morgan.sherwood@tkelevator.com.

Sincerely,

A handwritten signature in blue ink that reads 'Morgan Sherwood'.

Morgan Sherwood
Account Representative
TK Elevator Corporation

850-524-3361
Morgan.Sherwood@tkelevator.com



*****24/7 Service Request Line 850-576-0161
or email FloridaDispatch@tkelevator.com**

• Account Manager	Morgan Sherwood	850-524-3361
• Service/Repair Manager	William McLeod	850-661-5924
• Construction/Modernization	William McLeod	850-661-5924
• InspectionCoordinator	Evelyn Johnson	850-739-7430
• Branch Manager	Matt Ellinor	850-528-7590

All of our email addresses are as follows: firstname.lastname@tkelevator.com

Our office fax number is 866-785-5907

Helpful Hints

Before Calling for Service:

Here are a few tips that may help you save time and money by avoiding a service call:

- Be sure all key operated switches are in the normal operating or "RUN" position
- Check the hoist way sill and car door sill for debris
- Check for blown fuses or tripped circuit breakers in the disconnect, or the meter room
- Be sure that the elevator is not on fire operation
- Be sure your building has full power from the power company
- For hydraulic applications, if the elevator has been at rest for an extended period of time, run the car up and down the hoist way for several minutes. This will heat the oil in the power unit, ensuring optimum performance

When Calling for Service:

For quick service please have the following information available:

- Proper building name and address
- The number or nickname of the troubled unit
- An accurate, detailed description of the problem

ATTACHMENT 1

PROPOSAL FORM

Elevator Modernization
At Innovation Park

Place: Leon County R&D Authority
2051 E. Paul Dirac Drive
Tallahassee, FL 32310

Due Date: August 23, 2022 at 1:00 PM

Proposal of TK Elevator Corporation hereinafter-called
PROPOSER, a corporation organized and existing under the laws of the State of
Delaware, or, a partnership, a company, or an individual doing business as a
Corporation.

To the Leon County Research and Development Authority, hereinafter referred to as
"Authority".

The PROPOSER, in compliance with the request for proposals for Elevator
Modernization, having examined the specifications with related documents and the sites of the
proposed work, and being familiar with all of the conditions of the proposed work, including the
availability of materials and labor, hereby proposes to furnish all labor, material and supplies and
at the prices and schedule shown in Attachment 2 - Price and Schedule. These prices are to cover
all expenses incurred in performing the work required under the proposal documents, of which
this proposal is a part. These prices are firm and shall not be subject to adjustment provided this
Proposal is accepted within ninety (90) days after the time set for receipt of proposals.

PROPOSER hereby agrees to commence work under this contract on or before a date to
be specified in a written "Notice to Proceed" to be issued by the Authority.

PROPOSER agrees to perform all work for which he contracts as described in the
specifications for the prices shown on the attached Price Schedule.

Upon receipt of the Notice of Award, PROPOSER will execute the formal contract
attached within seven (7) days and deliver Insurance Certificates as required.

The undersigned hereby declares that only the persons or firms interested in the proposal
as principal or principals are named herein, and that no other persons or firms than are herein
mentioned have any interest in this Proposal or in the contract to be entered into; that all addenda
issued related to the RFP have been received; that this proposal is made without connection with
any other person, company, or parties likewise submitting a proposal; and that it is in all respects
for and in good faith, without collusion or fraud.

RFP Number 22-03: Elevator Modernization
Leon County Research and Development Authority
Submission Deadline: August 23, 2022 @ 1:00 p.m.

The undersigned proposes to furnish all labor, material and fees required for the project execution at Innovation Park, 2035 East Paul Dirac Drive in Tallahassee, FL in accordance with specifications, for the contract prices specified below.

- No exceptions or clarifications taken.
 See attachment for exceptions/clarifications.

Under no circumstances shall the Proposer submit his own proposal without bidding the project specifications. A Proposer's Value Engineering Alternate is provided for optional equipment proposals and/or implementation methods other than the design specification requirements.

