Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

City of Jacksonville, Florida

Procurement Award Form (PAF)

Part 1 – Form Type: JPAC 126.204 (a) New Award, Renewals, Waive Technical Defects, Price Increases, NTE Increases.

Goods and/or Services: COJ X-Ray Scanner and Magnetometers

Requested Action and Justification:

Requesting approval to ratify the period of service from December 3, 2025 to date of award. Renewal delays due to late submittal of paperwork from Vendor. Recommend approval to utilize the third and final renewal option with Pemica Inc. Period of service will be from date of award through December 2,2026. Total annual expenditure amount will be $240,000.00, for a new total expenditure not to exceed $773,425.56.

Work will be carried out through purchase orders issued under the contract purchase agreement. The account will be assigned based on the specific building receiving the service.

Supplier:	Pemica Inc	**Basis of Award:**	LPTA	**BID Opening Date:**	9/20/2021

POA #:	71512-22	**PO #:**	NA	**Change Order #:**	NA
Solicitation #:	ITQ 10968 21	**Contract #:**	71512-22	**Contract ADM #:**	4
Term:	1 year	**Options:**	3, 1 YEAR	**Options Used:**	2

Federally Funded:	No	**JSEB Rec:**	N/A
Licenses Verified:	N/A	**JSEB %:**	N/A
Bonds Required:	No	**Bonds Waived Pursuant To:**	N/A

Fund:	000000	**Center:**	000000	**Acct:**	000000	**Proj:**	00000000	**Activity:**	0000000000	$	240,000.00
Fund:		**Center:**		**Acct:**		**Proj:**		**Activity:**		$	
Fund:		**Center:**		**Acct:**		**Proj:**		**Activity:**		$	

New NTE/GMP:	$ 773,425.56	**Contingent Amt:**	$ 0.00	**DMP/ODPO Amt:**	$ 0.00

Using Agency/BU:	PWPB:PUBLIC BUILDINGS		
Concurrence:	DocuSigned by: Ray Bibal 7FA0E6D82164F6...	**Title:**	CHIEF OF PUBLIC BUILDINGS 4/7/2026
Concurrence:	Signed by: 1EFA223D5D23487...	**Title:**	DIRECTOR OF PUBLIC WORKS 4/10/2026
Concurrence:		**Title:**	
Concurrence:		**Title:**	

Initial DT

Procurement Analyst/Buyer:	Signed by: Pierce, Melissa 6FF435104847484...	**Chief of Procurement:**	Signed by: 4/21/2026 B10F1D517352456...
Name:	Pierce, Melissa	**Name:**	Dustin L. Freeman

Part 2 – JPAC Action: All award actions subject to lawfully appropriated funds.		**Part 3 – Final Awarding Authority Action:**	
Members who approve:		**Action:**	
Members who disapprove:		**Signature:**	
Date:		**Date:**	

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

PAF Instructions
Part 1 (using agency)

Form Type: This form will be used for both Administrative Awards and JPAC Requests. Select type from dropdown options.

Goods and/or Services: Enter a brief description of the types of goods and services included in the request.

Requested Action and Justification: Enter a brief description of the requested action or authority being sought. i.e.; *Request permission to award the lowest, responsive responsible bidder for an ITB or award the highest ranked supplier for an RFP.* This block should also be used for additional information such as additional 4th account strings, or other information essential for contract execution.

Supplier: Enter awarded supplier name**.** If multiple, include in "Requested Action and Justification" box.

Basis of Award: Select from Lowest Price Technical Acceptable (LPTA), Highest Price Technical Acceptable (HPTA) or N/A.

Bid Opening Date: The date bids were unsealed by Procurement.

POA #: This is your 1Cloud generated Agreement number. Select Type, Enter Number.

PO #: Enter the PO number or agreement release number.

Change Order #: Provide the applicable change order number represented by this request.

Solicitation #: Select Prefix type, Enter Number, and Year.

Contract #: This number should be the same as your POA number (unless procured prior to 2020)

Contract Amendment #: Provide the applicable amendment number represented by this request.

Term: Select the Period of Performance or Term for the initial period.

Options: Period of time for each renewal or option.

Options Used: Prior to this request, enter how many options were already used.

Federally Funded: Select yes or no from dropdown if Federal Funds will be used.

JSEB Rec: Select Encouragement or JSEB Set Aside Option.

JESB %: If JSEB Participation, enter the percentage.

Bonds Waived Pursuant to: Select option from Drop down.

