



# THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

7720 WEST OAKLAND PARK BOULEVARD, SUITE 323 • SUNRISE, FLORIDA 33351-6704 • TEL 954-765-6120

SUPPLY MANAGEMENT & LOGISTICS  
CAROL BARKER, CPPB - ACTING DIRECTOR  
www.browardschools.com

## SCHOOL BOARD

*Chair* PATRICIA GOOD  
*Vice Chair* DONNA P. KORN  
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ABBY M. FREEDMAN  
KATHERINE M. LEACH  
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ANN MURRAY  
DR. ROSALIND OSGOOD  
NORA RUPERT  
  
**ROBERT W. RUNCIE**  
*Superintendent of Schools*

November 22, 2013

### ADDENDUM NUMBER 1 REQUEST FOR INFORMATION (RFI) 14-063P PROPERTY AND CASUALTY INSURANCE BROKERAGE SERVICES

CALLED FOR: DECEMBER 11, 2013 ON OR BEFORE 2:00 P.M. ET

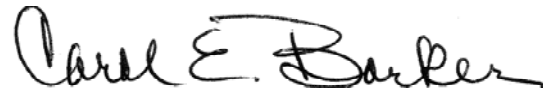
#### TO ALL RESPONDENTS:

This Addendum amends the above-referenced RFI in the following particulars only:

1. Attached are the responses to the questions received.  
In addition to responses to the questions received, attached are: The Current Agreement; Listing of the Property Carriers; and Portions of this RFI in Word Format.
2. DELETE: Page 5 of 24 Pages                                 INSERT: Page 5 of 25 Pages – **REVISED** –

This Addendum is for informational purposes only and need not be returned with your RFI. By virtue of signing the "Required Response Form", Page 1 of RFI No. 14-063P, Respondent certifies acceptance of this Addendum.

Sincerely,



Carol E. Barker, CPPB  
Acting Director Supply Management & Logistics

- **QUESTION #1:** Please provide a copy of the current contract. This should include disclosure of all fees/commissions payable to the current broker.

**ANSWER TO QUESTION #1:** See attached Agreement.

- **QUESTION #2:** Why is the District out for RFI? Are there issues with the current broker? What are likes and dislikes about the current broker?

**ANSWER TO QUESTION #2:** The District has issued this RFI in accordance with its purchasing policies, for due diligence reasons. There is nothing that would be considered an 'issue' with the current broker, and the District has been satisfied with the current broker's service.

- **QUESTION #3:** Please provide a listing of the insurance carriers per line of coverage insuring the District.

**ANSWER TO QUESTION #3:** See attached for property carriers. Casualty lines carriers are listed below:

Excess GL & Auto - Lloyds of London, BRIT  
School Board E&O - Lloyds of London, BRIT  
Terrorism Liability - Lloyds of London  
Excess Work Comp - Liberty Mutual Insurance Corporation  
Crime - Great American Insurance Group  
Storage Tank Liability - Commerce and Industry Insurance  
Boiler & Machinery - Hartford Steam Boiler Inspection  
Student Malpractice - Chicago Insurance Company  
Accidental D&D - Hartford Life & Accident Insurance  
Student Accident - National Union Fire Insurance  
TULIP General Liability - Atlantic Specialty Insurance  
TULIP Property Damage - Atlantic Specialty Insurance

- **QUESTION #4:** Please provide a copy of the property policies providing the \$110 million loss limit.

**ANSWER TO QUESTION #4:** See attached policies.

- **QUESTION #5:** What was the determining factor or reasoning for purchasing a property limit of \$110 million?

**ANSWER TO QUESTION #5:** The determining factor for purchasing the loss limit at its current level was pricing. Previously the District utilized a \$125 million loss limit, then reduced to the current level as of the 2012-13 renewal, when \$125 million became cost prohibitive.

- **QUESTION #6:** Does the current broker provide on location administrative personnel for the District now?

**ANSWER TO QUESTION #6:** Yes, the current broker provides on-site personnel for the purposes of certificate handling and administrative services relevant to the self-insurance program.

- **QUESTION #7:** 1) May a brokerage firm bid on some of the lines and provide services related to those lines, but not every line of coverage up for review?

**ANSWER TO QUESTION #7:** Yes, firms may submit proposals for placement of certain lines and the services related to those lines.

- **QUESTION #8:** As this is an RFI, do you want 1) actual quotations from the insurer market place or 2) pricing indications or 2) no premium pricing/indications at all?

**ANSWER TO QUESTION #8:** At this time, the District does not wish to solicit premium indications of any kind. This RFI is solely for the procurement and execution of a brokerage agreement, whereby the services requested herein and the compensation agreement is set prior to the broker engaging the marketplace.

- **QUESTION #9:** Is commission allowed as the form of compensation or must it be a fee structure?

**ANSWER TO QUESTION #9:** The District's preferred form of broker compensation is a per policy commission, as that is what is currently being utilized and is what is being requested herein, but the District will entertain proposed alternative fee structures.

- **QUESTION #10:** What does the acronym TULIP represent?

**ANSWER TO QUESTION #10:** Tenant and User Liability Insurance Policy. This is a special event policy that provides liability coverage to outside groups using District facilities.