The bid includes Addenda number 1 dated 8/17/2022

COMPANY: TK Elevator Corporation AGENT NAME: Morgan Sherwood

ADDRESS: 850 Blountstown Street

CITY: Tallahassee STATE: FL ZIP CODE: 32304

TELEPHONE: 850-524-3361 TELEFAX: _____

FEDERAL ID#: 62-1211267 AND/OR SOCIAL SECURITY #: _____

Respectfully submitted,

Attest:

By: *Matt Ellinor*

By: *Morgan Sherwood*

Print Name Matthew Ellinor

Print Name Morgan Sherwood

Date 8-8-2022

Title Account Representative

Leon County R&D Authority
RFP 22-03 Elevator Modernization
Questions and Answers
August 17, 2022

Questions were received prior to the Q&A deadline. They are listed below along with the appropriate responses:

1. Would you accept E-CAB as an interior Cab vendor on your projects
 - a. Answer: E-cab is not an approved provider across the board for VDA projects. However, for the cab design on this particular project, E-cab is approved.
2. Can you please clarify if Retro is cladding the car door panel? The specification says new car door and Retro included to clad the car door. We just want to make sure.
 - a. Answer: New car doors are specified to be installed in section 2.9(H) of the specification.
3. Is battery lowering to be included in the controllers?
 - a. Answer: Yes; Section 2.4(H) of the specification requires automatic battery lowering features be installed on each elevator.

STANDARD BID CLARIFICATIONS
(Modernization)

These Standard Bid Clarifications shall be made a part of this bid and any subsequent Agreement issued pursuant to an award thereof, and in the event of conflict with other articles, terms, conditions or contract documents, these Standard Bid Clarifications shall prevail. Any clarifications presented by TK Elevator Corporation at the time of bid shall by this reference be incorporated herein and made a part hereof and shall govern in the event of conflict with other documents.

These Standard Bid Clarifications are not all-inclusive, and TK Elevator Corporation submits these Standard Bid Clarifications with its bid with the understanding that the final Contract Documents, Terms, and Conditions are subject to review, further amendment, and approval by TK Elevator Corporation Contracts Department and shall not be binding until mutually agreed upon in writing by both parties.

1. Any obligations of TK Elevator Corporation to indemnify, defend and hold any Indemnified Party or Parties harmless shall be limited to TK Elevator Corporation's own acts, omissions, or negligence, and shall in no way include for the acts, omissions, or negligence of an Indemnified Party, or for bare allegations.
2. Any required parties shall be added to TK Elevator Corporation's general liability insurance policy as an additional insured, to be evidenced by TK Elevator Corporation's manuscript Additional Insured endorsement, subject to the limitations as hereafter set forth. Such additional insured coverage shall only apply to the extent any damages covered by the policy are determined to be caused by TK Elevator Corporation's acts, omissions or negligence, and shall not apply to the extent caused by the additional insured's own acts, omissions, or negligence, or for bare allegations. All aggregates shall apply on a per policy basis.
3. Unless otherwise mutually agreed upon in writing, the following payment terms shall govern: Payment from Owner to Contractor, including final payment, shall not be a condition of payment from Contractor to TK Elevator Corporation, unless payment is being withheld due to TK Elevator Corporation's nonperformance pursuant to the contract documents. Upon execution of this Agreement, Contractor shall furnish TK Elevator Corporation with fifty percent (50%) of the contract value for pre-production and engineering costs. An additional twenty five percent (25%) shall be due and payable when the material has been received at TK Elevator Corporation's warehouse. Receipt of payment is required prior to mobilization of labor. Progress payments shall be made throughout the life of the project. Contractor shall include in progress payments for materials stored at jobsite or in TK Elevator Corporation's possession. Should payments lag, TK Elevator Corporation reserves the right to demobilize until such a time that the payments have been brought up to date, and TK Elevator Corporation has the available manpower. Retainage shall be five percent (5%). Contractor agrees to increase progress payments to ninety-five percent (95%) of contract value on or before Contractor's acceptance of TK Elevator Corporation's work. Contractor agrees to waive any and all claims to the turnover and/or use of that equipment until such time as those amounts are paid in full. Final payment shall be made within thirty (30) days of Contractor's acceptance of TK Elevator Corporation's work. Notwithstanding any language therein to the contrary, any waiver or release shall be limited to lien rights for work performed and billed up to the date of the waiver or release, and the waiver or release is conditional upon receipt and clearance of the payment. TK Elevator Corporation otherwise reserves all other rights, claims, remedies or defenses to which it may otherwise be entitled at law or in equity.
4. Schedules and completion dates, and any changes thereto, shall be agreed to in writing by both parties before becoming effective, and progress of the work shall be upon reference thereto. TK Elevator Corporation shall automatically receive an extension of time commensurate with any delay not solely caused by TK Elevator Corporation.
5. In no event shall TK Elevator Corporation be liable for any indirect, special, liquidated, incidental, exemplary or consequential damages, or for loss of use, loss of income, loss of opportunity, or other similar remote damages.
6. Notwithstanding anything potentially implied from or expressly stated in language of the bid documents, in the event TK Elevator Corporation is maintaining the subject equipment under the current term of a maintenance agreement with Owner, such agreement shall remain in full force and effect in the event TK Elevator Corporation is not the successful bidder. In no event shall the submission of this bid response by TK Elevator Corporation be relied upon as a basis for the otherwise untimely termination of the current maintenance agreement. Such agreement shall terminate only in the event TK Elevator Corporation is the successful bidder, and all new agreements associated with such bid have been fully executed.