Funding Sources: Fund/Center/Account/Project/Activity, all fields are required even if zeros.

New NTE/GMP: Enter the new total not to exceed amount. Note, this should match the contract maximum indebtedness, if applicable**.**

Contingent Amount: If your agency requests an allowance for unforeseen additional expenses, then specify the amount of your requested increase and new NTE that represents the contingency allowance. This is over and above any quote.

DMP/ODPO Account: Enter the Direct Materials Purchase/Owner Direct Purchase Order Account. Used mainly for CIP (Capital Improvement/Construction) Projects

Using Agency/BU: Select one from the dropdown list.

Concurrence: Using Agency internal routing requirements for Electronic Signatures (follow Proc Manual for threshold requirements)

Title: Title of person electronically signing form.

Attachments: Included any supplemental information to the Procurement Award Form. i.e.; *Scope of work, previous awards*.

**Any field where there is no data available, or no entry is required, either leave it blank or enter N/A. Any fields where there is known data, include for informational purposes. Any changes to an original award should contain the data that is being changed and any other relevant data required for JPAC review and approval.*

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/14/2026

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 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

Procom Insurance Underwriters
4909 SW 74th Ct.

Miami FL 33155

CONTACT NAME: Isidro01
PHONE (A/C, No, Ext): (305) 740-4460 FAX (A/C, No): (305) 740-4469
E-MAIL ADDRESS: Mbruna@procomcorp.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : GEMINI INSURANCE COMPANY	10833
INSURER B : TECHNOLOGY INSURANCE CO	42376
INSURER C : LLOYD'S OF LONDON	15792
INSURER D :	
INSURER E :	
INSURER F :	

INSURED

PEMICA INC
7324 SW 48 St

MIAMI FL 33155

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	**GENERAL LIABILITY** [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR [X] 2,500 BI /PD DED GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC	Y	Y	VCGP085825	05/26/2025	05/26/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000.00 $ 100,000.00 $ 5,000.00 $ 1,000,000.00 $ 2,000,000.00 $ 2,000,000.00 $
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $ $
	[ ] **UMBRELLA LIAB** [ ] OCCUR [ ] **EXCESS LIAB** [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $ $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N [Y] **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	Y	TWC4664058	09/23/2025	09/23/2026	[X] WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000.00 $ 1,000,000.00 $ 1,000,000.00
C	Business Personal Property	Y	Y	350MI101341	05/26/2025	05/26/2026	40,782 Special 90% Co-Ins 5,000 AOP DED 10% WIND & HAIL DED	

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

WHOLESALES DISTRIBUTORS AND INSTALLATION OF ELECTRIC SCALE & METAL DETECTORS

CERTIFICATE HOLDER IS NAMED ADDITIONAL INSURED WITH WAIVER OF SUBROGATION and PRIMARY NON CONTRIBUTORY INCLUDED IN RESPECT to general liability with a written contract

CERTIFICATE HOLDER

City Of Jacksonville,
117 West Duval, Street Suite # 375
Jacksonville FL 32202.

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

ISIDRO L. GUILLAMA

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Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

Date: 3/20/2026
Attn: Kirah Bays, Mike Soto

Re: Renewal of Bid: ITQ-10968-21 To: City of Jacksonville

PEMICA INC, would like to renew Bid: ITQ-10968-21. Pemica (POA-71512-22). This request represents PEMICA INC. 1-year renewal option from December 2, 2025 through December 1, 2026, under the same terms and conditions as in the Bid.

Antonio Navarro
General Manager

7324 SW 48 Street FL 33155 - T: (305) 668 0771 F: (305) 668 0719
EMAIL: HELP@PEMICA.COM WEB: WWW.PEMICA.COM

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/14/2026

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 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	C.MARTINEZ INSURANCE AGENCY 1430 S Highway, Suite 316A Coral Gables, FL 33146	CONTACT NAME: Maria Riano	
		PHONE (A/C, No, Ext): 305-663-4921	FAX (A/C, No): 305-663-4961
		E-MAIL ADDRESS: maria@carmartinez.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A : State Farm Fire and Casualty Company	25143
INSURED	Pemica Incorporated 7324 SW 48th Street Miami, FL 33155-5523	INSURER B :	
		INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
A	AUTOMOBILE LIABILITY	Y	Y	C24 7135-B08-59O	02/08/2026	08/08/2026	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO			ENOL			BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

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

Re: COJ X Ray Scanners and Magnetometers- ITQ-10968-21

The City of Jacksonville its members, officials, officers, employees and agents are named as Additional Insureds with regard to Automobile Liability on a Primary & Non-Contributory basis. A waiver of subrogation in favor of The City of Jacksonville its members, officials, officers, employees and agents applies to Auto Liability. 30 day notice of cancellation to The City of Jacksonville applies.