- **QUESTION #11:** Why is the Boiler and Machinery an independent placement from the Property Placement?

**ANSWER TO QUESTION #11:** The District's property program is an excess, layered program designed to provide catastrophic coverage and as such has very high retentions that are not necessarily conducive to boiler and machinery coverage. It behooves the District to have its boiler and machinery coverage placed separately, as it can utilize much lower retentions in what could be considered a 'standard' program. Boiler and machinery coverage is excluded from the property program.

- **QUESTION #12:** In section 2.0 Introduction and General Information, the coverage/limits listed for SBBC's Casualty lines self-insurance program does not clarify if there are/is:
- a. Excess placement besides the crime excess shown at \$10mm
  - b. The full limits shown are fully self-insured limits and TPA services only are wanted or
  - c. If part of the limits shown per line are insured and some is self-insured to get to an aggregate limit?

**ANSWER TO QUESTION #12:** a. The crime limits shown in the RFI represent one policy. There are no additional crime placements. b. The casualty limits shown in section 2.0 represent excess policies purchased by the District that contain high retention levels, or deductibles in some cases, that respond once the retention has been breached. TPA services are not being solicited at this time. c. Listed limits per line show occurrence and aggregate limits (if applicable) and retained limits or deductibles. There is no overall aggregate limit.

- **QUESTION #13:** Could you provide the RFP as a Word document?

**ANSWER TO QUESTION #13:** Various portions of the RFP are now being provided as a Word document.

## 2.0 INTRODUCTION AND GENERAL INFORMATION (Continued)

- 2.4 **Submittal Of RFIs:** Submit RFIs in accordance with Section 4.0. RFIs should be organized and shall include necessary information as to be in full compliance with this Section. In order to facilitate the Response evaluation process, special attention should be paid to organizing RFIs in a manner consistent with Section 4.0. SBBC reserves the right to reject and not consider any RFI that is not submitted in accordance with Section 4.0 or that does not include any necessary information.
- 2.5 **Evaluation and Award:** All responsive RFIs will be evaluated by the Evaluation Committee (hereinafter referred to as "Committee") based upon the information submitted by Respondents in response to Section 4.0 and in accordance with the evaluation criteria established in Section 5.0 for Category a.) Experience and Qualifications, Category b.) Scope of Services, and Category c.) Cost of Services. Category d.) Minority/Women Business Participation will be evaluated and scored by the District's Supplier Diversity & Outreach Program staff. Based upon the evaluation of RFIs, and upon completion of successful negotiations, the Committee will recommend Respondent(s) to SBBC for award. The number of firms to be recommended is solely at the discretion of the Committee.

## 3.0 CALENDAR

November 8, 2013	Release of RFI 14-063P
November 15, 2013	Written questions due on or before 5:00 p.m. ET in Supply Management & Logistics Department
December 11, 2013	RFIs due on or before 2:00 p.m. ET in Supply Management & Logistics Department. RFI opening will be at 7720 West Oakland Park Blvd., Suite 323, Sunrise, Florida 33351-6704.*
January 7, 2014	Evaluation Committee reviews RFIs and Negotiates with top-ranked Respondent. Meeting to be held at Supply Management & Logistics Department 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351-6704 at 9:30 a.m.*
January 10, 2014	Posting of Recommendation

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# THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

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CAROL BARKER, CPPB – ACTING DIRECTOR

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## SCHOOL BOARD

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ANN MURRAY  
DR. ROSALIND OSGOOD  
NORA RUPERT

ROBERT W. RUNCIE  
*Superintendent of Schools*

November 8, 2013

Dear Prospective Respondents:

**SUBJECT: Instructions to Respondents  
Request for Information (RFI) 14-063P – Property and Casualty Insurance Brokerage Services**

The School Board of Broward County, Florida (SBBC) is interested in receiving RFIs, in response to the attached RFI, for **Property and Casualty Insurance Brokerage Services**. Any questions regarding this RFI should be addressed to me, in writing, at the address stated above, via facsimile at 754-321-0533 or via e-mail [carol.barker@browardschools.com](mailto:carol.barker@browardschools.com). No other School Board staff member should be contacted in relation to this RFI. Any information that amends or supplements any portion of this RFI, which is received by any method other than an Addendum issued to the RFI should not be considered and is not binding on SBBC.

In order to assure that your RFI is in full compliance with all requirements of the RFI, carefully read all portions of RFI document paying particular attention to the following areas:

### REQUIRED RESPONSE FORM

Section 1.0, Required Response Form must be completed in full and executed by an authorized representative.

### RFI SUBMITTAL FORMAT

Respondents are requested to organize their RFIs in accordance with Section 4.0. SBBC reserves the right to reject and not consider any RFI not organized and not containing all the information outlined in Section 4.0.

### DUE DATE

RFIs are due in the Supply Management & Logistics Department on the date and time stated in Section 3.0. In order to have your RFI considered, it must be received on or before the date and time due. RFIs received after 2:00 p.m. ET on date due will not be considered.