TK Elevator Corporation

STANDARD BID CLARIFICATIONS (Service & Repair)

These Standard Bid Clarifications shall be made a part of this bid and any subsequent Agreement issued pursuant to an award thereof, and in the event of conflict with other articles, terms, conditions or contract documents, these Standard Bid Clarifications shall prevail. Any clarifications presented by TK Elevator Corporation at the time of bid shall by this reference be incorporated herein and made a part hereof and shall govern in the event of conflict with other documents.

These Standard Bid Clarifications are not all-inclusive, and TK Elevator Corporation submits these Standard Bid Clarifications with its bid with the understanding that the final Contract Documents, Terms, and Conditions are subject to review, further amendment, and approval by TK Elevator Corporation Contracts Department, and shall not be binding until mutually agreed upon in writing by both parties.

1. Any obligations of TK Elevator Corporation to indemnify, defend and hold harmless shall be limited to property damage and bodily injury claims only, and then, only to the extent of TK Elevator Corporation's own acts, omissions, or negligence, and shall in no way include for the acts, omissions, or negligence of an Indemnified Party, or for bare allegations.
2. Any required parties shall be added to TK Elevator Corporation's general liability insurance policy as an additional insured, to be evidenced by TK Elevator Corporation's manuscript Additional Insured endorsement, subject to the limitations as hereafter set forth. Such additional insured coverage shall only apply to the extent any damages covered by the policy are determined to be caused by TK Elevator Corporation's acts, omissions or negligence, and shall not apply to the extent caused by the additional insured's own acts, omissions, or negligence, or for bare allegations. All aggregates shall apply on a per policy basis.
3. In no event shall TK Elevator Corporation be liable for any indirect, special, liquidated, incidental, exemplary or consequential damages, or for loss of use, loss of income, loss of opportunity, or other similar remote damages.

ATTACHMENT 2

PRICE AND SCHEDULE

The PROPOSER, in compliance with the request for proposals for the **ELEVATOR MODERNIZATION**, having examined the scope of work and written specifications, hereby proposes to furnish **ELEVATOR MODERNIZATION** for the following unit prices.