CERTIFICATE HOLDER

City of Jacksonville
117 W Duval St
Suite 335
Jacksonville, FL 32202

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Maria Riano for Carlos Martinez

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Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

City of Jacksonville, Florida
Procurement Award Form (PAF)

Part 1: Form Type JPAC Award Request and Administrative Details

Goods and/or Services: COJ X-Ray Scanner and Magnetometers

Requested Action/Authority:

Received a request from Pemica, Inc. to exercise the 2nd renewal option in the amount of $240,000.00 for the period of December 3, 2024, through December 2, 2025.

Justification/Explanation:

Contract renewal. Work will be performed by purchase orders against the contract purchase agreement. Account to be determined by the building being serviced.

Legal Contract #:	715122-22	Contract Date:	12/2/2021	Change Order/AMD #:	Amendment #4	
PO/Release #:	N/A	Bid Date:	9/20/2021	Awarded Supplier:	Pemica Inc	
Licenses Verified:	Yes	Effective Date:	7/22/2024	Basis of Award:	LPTA	
Federally Funded:	No	No. Invited:	1	Responses Received:	1	Attachments:
Solicitation:	ITQ - 10968 - 21			Procurement Contract #:	POA - 71512-22	
Executed By:	Procurement					

PoP:Base:	1 year	Options:	3, one year renewal options	Extension(s):	N/A
JSEB Rec.:	N/A	%:	N/A	Bonds Waived Pursuant To:	N/A

Fund:	000000	Center:	000000	Acct:	000000	Proj:	00000000	Activity:	0000000000	$	240,000.00
Fund:		Center:		Acct:		Proj:		Activity:		$	
Fund:		Center:		Acct:		Proj:		Activity:		$	

New NTE/GMP:	$ 533,425.56	Contingent Amount:	$ 0.00	DMP/ODPO Amount:	$ 0.00

Using Agency/BU:	PWPB:PUBLIC_BUILDINGS			
Concurrence:	DocuSigned by: Roy Bibel FBA0E6E082164F6...	Title:	CHIEF OF PUBLIC BUILDINGS	7/26/2024
Concurrence:	DocuSigned by: Nina Sicka 1EFA223D5D23487...	Title:	DIRECTOR OF PUBLIC WORKS	7/26/2024
Concurrence:		Title:		
Concurrence:		Title:		

Procurement Analyst/Buyer:	Signed by: Benjamin Kemp 17483D5CD0EE4C1...	Chief of Procurement:	DocuSigned by: B19F1D517352456...
Name:	Benjamin Kemp	Name:	Dustin L. Freeman

Part 2: JPAC Actions on Above Requests/Recommendations
All Award Actions Subject to Lawfully Appropriated Funds

Members Who Approve:	3
Members Who Disapprove:	0
Other Action:	n/a

Date: 8/23/2024

Part 3: Final Awarding Authority Action

Action: Approved

Date: 8/23/2024

Signature: DocuSigned by: Karen Bowling 1C34E1215562 4B1...

DS
Karen Bowling
Chief Administrative Officer
For: Mayor Donna Deegan
Under Authority Of:
Executive Order No: 2023-02

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

PAF Instructions

Form Type: Select the type of award from the dropdown options. This form will be used for all Procurement awards (Administrative Awards and JPAC Requests).

Goods and/or Services: Enter a brief description of the types of goods and services included in the request.

Requested Action/Authority: Enter a brief description of the requested action or authority being sought. i.e.; *request permission to award to the lowest, responsive responsible bidder for ITB or award the highest ranked supplier for an RFP*.

Justification/Explanation: Enter a brief justification or explanation for the requested action. Use this box to add any additional information such as additional account strings, or other information essential for contract execution.

Legal Contract Number: Provide the existing City contract number if applicable. This will be the same number as your POA number.

Contract Date: Select the effective date for the contract using the calendar option in the form. Leave blank for contracts to become effective on the execution date.

Change Order/AMD #: Provide the applicable Change Order or Amendment number represented by this request.

Date: Enter the date of PAF submission.

Effective Date: Enter the effective date of requested authority and/or action.