### STATEMENT OF “NO RESPONSE”

If you are **not** submitting an RFI in response to this RFI, please complete Attachment G, Statement of “No Response” and return via facsimile to 754-321-0533 or scan and send via e-mail [carol.barker@browardschools.com](mailto:carol.barker@browardschools.com). Your responses to the Statement of “No Response” are very important to the Supply Management & Logistics Department when creating future RFIs.

Thank you for your interest in SBBC. Again, if you have any questions, please contact me at the telephone number or e-mail address stated above.

Sincerely,

Carol Barker, CPPB  
Acting Director, Supply Management & Logistics

# REQUEST FOR INFORMATION (RFI)

## RFI 14-063P

### PROPERTY AND CASUALTY INSURANCE BROKERAGE SERVICES



RFI Release Date: November 8, 2013

Written Questions Due: On or Before 5:00 p.m. ET  
November 15, 2013  
in Supply Management & Logistics Department

RFIs Due:\* On or Before 2:00 p.m. ET  
December 11, 2013  
in Supply Management & Logistics Department

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA**  
**Supply Management & Logistics Department**  
**7720 W. Oakland Park Boulevard, Suite 323**  
**Sunrise, Florida 33351-6704**

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**REQUEST FOR INFORMATION (RFI) 14-063P**  
**1.0 REQUIRED RESPONSE FORM**

RELEASE DATE: November 8, 2013

TITLE: **PROPERTY AND CASUALTY INSURANCE BROKERAGE SERVICES**

This RFI must be submitted to the **Supply Management & Logistics Department of The School Board of Broward County, Florida, 7720 W. Oakland Park Boulevard, Suite 323, Sunrise, Florida 33351-6704, on or before 2:00 p.m. ET December 11, 2013** and plainly marked **RFI 14-063P, Property and Casualty Insurance Brokerage Services**. RFIs received after 2:00 p.m. EST on date due will not be considered.

Respondents must submit one complete, original hard-copy RFI (clearly marked as such), and one complete, original electronic version (both clearly marked as "original"). Both the hard copy and electronic RFI originals will constitute the original governing documents. Respondent must also submit 10 additional hard copies (which must be identical to the original RFI, **including any supplemental information/marketing materials**) of the RFI, including this **REQUIRED RESPONSE FORM** (Page 1 of RFI 14-063P), must be fully executed and returned on or before 2:00 p.m. ET on date due to the Supply Management & Logistics Department in accordance with the submittal requirements. In the case of any discrepancy between the **original** hard-copy RFI and the copies, the **original** hard-copy RFI will be the governing document. RFI must contain all information required to be included in the RFI as described herein. Completed RFIs must be submitted in a sealed envelope (package, box, etc.) with the RFI number and name clearly typed or written on the front.

**RESPONDENT INFORMATION**

RESPONDENT'S (COMPANY) NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE AND ZIP CODE: \_\_\_\_\_

RESPONDENT TELEPHONE: \_\_\_\_\_ RESPONDENT FAX: \_\_\_\_\_

RESPONDENT TOLL FREE: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

CONTACT PERSON'S ADDRESS: \_\_\_\_\_

CONTACT TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ TOLL FREE: \_\_\_\_\_

E-MAIL ADDRESS TO SEND PURCHASE ORDERS TO: \_\_\_\_\_

INTERNET E-MAIL ADDRESS: \_\_\_\_\_

INTERNET URL: \_\_\_\_\_

RESPONDENT TAXPAYER IDENTIFICATION NUMBER: \_\_\_\_\_

**Response Certification**

I hereby certify that: I am submitting the following information as my firm's (Respondent) Response and am authorized by Respondent to do so. Respondent has not divulged, discussed, or compared the Response with other Respondents and has not colluded with any other Respondent or party to any other Response; Respondent, its principals, or their lobbyists has not offered campaign contributions to School Board Members or offer contributions to School Board Members for campaigns of other candidates for political office during the period in which the Respondent is attempting to sell goods or services to the School Board. This period of limitation of offering campaign contributions shall commence at the time of the "cone of silence" period for any solicitation for a competitive procurement as described by School Board Policy 3320, Part II, Section HH as well as School Board Policy 1007, Section 5.4 – Campaign Contribution Fundraising. Respondent acknowledges that all information contained herein is part of the public record as defined by the State of Florida Sunshine and Public Records Laws; all responses, data and information contained in this Response are true and accurate. **Respondent agrees to complete and unconditional acceptance of the contents of all pages in this Request for Information (RFI), and all appendices and the contents of any Addenda released hereto; Respondent agrees to be bound to any and all specifications, terms and conditions contained in the Request for Information, and any released Addenda and understand that the following are requirements of this RFI and failure to comply will result in disqualification of Response submitted.**

\_\_\_\_\_  
Signature of Respondent's Authorized Representative (blue ink preferred on original) Date

\_\_\_\_\_  
Name of Respondent's Authorized Representative Title of Respondent's Authorized Representative

**NOTE: Entries must be completed in ink or typewritten.** This original Required Response Form must be fully executed and submitted with this Response (see Section 4.1.4).