COST AND SCHEDULE FOR BASIC SERVICES

- A. The base lump sum bid for the
1. Atrium Elevator is: \$116,131.00
 2. Johnson Bldg. Elevator is: \$116,131.00
- B. Proposed Guaranteed Scheduling for Project Implementation:
1. Lead time after contract award and selection item confirmations before start of work:
13-14 (weeks)
 2. Atrium Elevator out-of-service time: 3 (weeks)
 3. Johnson Bldg. Elevator out-of-service time: 3 (weeks)
 4. Total out-of-service time: 6 (weeks).
- C. Long-term monthly maintenance price for THREE years after guarantee period:
- \$225.00 (Atrium Elevator).
\$225.00 (Johnson Elevator).

The above unit prices listed in the Price Schedule shall include all labor, materials, removal, overhead, profit, insurance, and any other cost necessary to cover the finished work of the several kinds called for.

PROPOSER agrees that this proposal shall be good and may not be withdrawn for a period of ninety (90) days after the scheduled closing time for receiving proposals.

Respectfully submitted,

By: Matt Ellinor
Signature

Matthew Ellinor
Print Name

Branch Manager
Print Title

ATTACHMENT 3

EQUAL OPPORTUNITY/AFFIRMATIVE ACTION STATEMENT

1. The Proposer hereby agrees to a commitment to the principles and practices of equal opportunity in employment and to comply with the letter and spirit of federal, state, and local laws and regulations prohibiting discrimination based on race, color, religion, national region, sex, age, handicap, marital status, and political affiliation or belief.
2. The Proposer agrees to comply with Executive Order 11246, as amended, and to comply with specific affirmative action obligations contained therein.

Signed: *Matt Ellinor*

Title: Branch Manager

Proposer: Matthew Ellinor

Address: 850 Blountstown Street, Tallahassee, FL 32304

ATTACHMENT 4

**CERTIFICATION REGARDING
DEBARMENT, SUSPENSION,
AND OTHER RESPONSIBILITY MATTERS**

- 1) The Proposer certifies to the best of its knowledge and belief, that it and its principals:
 - a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - b) Have not within a three-year period preceding this been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of these offenses enumerated in paragraph (1)(b) of this certification; and
 - d) Have not within a three-year period preceding this application/Proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- 2) Where the Proposer is unable to certify to any of the statements in this certification, such Respondent shall attach an explanation to this Proposal.
- 3) No subcontract will be issued for this project to any party which is debarred or suspended from eligibility to receive federally funded contracts.

Matt Ellinor
Signature

Branch Manager
Title

Matthew Ellinor
Proposer's name

850 Blountstown Street, Tallahassee, FL 32304
Address

ATTACHMENT 5

**AFFIDAVIT CERTIFICATION
IMMIGRATION LAWS**

The Authority will not intentionally award Authority contracts to any Proposer who knowingly employs unauthorized alien workers, constituting a violation of the employment provisions contained in 8 U.S.C. Section 1324 A(e) (Section 274a(e) of the Immigration and Nationality Act). The Authority may consider the employment by any Proposer of Unauthorized Aliens a violation of Section 274A(e) of the INA. **Such violation by the Proposer of the employment provision contained in Section 274A(e) of the INA shall be ground for unilateral cancellation of the contract by the Authority.**

Pursuant to section 448.095, Florida Statutes, Respondent agrees that it will enroll and participate in the Employment Eligibility Verification Program (“E-Verify Program”) administered by the U.S. Department of Homeland Security (“DHS”), under the terms provided in the “Memorandum of Understanding” with DHS governing the program, to verify the employment eligibility of all persons it employs under the contract term to perform duties in Florida. Respondent further agrees to provide to the Authority, as part of the contracting documents, documentation of such enrollment in the form of a copy of the “Edit Company Profile” page in E-Verify, which contains proof of enrollment in the E-Verify Program. (This page can be accessed from the “Edit Company Profile” link on the left navigation menu of the E-Verify employer’s homepage.) Information regarding “E-Verify” is available at the following website: <http://www.uscis.gov/e-verify>.