Solicitation: Select the competitive procurement method used (1Cloud generated prefix), enter the 1Cloud generated numbering sequence, and 1Cloud generated fiscal year of solicitation

Basis of Award: Select from Lowest Price Technical Acceptable (LPTA), Highest Price Technical Acceptable (HPTA),

Procurement Contract #: This is your PO number. Select Type, Enter Number

PO/Release Number: Enter PO Release Number

Awarded Supplier: Enter Awarded Supplier Name

Federally Funded: Select yes or no from dropdown if Federal Funds will be used.

Responses Received: This is the number of responses received.

No Bids Received: The number of responses received that indicated supplier would not bid.

Executed By: Select whether executed by OGC or JPAC / Chief of Procurement

PoP Base: Select the Period of Performance for the initial period.

Options: Period for each renewal period i.e. one (1) two (2) year.

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Extensions: How many extensions have we preformed after the initial base period and option periods have been completed?

JSEB Goal: Select the percentage established by JSEB.

JESB Other: Select Encouragement or Set Aside Option

Bonds Waived Pursuant to: Select authority allowing bonds to be waived.

Funding Source: Fund/Center/Account/Project/Activity, all fields are required even if zeros.

New NTE/GMP: Enter the new total not to exceed the amount. Note, this should match the contract maximum indebtedness, if applicable**.**

Contingent Amount: If your agency requests an allowance for unforeseen additional expenses, then specify the amount of your requested increase and new NTE that represents the contingency allowance. This is over and above any quote.

DMP/ODPO Amount: Enter the total Direct Materials Purchase/Owner Direct Purchase Order amount for project.

Attachments: Name any attachments included as supplemental information to the PAF.

Using Agency/BU: This should be the requesting agency/requirement owner.

Concurrence: Electronic Signature

Title: Enter the title of person electronically signing form.

**Any fields where there is no data available, or no entry is required, either leave it blank or enter N/A. Any fields where there is known data, include for informational purposes. Any changes to an original award should contain the data that is being changed and any other relevant data required for JPAC review and approval.*

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

SUBJECT: COJ X-RAY SCANNER AND MAGNETOMETERS

BID #: ITQ-10968-21 **OPEN DATE:** 12/02/2021

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: SERVICE CONTRACT – TWO YEARS FROM DATE OF AWARD WITH THREE (3) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: PUBLIC BUILDINGS

BASIS OF AWARD: ALL OR NONE TO THE LOWEST RESPONSIVE, RESPONSIBLE BIDDER

NUMBER OF BIDS INVITED: 5 **NUMBER RECEIVED:** 1 **OTHER:** 0

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Request approval to increase the award to Pemica, Inc. in the amount of $136,675.56 to ensure sufficient funding for the remainder of the current contract term. Total revised not-to-exceed award amount will be $293,425.56. Period of service will remain unchanged with an expiration date of December 2, 2024 with two (2) one (1) year renewal options remaining.

This award will be funded from various agency accounts and processed via Purchase Order(s).

ATTACHMENTS: Recommendation Memo, Previous Awards

ANALYST: _____
DAVID KLAGES

RESPECTFULLY SUBMITTED: _____
DUSTIN FREEMAN, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: ROY BIRBAL, CHIEF, PUBLIC BUILDINGS DIVISION

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE: 11/30/2023

_____ _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE 12/4/2023

APPROVED ✓ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____

Karen Bowling
Chief Administrative Officer
For: Mayor Donna Deegan
Under Authority Of:
Executive Order No: 2023-02

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

A NEW DAY.

City of Jacksonville, Florida
Donna Deegan, Mayor
Department of Public Works
Public Buildings Division
555 W. 44th Street
Jacksonville, FL 32208
(904) 630-CITY
www.jacksonville.gov

MEMORANDUM

TO: **Dustin Freeman, Chief**
Procurement Division

THRU: **Nina Sickler, P.E., Director**
Department of Public Works

FROM: **Roy Birbal, Chief**
Public Buildings Division

SUBJECT: **ITQ-10968-21: X- Scanner and Magnetometers POA-71512-22**
Request to amend and increase award by adding funding

DATE: **November 14, 2023**

The Public Buildings Division is recommending approval to amend and increase the award to Pemica, Inc. by adding $136,675.56 for unanticipated scanner replacement and maintenance services. The revised not to exceed amount will be $293,425.56.

Funding will be encumbered by purchase order release against the purchase order agreement, dependent on the building being serviced.

Your assistance in concurring with this recommendation would be appreciated. If you have any questions or concerns regarding this matter, please contact Kelly Hooten at 904-255-4340.