## 2.0 INTRODUCTION AND GENERAL INFORMATION

2.1 The School Board of Broward County, Florida (hereinafter referred to as "SBBC") has issued this Request for Information (RFI) with the desire to secure responses from qualified firms, with experience in the Property and Casualty Insurance industry working with school districts and public entities of similar size and diversity as SBBC, to provide comprehensive property and casualty insurance brokerage services (as further defined in Section 4.4.2, Scope of Services) to SBBC. The chosen Respondent must have a demonstrated record of successful design and implementation of property and casualty insurance programs similar in size and scope to SBBC, and be able to offer creative and innovative insurance options. The chosen organization(s) will be held to aggressive service requirements and high-quality standards in providing service. This document defines the skills, capabilities and services that SBBC expects from the selected firm and service provider team(s). This RFI is designed to select a broker only, and coverage is not to be marketed at this time. As such, NO INSURERS MAY BE RESERVED UNTIL BROKER OF RECORD AUTHORIZATION(S) IS/ARE GIVEN. Failure to comply with this requirement may result in disqualification.

SBBC is the sixth largest public school system in the United States, the second largest in the state of Florida and the largest fully-accredited K-12 and adult school district in the nation. SBBC has over 224,000 students in 229 schools and education centers and approximately 175,000 adult students. For more information about SBBC, please visit [www.browardschools.com](http://www.browardschools.com).

SBBC's current broker of record for all lines is Arthur J. Gallagher Risk Management Services, Inc.

Current property values being insured are as follows:

Description	2013-2014
Building Values (includes additions/deletions during policy year)	\$ 5,063,244,756.09
Outdoor Property	\$ 212,739,750.00
Contents including Furniture, Fixtures, Equipment (includes additions/deletions during policy)	\$ 682,707,967.34
Mobile Equipment (including tractors, mowers, etc)	\$ 6,664,362.00
Data Processing Values (includes Hardware, Software and Extra Expense)	\$ 13,383,091.00
Auto Fleet Physical Damage	\$ 93,393,433.00
Valuable Papers/Property in Transit	included
<b>TOTAL INSURED VALUES</b>	<b>\$ 6,072,133,359</b>

SBBC's property insurance program is a multi-faceted, multi-layered program in which it procures a loss limit of \$110 million, divided into three layers, with two additional towers. SBBC also purchases TRIA coverage for its property exposures. The policies are written on an annual basis, and the renewal date for the current program is May 15, 2014. Total property premiums, including fees, are \$14,008,911.

## 2.0 INTRODUCTION AND GENERAL INFORMATION

SBBC self-insures for nearly all of its casualty exposures and purchases excess coverage for those lines. SBBC also purchases TRIA coverage for its casualty exposures. All policies are written on an annual basis with a renewal date of July 1, 2014. Total casualty lines premiums are \$1,560,124.72.

SBBC's casualty lines self-insurance program is as follows:

#	DESCRIPTION	COVERAGE/LIMITS
1	EXCESS GENERAL LIABILITY & AUTO	No Aggregate
		\$700,000 per Occurrence
		\$300,000 Retained Limit
		<b>Employee Benefits Liability</b>
		\$1,400,000 Aggregate
		\$700,000 per Occurrence
2	SCHOOL BOARD E&O	\$2,100,000 Aggregate
		\$700,000 per Occurrence
		\$1,400,000 Aggregate Sexual Abuse
		\$700,000 per Occ Sexual Abuse
		<b>Deductibles:</b>
		\$300,000 each Wrongful Act
		\$300,000 each Employment Practices Violation
		\$300,000 Sexual Harassment
		\$300,000 Sexual Abuse
		Law Enforcement Activities
\$2,100,000 Aggregate		
\$700,000 per Occurrence		
\$300,000 Retained Limit		
3	TERRORISM LIABILITY	\$2,000,000 Aggregate
		\$1,000,000 Occurrence
		\$10,000 Deductible
4	STUDENT MALPRACTICE	\$6,000,000 Aggregate each School
		\$1,000,000 Occurrence
		No Deductible
5	ACCIDENTAL DEATH & DISMEMBERMENT	\$192,456 Accidental Death Benefit
		\$63,854 AD&D in the Line of Duty
		All Law Enforcement are Eligible
		Sub limits Apply
6	STUDENT ACCIDENT	\$6,000,000 Accidental Medical Expense
		\$500,000 Catastrophic Cash Benefit
		\$25,000 Deductible
		Sub limits Apply
7	TULIP - GENERAL	\$1,000,000 Products Completed Agg
		\$1,000,000 Each Occurrence
		\$50,000 Damage to Premises Rented to You

## 2.0 INTRODUCTION AND GENERAL INFORMATION

8	TULIP - PROPERTY	\$1,000,000 Third Party Property Damage
	DAMAGE	\$1,000 Deductible
9	STORAGE TANK	\$1,000,000 Limit per Incident
	LIABILITY	\$4,000,000 Aggregate
		\$5,000 Deductible
10	BOILER &	\$100,000,000 Limit per Breakdown
	MACHINERY	\$10,000 Combined Deductible
11	CRIME	
	<u>Insuring Agreement</u>	<u>Limits</u>
	Public Employee Dishonesty	\$5,000,000
	Faithful Performance of Duty	\$5,000,000
	Forgery or Alteration	\$1,000,000
	Theft, Disappearance, and Destruction	\$50,000
	Robbery and Safe Burglary	\$50,000
	Computer Systems Fraud	\$5,000,000
	Specific Excess Form O - 11 Positions	\$10,000,000
12	EXCESS WORK	Each Accident:
	COMP	WC - Statutory
		Employers Liability - \$1,000,000
		Each Employee for Disease:
		WC - Statutory
		Employers Liability - \$1,000,000
		SIR - \$1,500,000