Respondent further agrees that it will require each subcontractor that performs work under this contract to verify the employment eligibility of its employees hired during the term of the contract by enrolling and participating in the E-Verify Program within ninety days of the effective date of the contract or within ninety days of the effective date of the contract between the Respondent and the subcontractor, whichever is later. The Respondent shall obtain from the subcontractor(s) a copy of the “Edit Company Profile” screen indicating enrollment in the E-Verify Program and make such record(s) available to the Authority and other authorized state officials upon request.

[SIGNATURES ON NEXT PAGE]

RESPONDENT ATTESTS THAT THEY ARE FULLY COMPLIANT WITH ALL APPLICABLE IMMIGRATION LAWS (SPECIFICALLY TO THE 1986 IMMIGRATION ACT AND SUBSEQUENT AMENDMENTS) AND REPSONDENT WILL ENROLL IN THE E-VERIFY PROGRAM AS A CONDITION OF ANY AWARD RESULTING FROM THIS RFP.

Company Name: TK Elevator Corporation

Signature: Matt Elinor

Title: Branch Manager

STATE OF Florida
COUNTY OF Leon

Sworn to and subscribed before me this 8 day of August, 2022.

Personally known X

Evelyn Ann Johnson
NOTARY PUBLIC

OR Produced identification _____

Notary Public - State of Florida

(Type of identification)

My commission expires:



EVELYN ANN JOHNSON
Commission # HH 179107
Expires January 19, 2026
Bonded Thru Budget Notary Services

Printed, typed, or stamped
commissioned name of notary public

The signee of this Affidavit guarantees, as evidenced by the sworn affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made.

THE AUTHORITY RESERVES THE RIGHT TO REQUEST SUPPORTING DOCUMENTATION, AS EVIDENCE OF SERVICES PROVIDED, AT ANY TIME.

ATTACHMENT 7
DRUG FREE WORKPLACE FORM

Drug-Free Work Place: Yes YES N/A _____

If Yes please complete the form.

The undersigned proposer hereby certifies that TK Elevator Corporation
(Name of Business) does:

Publish 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.

Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.

Give each employee engaged in providing the commodities or contractual services that are proposed a copy of the statement specified in subsection (1).

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 novo contender 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.

Impose a sanction on, or required the satisfactory participation in a drug abuse assistance or rehabilitation program is such is available in the employee's community, by any employee who is so convicted.

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.

Matt Ellinor
Proposer's Signature

8-8-2022
Date

*This form **must** be completed, signed and returned with your response to fulfill the requirements of this RFP*

ATTACHMENT 8
LOCAL VENDOR CERTIFICATION

The undersigned, as a duly authorized representative of the vendor listed herein, certifies to the best of his/her knowledge and belief, that the vendor meets the definition of a Local Business. For purposes of this section, "local business" shall mean a business which:

- a) Has had a fixed office located in and having a street address within Leon, Gadsden, Wakulla, or Jefferson County for at least six (6) months immediately prior to the issuance of the request for competitive bids or request for proposals by the Leon County R&D Authority; and
- b) Holds any business license required by Leon County (or one of the other local counties), and, if applicable, the City of Tallahassee; and
- c) Is the principal offeror who is a single offeror; a business which is the prime contractor and not a subcontractor; or a partner or joint venturer submitting an offer in conjunction with other businesses.

Please complete the following in support of the self-certification and submit copies of your County and City business licenses. Failure to provide the information requested will result in denial of certification as a local business.

Business Name: TK Elevator Corporation	
Current Local Address: 850 Blountstown Street Tallahassee, FL 32304	Phone: 850-576-0161 Fax:
If the above address has been for less than six months, please provide the prior address.	
Length of time at this address: 30 years	
Home Office Address:	Phone: Fax:

Matt Elinor
Signature of Authorized Representative

8-8-2022
Date

STATE OF Florida
COUNTY OF Leon

The foregoing instrument was acknowledged before me this 8 day of August, 2022.