Attachments: Previous Award

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

SUBJECT: COJ X-RAY SCANNER AND MAGNETOMETERS

BID #: ITQ-10968-21 **OPEN DATE:** 12/02/2021

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: SERVICE CONTRACT – TWO YEARS FROM DATE OF AWARD WITH THREE (3) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: PUBLIC BUILDINGS

BASIS OF AWARD: ALL OR NONE TO THE LOWEST RESPONSIVE, RESPONSIBLE BIDDER

NUMBER OF BIDS INVITED: 5 **NUMBER RECEIVED:** 1 **OTHER:** 0

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to utilize the first renewal option with Pemica, Inc. in the annual not-to-exceed expenditure amount of $75,000.00. Total revised not-to-exceed award amount will be $156,750.00. Period of service will be from December 2, 2023 through December 2, 2024 with two (2) one (1) year renewal options remaining.

This award will be funded from various agency accounts and processed via Purchase Order(s).

This award is subject to appropriation by the City in the fiscal year beginning October 1, 2023. No funds have been appropriated to date. The City has no obligation for payment and work hereunder is not authorized unless funds are appropriated for work herein. A written notification will be provided in the event the funds are appropriated.

ATTACHMENTS: Recommendation Memo, Supplier's Letter, Term of Agreement, Previous Awards

ANALYST: _____
DAVID KLAGES

RESPECTFULLY SUBMITTED: _____
DUSTIN FREEMAN, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: ROY BIRBAL, CHIEF, PUBLIC BUILDINGS DIVISION

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE: 9/21/2023

OTHER: _____

ACTION OF AWARDING AUTHORITY DATE 9/25/23

APPROVED ✓ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____
Karen Bowling
Chief Administrative Officer
For: Mayor Donna Deegan
Under Authority Of:
Executive Order No: 2023-02

Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

SUBJECT: COJ X-RAY SCANNER AND MAGNETOMETERS

BID #: ITQ-10968-21 **OPEN DATE: 2021-09-27**

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: SERVICE CONTRACT – DECEMBER 2, 2021, THROUGH DECEMBER 1, 2023 WITH THREE (3) ONE (1) YEAR RENEWAL OPTIONS

AGENCY: PUBLIC BUILDINGS

BASIS OF AWARD: ALL OR NONE TO THE LOWEST RESPONSIVE, RESPONSIBLE BIDDER

NUMBER OF BIDS INVITED: 5 NUMBER RECEIVED: 1 OTHER: 0

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
The subject bid was issued informally and awarded on December 2, 2021, to Pemica, Inc. in the amount of $41,750.00

Recommend approval to increase the award to Pemica, Inc. in the amount of $40,000.00 due to unforeseen scanner replacements and maintenance services. Total revised award amount not-to-exceed $81,750.00.

Funding shall be encumbered by purchase order releases against the purchase order agreement, dependent on the building being serviced.

ATTACHMENTS: Recommendation Memo; Previous Award

ANALYST: _____ BRYAN MATUS **RESPECTFULLY SUBMITTED:** _____ GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: ROY BIRBAL, CHIEF, PUBLIC BUILDINGS DIVISION

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE 3/31/2022

Teresa R. Eubanks _____ OTHER _____

Chili Ad Reed _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE 3/31/2022

APPROVED ✓ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____

Brian Hughes
Chief Administrative Officer
For Mayor Lenny Curry
Under Authority of
Executive Order No. 2019-02

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ADMINISTRATIVE AWARD
BID No.: ITQ-10988-21

DESCRIPTION OF GOODS/SERVICES: Recommend approval of award to Pemica, Inc., as the lowest responsive, responsible, and only bidder, for COJ X-Ray Scanner and Magnetometers. Period of service will be two (2) years from date of award with three (3) one (1) year renewal options. Total award amount will be $41,750.00.

This award is to be funded by account: various accounts determined by work being performed, the building being serviced and the fiscal year to be executed by POA agreement.

Attachments: Recommendation Memo, Bid Tabulation, Supplier Quote

FOR AGENCY/DEPARTMENT: Public Buildings Division

REQUISTION NUMBERS: PWPB-505660-22

NUMBER FIRMS SOLICITED: 5 **NUMBER FIRMS BIDDING:** 1 **NO BID:** 0

REASON FOR LESS THAN REQUIRED MINIMUM SOLICITATION/QUOTATION:

RECOMMEND AWARD TO: Pemica, Inc.