2.2 **Questions and Interpretations:** Any questions concerning any portion of this RFI must be submitted, in writing, to Carol Barker, Manager, Purchasing Operations, Supply Management & Logistics Department, 754-321-0506 at the address listed in Section 6.1 or via facsimile 754-321-0533 or via e-mail [carol.barker@browardschools.com](mailto:carol.barker@browardschools.com). Any questions which require a response which amends the RFI document in any manner will be answered via Addendum by the Supply Management & Logistics Department and provided to all Respondents. No information given in any other matter will be binding on SBBC.

Any questions concerning any condition or requirement of this RFI must be received in the Supply Management & Logistics Department, in writing, **on or before 5:00 p.m. ET November 15, 2013**. Questions received after this date and time will not be answered. Submit all questions to the attention of the individual stated above. If necessary, an Addendum will be issued. Any verbal or written information, which is obtained other than by information in this RFI document or by Addenda, shall not be binding on SBBC.

2.3 **Contract Term:** The purpose of this RFI is to establish a contract beginning **May 15, 2014, or date of award, whichever is later, and continuing through May 14, 2017**. The term of the contract may, by mutual agreement between SBBC and the Awardee, be extended for two additional one-year periods and, if needed, 180 days beyond the expiration date of the renewal period. Supply Management & Logistics Department, will, if considering renewing, request a letter of intent to renew from each Awardee, prior to the end of the current contract period. The Awardee will be notified when the recommendation has been acted upon by SBBC. All costs shall be firm for the term of the contract. The Respondent agrees to this condition by signing its Response. It is expected that the successful respondent will begin work prior to May 15, 2014 in order to place coverage effective May 15, 2014.

## 2.0 INTRODUCTION AND GENERAL INFORMATION (Continued)

- 2.4 **Submittal Of RFIs:** Submit RFIs in accordance with Section 4.0. RFIs should be organized and shall include necessary information as to be in full compliance with this Section. In order to facilitate the Response evaluation process, special attention should be paid to organizing RFIs in a manner consistent with Section 4.0. SBBC reserves the right to reject and not consider any RFI that is not submitted in accordance with Section 4.0 or that does not include any necessary information.
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**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI**

- 4.1 In order to maintain comparability and facilitate the review process, it is requested that RFIs be organized in the manner specified below. Include all information requested herein in your RFI.
  - 4.1.1 **Title Page:** Include RFI number, subject, the name of the Respondent, address, telephone number and the date.
  - 4.1.2 **Table of Contents:** Include a clear identification of the material by section and by page number.
  - 4.1.3 **Letter of Transmittal:** Include the names of the persons who will be authorized to make representations for the Respondent, their titles, addresses and telephone numbers.
  - 4.1.4 **Required Response Form:** (Page 1 of RFI) with all required information completed and all signatures as specified (**blue ink preferred on original**). Any modifications or alterations to this form shall not be accepted and RFI will be rejected. The enclosed original Required Response Form will be the only acceptable form.
  - 4.1.5 **Notice Provision:** When any of the parties desire to give notice to the other, such notice must be in writing, sent by US Mail, postage prepaid, addressed to the party for whom it is intended at the place last specified; the place for giving notice shall remain such until it is changed by written notice in compliance with the provisions of the paragraph. **This information must be submitted with the RFI or within three days of request.** For the present, the parties designate the following as the respective places for giving notice:

To SBBC: Superintendent of Schools  
SBBC  
600 Southeast Third Avenue  
Fort Lauderdale, Florida 33301

With a Copy to: Director, Risk Management  
SBBC  
600 Southeast Third Avenue  
Fort Lauderdale, Florida 33301

Name of Respondent: \_\_\_\_\_  
(Name of Respondent, Corporation and Agency)

\_\_\_\_\_  
\_\_\_\_\_  
(Address)

With a Copy to: \_\_\_\_\_  
(Name and Position of Designee of Respondent,  
Corporation and Agency)

\_\_\_\_\_  
\_\_\_\_\_  
(Address)

#### 4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)

The SBBC's Supply Management & Logistics Department shall determine whether each Respondent meets the Minimum Eligibility requirements of Section 4.2 and shall only deliver RFIs meeting the Minimum Eligibility requirements to the Evaluation Committee for further evaluation.

4.2 **Minimum Eligibility:** In order to be considered for award and to be further evaluated, Respondent must meet or exceed the following criteria as of the opening date of the RFI. **Failure to accept the terms below and/or to provide the information requested below will result in disqualification of RFI.** The Respondent is responsible for providing the following information in its response. The Respondent must also include a statement of acknowledgement for each item below.