By Matt Elinor, of TK Elevator Corp,
(Name of officer or agent, title of officer or agent) (Name of corporation acknowledging)

a Delaware corporation, on behalf of the corporation. He/she is personally known to me
(State or place of incorporation)

or has produced _____ as identification.
(type of identification)

Evelyn Ann Johnson
Signature of Notary



EVELYN ANN JOHNSON
Commission # HH 176107
Expires January 19, 2026
Bonded Thru Budget Notary Services

Evelyn Ann Johnson
Print, Type or Stamp Name of Notary

Title or Rank

Serial Number, If Any

**Leon County Research and Development Authority (LCRDA) Proposer Registration
Request for Proposals (RFP) Number: 23-03 Elevator Modernization**

Distribution of Solicitation Documents – Documents related to the subject RFP are being distributed via the LCRDA’s website, <http://innovation-park.com/opportunties/>.

Official Registration - Companies must officially register in order to be placed on the proposer registration list for this solicitation. This list is used for communications to prospective companies.

- To register as a proposer, complete the following information in its entirety and email the completed registration form to Stephanie Shoulet at stephanie@talcor.com.
- Potential respondents to the RFP are responsible for reviewing the complete RFP documents and for collecting all addenda prior to submitting their response. Addenda and revisions will not be forwarded automatically. Potential respondents are advised to check the LCRDA’s website periodically and prior to submitting their response.

Name of the Company: TK Elevator Corporation		
Company’s Mailing Address: 850 Blountstown St		
City: Tallahassee	State: FL	Zip Code: 32304
Telephone: 850-524-3361	Fax:	E-Mail: morgan.sherwood@tkelevator.com
Primary Contact Person for the Company: Morgan Sherwood and Matt Ellinor Matt.Ellinor@tkelevator.com 850-528-7590		
Contact Person’s Mailing Address: 850 Blountstown St		
City: Tallahassee	State: FL	Zip Code: 32304
Telephone: 850-524-3361	Fax:	E-Mail: morgan.sherwood@tkelevator.com

Questions & Answers - Questions concerning the RFP, required submittals, evaluation criteria, response schedule, or selection process, and requests for interpretations or corrections of any or actual or perceived ambiguity, inconsistency or error which the company may discover shall be directed in writing to Stephanie Shoulet. Such written questions and requests shall be: (1) received by Stephanie Shoulet no later than August 16, 2022 at 2:00 p.m. EST; (2) signed by a person authorized to contractually bind such company; and (3) directed to Stephanie Shoulet by the company by e-mail. Answers to such questions will be posted on the LCRDA’s website, <http://innovation-park.com/opportunties/>.

Communication Prohibition - Prospective respondents are cautioned not to contact any officials other than Stephanie Shoulet concerning this RFP.

Contact Information for Stephanie Shoulet –

- E-mail: stephanie@talcor.com

**Submit completed registration form to Stephanie Shoulet via email at
stephanie@talcor.com.**

ATTACHMENT 10
SCHEDULE OF INITIAL BASE HOURLY RATES FOR CONTRACTOR'S PERSONNEL

VDA No. 65766	Contractors Hourly Base Cost including Fringe Benefits	Straight Time Rate Hourly Selling Price	Premium Time Rate	*1.5 Rate Hourly Selling Price (Specify)	**Double Time Rate Hourly Selling Price
Maintenance Mechanic	82.29	300.00	300.00	510.00	600.00
Helper	65.83	300.00	300.00	510.00	600.00
Modernization Mechanic	82.29	300.00	300.00	510.00	600.00
Team	148.12	600.00	600.00	1020.00	1200.00
Foreman Adjuster /	86.21	300.00	300.00	510.00	600.00
Other					