CONCURRENCE BY: Roy Birbal, Chief, Public Buildings

PRICE: $41,750.00 **TERMS:** NET 30

REASON FOR NOT ACCEPTING LOW BID:

Buyer/Analyst
12/1/21
Date

Manager of Purchasing Services
12/1/21
Date

APPROVAL:

Gregory Pessa, Chief Procurement Division
12/2/21
Date

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ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/10/2024

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 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
C.MARTINEZ INSURANCE AGENCY
1430 S Highway, Suite 316A
Coral Gables, FL 33146

State Farm

CONTACT NAME: Maria Riano
PHONE (A/C, No, Ext): 305-663-4921 FAX (A/C, No): 305-663-4961
E-MAIL ADDRESS: maria@carmartinez.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : State Farm Fire and Casualty Company	25143
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Pemica Incorporated
7324 SW 48th Street
Miami, FL 33155-5523

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC OTHER: More Help						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
							PRODUCTS - COMP/OP AGG	$
								$
A	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS More Help	Y	Y	C24 7135-B08-59J ENOL	02/08/2024	08/08/2024	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident) More Help	$
								$
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					PER STATUTE OTH-ER	
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

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

Re: COJ X Ray Scanners and Magnetometers- ITQ-10968-21

The City of Jacksonville its members, officials, officers, employees and agents are named as Additional Insureds with regard to Automobile Liability on a Primary & Non-Contributory basis. A waiver of subrogation in favor of The City of Jacksonville its members, officials, officers, employees and agents applies to Auto Liability. 30 day notice of cancellation to The City of Jacksonville applies.

CERTIFICATE HOLDER

City of Jacksonville
117 W Duval St
Suite 335
Jacksonville, FL 32202

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Maria Riano for Carlos Martinez

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/10/2024

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PRODUCER
Procom Insurance Underwriters
4909 SW 74th Ct.
Miami FL 33155

CONTACT NAME: Isidro01
PHONE (A/C, No, Ext): (305) 740-4460 FAX (A/C, No): (305) 740-4469
E-MAIL ADDRESS: Mbruna@procomcorp.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : ACCREDITED SURETY & CASUALTY CO	26379
INSURER B : TECHNOLOGY INSURANCE CO	42376
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
PEMICA INC
7324 SW 48 St
MIAMI FL 33155

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	**GENERAL LIABILITY** [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR [X] 0 BI /PD DED GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC	Y	Y	1ABPFL05131855002	05/26/2024	05/26/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 2,000,000.00 $ 100,000.00 $ 5,000.00 $ 2,000,000.00 $ 4,000,000.00 $ 4,000,000.00
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $
	[ ] **UMBRELLA LIAB** [ ] OCCUR [ ] **EXCESS LIAB** [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? **(Mandatory in NH)** Y/N [Y] If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	Y	TWC4303567	09/23/2023	09/23/2024	WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000.00 $ 1,000,000.00 $ 1,000,000.00
A	Business Personal Property	Y	Y	1ABPFL05131855002	05/26/2024	05/26/2025	40,872 Special 80% Co-Ins 1,000 AOP DE 10% WIND & HAIL DED	

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

WHOLESALES DISTRIBUTORS AND INSTALLATION OF ELECTRIC SCALE & METAL DETECTORS
contrato. PO 631806-22
City of Jacksonville its members officers employees and agent are named as ADDITIONAL INSURED with regard to general liability on primary & non contributory basic A waiver of subrogation in favor f the City of Jacksonville its members officers employees and agent applies to general liability and work compensation
30 day notices of cancellation

CERTIFICATE HOLDER
CITY OF JACKSONVILLE
117 WEST DUVAL STREET SUITE # 375
JACKSONVILLE FL 32202

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

AUTHORIZED REPRESENTATIVE
ISIDRO L. GUILLAMA

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Docusign Envelope ID: 0C4D6448-F91B-427C-956A-820E10ABFEDC

Date: 07/09/2024
Attn: Kirah Bays, Mike Soto
Re: Renewal of Bid: ITQ-10968-21
To: City of Jacksonville

PEMICA INC, would like to renew Bid: ITQ-10968-21. Pemica (POA-71512-22). This request represents PEMICA INC. 1-year renewal option from December 2, 2024 through December 1, 2025, under the same terms and conditions as in the Bid.

Antonio Navarro

General Manager

7324 SW 48 Street, Miami FL 33155 USA
☎ (305) 668 0771 - FAX: (305) 668 0719
e-mail: help@pemica.com - www.pemica.com