4.2.1 Respondent must accept the requirements of Section 7.1, Indemnification. Will your company accept the requirements as written in Section 7.1 for this contract?  Yes  No **Do not check both boxes.**

4.2.2 Respondents must be duly licensed by, and in good standing with, the State of Florida. Respondents must have experience in providing services for governmental organizations and preferably, public school districts of similar size and scope to SBBC. Respondents must describe and demonstrate their expertise and experience in placing property and casualty insurance for similar clients.

4.3 State under what other or former name(s) the Respondent is currently operating under or has operated under.

4.4 **Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation):** This section represents the information that will be utilized in the evaluation of RFIs received and assignment of points in accordance with the evaluation criteria established in Section 5.0 for RFIs submitted. Respondents are cautioned to read this section carefully and respond with full complete information that will assist the Evaluation Committee in evaluating RFI submitted. **Respondents are requested to respond in the format and organizational structure stated and to refrain from including promotional or advertisement materials in their RFI.** The maximum allowable points (See Section 5.0) that will be awarded for each section are stated. Failure to respond or incomplete responses to any evaluation criteria below will result in zero or reduced allocation of points for the criteria and may result in disqualification of entire RFI.

4.4.1 **Respondent's Qualifications – (Maximum 30 allowable points)**

4.4.1.1 **Executive Summary** – Submit a brief abstract, of approximately three pages, stating the Respondent's understanding of the nature and scope of the services to be provided and capability to comply with all terms and conditions of RFI.

4.4.1.2 Complete, and return, with your RFI, **Attachment B** of the RFI.

4.4.1.3 Provide a statement of any litigation or regulatory action that has been filed or is pending against your firm(s) in the last three years. If an action has been filed, state and describe the litigation or regulatory action filed, and identify the court or agency before which the action was instituted, the applicable case or file number, and the status or disposition for such reported action. If no litigation or regulatory action has been filed against your firm(s), provide a statement to that effect. For joint venture or team Respondents, submit the requested information for each member of the joint venture or team.

## 4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)

### 4.4.1 Respondent's Qualifications

- 4.4.1.4 Provide a brief description of the agency/company, its services, and its overall qualifications. Information provided in this section should include, but not be limited to: number of years providing similar services, number of employees, and approximate number of clients. For national or multi-office locations, provide information on both a firm-wide basis as well as the office from which the account will be serviced
- 4.4.1.5 Staffing: Identify the proposed account executive and any other staff who will provide regular services to SBBC in providing the insurance broker/agent services described herein. For each person identified, include information indicating the length of time with the agency/company, length of service in insurance or risk management, approximate number of clients served, and any professional/associate designations.
- 4.4.1.6 Qualifications and Relevant Experience: Briefly describe the agency/company's qualifications and relevant experience in providing insurance programs as described in this RFI and for organizations similar in size and scope to that of SBBC, including TIV, premiums, broker compensation amounts, and any other information that may be relevant to SBBC. Based upon your review of information about the SBBC's programs and services and its existing insurance coverages, provide any comments or suggestions for the SBBC's consideration for the specific insurance quotations to be negotiated subsequent to this RFI.
- 4.4.1.7 References: Provide at least five (5) customer references currently receiving the brokerage services being requested herein from the agency/company. For each reference, provide an individual contact person name, address, email address and telephone number.
- 4.4.1.8 List of Insurance Carriers: Respondents must list, in order of preference, the insurance carriers that the insurance broker/agent firm has access to and would prefer to utilize if selected to provide a firm insurance quote, should the SBBC decide to contract with the Respondent. Respondents may not contact any insurance carriers to obtain pricing until authorized to do so by the SBBC.



**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)**

**4.4 Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation) (Continued):**

**4.4.2 Scope of Services Provided – (Maximum 35 allowable points):** Clearly describe how the Respondent can accomplish each of the following in the Scope of Services provided below. The Respondent selected through this RFI will be responsible for assisting the SBBC with all aspects of obtaining and maintaining its property and casualty insurance coverages, including at a minimum, but not limited to:

Section	Scope of Service	Yes, Can Comply	Yes, Can Comply But With Stated Deviations	No, Cannot Comply or Provide
4.4.2.1	Respondent shall use its best efforts to place the following lines of insurance coverage on SBBC's behalf: property and ancillary insurance coverages. Ancillary insurance coverages include, but are not limited to property insurance terrorism, package policy (including primary property, excess general and automobile liability coverage), petroleum storage tank liability, accidental death and dismemberment for security officers, broadcaster's liability, builder's risk and catastrophic student accident.			
4.4.2.2	Consult with SBBC to formulate a marketing strategy that focuses on delivering a cost-effective risk management strategy and structure based upon current market conditions. Suggest alternative risk financing vehicles to reduce SBBC's cost of risk.			
4.4.2.3	Work with SBBC to produce comprehensive underwriting data and criteria for insurance carrier negotiations. Represent SBBC in negotiations with insurers, underwriters and other parties with regards to the insurance program.			
4.4.2.4	Formally present coverage submissions to agreed-upon insurance carrier(s) and negotiate terms on behalf of SBBC.			
4.4.2.5	Annually, coordinate and provide SBBC with copies of catastrophe analysis studies to be used in the marketing of the program.			
4.4.2.6	Summarize the results of executing the marketing strategy developed with SBBC and communicate program recommendations.			
4.4.2.7	Provide consultation to SBBC on exposures, existing coverage, and the desirability and/or feasibility of potential program changes when recommended or when requested by SBBC.			
4.4.2.8	Request change endorsements, when requested by SBBC or when otherwise necessary, ensuring accuracy and delivery in a timely manner.			