*Hours and Days of the Week that the Rate applies: Mon - Fri / 4:31PM -7:59AM

**Hours and Days of the Week that the Rate applies: All Day Weekends and Nationally Recognized Holidays

ATTACHMENT 11
PROPOSER'S STATEMENT OF QUALIFICATIONS

1. Date 8-8-2022
2. Firm Name TK Elevator Corporation
3. Address 850 Blountstown Hwy
Tallahassee, FL 32304
Telephone No. 850 -576-0161
4. Type of Company (Corporation, Partnership, Sole Proprietorship)
Corporation
5. Type of elevator work in which you specialize (Check one)
 - a. New Installation
 - b. Renovation/Alteration
 - c. Maintenance X
6. List all principals/officers with their titles and years of experience with this firm
 - a. Reid Kelly - Florida Regional President - 30 years
 - b. Matt Ellinro - Tallahassee Branch Manager - 28 years
 - c. Ruben Guerreo - Florida Director Operations - 27 years
7. List trade association memberships
 - d. Building Owners and Mangers Association Tallahassee
 - e. Associated Builders and Contractors - North Florida Chaper
 - f. N/A
8. Proposed Project Manager and Superintendent with years of experience
 - a. Project Manager William McLeod - 21 years
 - b. Superintendent Matt Ellinor - 28 years

9. Recent Projects and References (List information for similar modernization projects started or completed within the last twelve [12] months in the same logistical area. References will be contacted to confirm their experience with your firm.)
- a. (1) Project FSU Jennie Murphree
 - (2) Owner Florida State University
 - (3) Contact Person Bill Miller Tele No. 850-645-9364
 - (4) Scope of Work Controller, Power Unit, Door Operator, Fixtures
 - (5) Contract Amount \$74,893.00
 - b. (1) Project Florida Bar Annex
 - (2) Owner The Florida Bar
 - (3) Contact Person Rhett Frisbe Tele No. 850-561-5600
 - (4) Scope of Work 2 Units - Controllers, Door Operator, Power Units and Fixtures
 - (5) Contract Amount \$170,786.00
10. List a minimum of two (2) additional similar modernization projects completed within the last four (4) years with contact names, telephone numbers, date of completion and other pertinent information in the same logistical area.
- Tallahassee National Bank - Chet Smith - 850-443-7943 - August 2021
 - Florida Department Law Enforcement - Dan Hunter - VDA Specification - June 2020
11. List maintenance service references for similar groups of elevator systems currently serviced by your company under a full comprehensive maintenance program in the same logistical area. Provide building address, contact name and telephone numbers. List number of elevator units in each contract.
- a. FAMU College of Engineering - Bill Miller - 850-645-9364 - 4 Units
 - b. 106 E College - Barbara Zieier - 469-426-9195 - 4 Units
 - c. 1800 Paul Dirac Dr - FSU Mag Lab - Bill Miller -850-645-9364 - 4 Units
 - d. 1769 Paul Dirac Dr - Danfoss Turbocor Compressors - Collin Akins - 850-408-0960
 - e. 414 E Bloxham St - Cascades Office - Ted Reeves - 850-404-3087 2 Units

12. Shop Union affiliation (if any)

Field Union affiliation (if any) Local 49

13. a. Number of employees 30

b. Number of maintenance mechanics 10

c. Number of installation mechanics 8

d. Number of maintenance mechanics familiar with these types of elevator:
10.

PREPARED BY: Morgan Sherwood

TITLE: Account Representative
(Duly Authorized Principal Officer)

Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. TK ELEVATOR CORPORATION</p> <p>2 Business name/disregarded entity name, if different from above N/A</p> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) <u>5</u></p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. PO BOX 3796</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code CAROL STREAM, IL 60132-3796</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

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

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

Social security number									
or									
Employer identification number									
6	2	-	1	2	1	1	2	6	7

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.

Sign Here	Signature of U.S. person ▶ <i>David W. Turnage</i> David W. Turnage - Tax Officer	Date ▶ 01/05/2022
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General Instructions

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

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

Purpose of Form

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

- Form 1099-INT (interest earned or paid)

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

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

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



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

**BUREAU OF ELEVATOR SAFETY
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-1013**


850-487-1395

TK ELEVATOR CORPORATION - TALLAHASSEE
3100 INTERSTATE NORTH CIRCLE SE
SUITE 500
ATTN: TAX DEPARTMENT
ATLANTA GA 30339

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



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

ELCO31 ISSUED: 10/11/2021

ELEVATOR COMPANY
TK ELEVATOR CORPORATION - TALLAHASSEE
ELEVATOR COMPANY
REQUIRED TO CARRY OR BE COVERED
BY GENERAL LIABILITY INSURANCE