**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)**

**4.4 Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation) (Continued):**

**4.4.2 Scope of Services Provided (Continued)**

Section	Scope of Service	Yes, Can Comply	Yes, Can Comply But With Stated Deviations	No, Cannot Comply or Provide
4.4.2.9	Administer insurance program, including extensive policy review and issuance, invoicing, coordination and/or issuance of required documentation; i.e., automobile identification cards, certificates of insurance and other program administration, as required by the SBBC.			
4.4.2.10	Review accounting and billing data received from insurance markets on SBBC's behalf to ensure accuracy.			
4.4.2.11	Annually, provide stewardship report summarizing program and services provided throughout the year.			
4.4.2.12	Provide SBBC Risk Management department staff with access to, and training for, online access to policy information and relevant risk management tools.			
4.4.2.13	Except with the prior written approval of SBBC, place insurance on behalf of SBBC with insurers that meet or exceed agreed upon minimum financial guidelines or a Best rating of not less than "A-" as assigned by A.M. Best. Monitor published financial information of any insurers with whom SBBC's coverage is placed. Alert SBBC if the status of an insurer falls below the A.M. Best guidelines herein.			
	<b>CLAIMS ADMIN/PERSONNEL:</b>			
4.4.2.14	Participate in claims review meetings to ensure accuracy of reserves and effective claims management.			
4.4.2.15	Provide, and coordinate with, designated property insurance catastrophic claims adjuster for purposes of adjusting ground-up catastrophic property losses with respect to necessary documentation for FEMA assistance.			
4.4.2.16	Assist with emergency procedures and disaster planning.			
4.4.2.17	Assist with claim and coverage disputes.			
	<b>LOSS CONTROL PERSONNEL:</b>			
4.4.2.18	Develop, with SBBC's assistance and involvement, loss control programs and strategies, including educational training, seminars, research and analysis of loss trends, and develop communication materials.			

**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)**

**4.4 Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation) (Continued):**

**4.4.2 Scope of Services Provided (Continued)**

Section	Scope of Service	Yes, Can Comply	Yes, Can Comply But With Stated Deviations	No, Cannot Comply or Provide
4.4.2.19	Provide a full-time, qualified loss control representative to assist with the implementation of such loss control programs and strategies mentioned in 4.4.2.18. Loss control services will not be limited to property exposures but will also support the SBBC workers' compensation program and other safety initiatives as agreed between Respondent and SBBC.			
	<b>ADMINISTRATIVE PERSONNEL:</b>			
4.4.2.20	Provide administrative support services to the SBBC Risk Management department. This support will include a full-time staff member employed by and managed by Respondent and located at the SBBC Risk Management department. This full-time staff member will work with Respondent and SBBC staff to manage certificate of insurance issuance, update and coordinate Risk Management insurance policy files, assist in statement of values development, and provide other administrative support services as agreed between Respondent and SBBC.			
	<b>ADDITIONAL SERVICES WHICH MAY BE REQUESTED OF RESPONDENT:</b>			
4.4.2.21	<b>APPRAISAL SERVICES:</b> Subcontract with a vendor approved by SBBC to provide reconstruction cost appraisal services for certain facilities of SBBC as agreed upon by Respondent and SBBC.			
4.4.2.22	<b>RISK MANAGEMENT INFORMATION SYSTEMS:</b> Provide Risk Management with access or subscription to a Risk Management Information System (Exigis, or equivalent).			
4.4.2.23	<b>INSURANCE CERTIFICATE TRACKING SYSTEM:</b> Provide Risk Management with access or subscription to a certificate tracking program (EBIX, or equivalent).			
	<b>MONTHLY STATEMENT OF SERVICES RENDERED:</b>			
4.4.2.24	Respondent shall submit a monthly statement of all services rendered (including total hours), within 10 days of the end of each calendar month, to be reviewed by Risk Management.			

**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)**

**4.4 Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation) (Continued):**

4.4.3 **Cost of Services - (30 points maximum):** The selected Respondent's compensation for services will be based on commission paid to the Respondent by the Insurance Carriers; SBBC will not be responsible for Respondent compensation. Respondents shall submit, with their RFI response, a proposed compensation structure for the services requested herein that adheres to points 4.4.3.1 through 4.4.3.3 below. The proposed compensation structure shall incorporate all of the services listed in Section 4.4.2, including the Additional Services. Scoring for this section will be based on the Respondent's ability to substantiate the proposed compensation levels using similarly-sized clients it services; as well providing estimates for total annual hours spent servicing the account, to include any hours of hired professionals.

4.4.3.1 It is the intent of SBBC to provide the Respondent with a compensation agreement that is fair and reasonable for both Respondent and the SBBC. Additionally, this agreement must be legal, transparent, and defensible to the Board Members of SBBC.

4.4.3.2 Due to the high cost in premiums, the SBBC will negotiate for a flat rate of commission for all of its property and casualty insurance policies.