IS REGISTERED under the provisions of Ch. 399 FS
Expiration date DEC 31, 2022 L2110110000006

DETACH HERE

RON DESANTIS, GOVERNOR

JULIE I. BROWN, SECRETARY

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
BUREAU OF ELEVATOR SAFETY**

LICENSE NUMBER	
ELCO31	

The ELEVATOR COMPANY
Named below IS REGISTERED
Under the provisions of Chapter 399 FS.
Expiration date: DEC 31, 2022

**REQUIRED TO CARRY OR BE COVERED
BY GENERAL LIABILITY INSURANCE**

TK ELEVATOR CORPORATION - TALLAHASSEE
850 BLOUNTSTOWN HWY
TALLAHASSEE FL 32304



NON-TRANSFERABLE





August 22, 2022

VALUE ENGINEERING SUGGESTIONS

RFP Number 22-03 – Elevator modernization Leon County Research and Development Authority

1. Remove HVAC mini split system units from base bid and allow portable A/C handlers in machine room areas (see attached A/C information) Deduct \$15,000.00 from base bid.
2. Allow TK Elevator to provide the TKE modernization package (controller, landing system, power unit) and still meet require meeting specifications Section 142423-6;

Atrium elevator: \$112,200.00

Johnson Building Elevator: \$112,200.00

TOTAL COST FOR BOTH UNITS: \$224,400.00

NOTE: if either value engineering suggest is selected and you would like to go with the portable A/C units. You can deduct \$15,000.00 from the base bid on either package.

COMMERCIAL SPOT COOLERS SALES

NATIONWIDE SHIPPING



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KoldWave 6KK14 and 6KK17 Air-Cooled Portable Air Conditioners

why buy from us?

We're engineers passionate about home ventilation and serious about customer service – so you can count on us for carefully-selected equipment and expert advice to ensure your project is a success from specification to installation.

Your call is answered by qualified people who will gladly discuss your project in detail, advise you professionally and never sell you

Spot Coolers - Water and Air Cooled

In general, a spot cooler is similar to an air conditioner. Your home air conditioner has 2 parts: The evaporator (cold side) is inside your house and the condenser (hot side) is outside. A spot cooler is a 1 piece (self-contained) air conditioner with the evaporator and the condenser both contained in the same cabinet. The evaporator discharges the cold air through nozzles on the unit and the hot condenser air is typically discharged through the opening on the top or back of the unit.

A spot cooler can be turned into a more standard air conditioner by ducting the condenser air outside (away from the space being cooled) through the use of an optional condenser ducting kit.

How do portable air conditioners work?

Air/water-cooled portable air conditioners are intended to be rolled into a room near spot cooling applications, you point the nozzles at the spot that you want to keep cool. In most applications, the nozzle direction is not as important.

Since the air conditioner is inside the space requiring cooling, you must remove the heat from the room. For air-cooled units you must duct out the warm air that the air conditioner produces. In a typical environment this is typically done by ducting the condenser air from the top of the unit to the main building cooling system's return air plenum above the ceiling. A water cooled unit uses water instead of air to remove this heat. These units require a water supply, water return and a hot water return.

What is the difference between air and water cooled units?

Both types of units are totally self contained air conditioners with refrigerant and condenser coils. Air-cooled portables use air to reject the heat from the room. Air-cooled portables use air to reject the heat from the room by ducting the unit above the ceiling tiles. A water cooled unit uses water to reject the heat from the room. This can be accomplished with chilled water loop or a hot water return.

Why a KoldWavespot cooler?

With more than 60 years of experience, Koldwave is an industry leader in reliable portable air conditioning. Koldwave spot cooling units are among the industry's most rugged, designed to take a beating. Simple to set-up, the units stand up to any challenge—all the time, every day. 24/7 reliability, and your business 24/7 customer repeat-ability.