4.4.3.3 The favored compensation to the awarded Respondent is flat commission. The negotiated commission rate will be the total income received by the selected Respondent. Total income will be defined as any income received directly or indirectly, including, but not limited to, commissions, contingent commissions, retrocession fees or commission.

The Respondent with whom SBBC contracts for provision of property and casualty insurance brokerage services will ultimately be subject to the following provisions with respect to compensation:

- A. Total income must be identified for each policy.
- B. Income received by the company, broker, or agency must be limited to the negotiated rate for each policy. This income should be inclusive of all income received by the parent corporation, subsidiaries, and associated companies. Confirmation and documentation should be provided.
- C. Where independent wholesale brokers are used, the total income received by the wholesale broker must be limited to the negotiated rate for each policy. This negotiated rate should be inclusive of all income received by the parent corporation, subsidiaries, and associated companies. Confirmation and documentation should be provided.

**MAXIMUM POINTS ALLOCATED: \_\_\_\_\_ 30**

**4.0 INFORMATION TO BE INCLUDED IN THE SUBMITTED RFI (Continued)**

**4.4 Evaluation Criteria - (Respondent Qualifications, Scope of Services, Costs of Services and M/WBE Participation) (Continued):**

4.4.4 **M/WBE Participation: (Maximum 5 allowable points):** SBBC has a Supplier Diversity & Outreach Program. An M/WBE is defined by SBBC as any legal entity, other than a joint venture, which is organized to engage in commercial transactions and which is a least 51% owned and controlled by minority persons. For information on M/WBE Certification, contact SBBC's Supplier Diversity & Outreach Program at 754-321-0550. SBBC's Florida Supplier Diversity & Outreach Program works to increase the participation of Minority and Women Business Enterprise (M/WBE). It is the intent of the Supplier Diversity & Outreach Program to have a diverse group, as well as an equitable distribution of M/WBE's, participating on in this RFI.

4.4.4.1	<b>M/WBE Information:</b> Respondent will be evaluated and points will be allocated for criterion 4.4.4.2, 4.4.4.3 and 4.4.4.4 depending on the information submitted by the Respondent	<b>Maximum Points</b>
4.4.4.2	Identify the M/WBE firm or firms who will be working with you on this engagement (see Attachment A3, M/WBE Participation). Indicate the extent and nature of the M/WBE's work with specificity, as it relates to the services as described in this RFI, including the percentage of the total costs which will be received by the M/WBE firm in connection with this RFI (See Attachment A3).	<b>3</b>
4.4.4.3	Respondent shall provide the staff diversity information by completing and submitting Attachment A2, Employment Diversity Statistics.	<b>1</b>
4.4.4.4	Respondent shall submit information of its involvement in the minority community. Such evidence may include, but not be limited to, minority sponsored events, purchases made from minority companies, scholarship funds targeting minority students, financial contributions and/or providing other corporate resources for minority community projects.	<b>1</b>
	<b>TOTAL POINTS</b> .....	<b>5</b>
	The selected Respondent will be required to submit a monthly M/WBE Utilization Report (see Attachment A1) to our Supplier Diversity & Outreach Program, which will track payments to M/WBE(s). This report is required 15 days after the end of each month, whether the M/WBE(s) received payments or not, until all committed remuneration has been received by the M/WBE. <b><u>State your willingness to comply with this requirement.</u></b>	
	Selected Respondent must provide the Supplier Diversity & Outreach Program a 30-day written notice for substitution of an M/WBE Respondent. <b><u>State your willingness to comply with this requirement.</u></b>	

## 5.0 EVALUATION OF RFI

- 5.1 The Evaluation Committee (hereinafter referred to as "Committee"), shall evaluate all RFIs received, which meet or exceed Section 4.2, Minimum Eligibility Requirements and Section 7.1 Indemnification, according to the following criteria:

<u>CATEGORY</u>	<u>MAXIMUM POINTS</u>
A. Experience and Qualifications	30
B. Scope of Services	35
C. Cost of Services	30
D. Supplier Diversity & Outreach Program	
D.1 Participation	3
D.2 Diversity	1
D.3 Community Outreach	<u>1</u>
<b>TOTAL</b>	<b>100</b>

Failure to respond, provide detailed information or to provide requested RFI elements may result in the reduction of points in the evaluation process. The Committee may recommend the rejection of any Response containing material deviations from the RFI. The Committee may recommend waiving any irregularities and technicalities.

- 5.2 The Committee reserves the right to ask questions of a clarifying nature once RFIs have been opened, require presentations from all Respondents, interview any or all Respondents that respond to the RFI, or make their recommendations based solely on the information contained in the RFIs submitted. Presentations, if required, will be part of the evaluation process.
- 5.3 Based upon Section 5.1, the Committee, at its sole discretion, may commence negotiations with selected Respondent(s). The Committee reserves the right to negotiate any term, condition, specification or price (other than Section 4.2 and Section 7.1) with a selected Respondent(s). In the event that mutually agreeable negotiations cannot be reached with a Respondent, the Committee may negotiate with the next ranked Respondent(s), and so forth. An impasse may be declared by the Committee at any time. The Committee will make a recommendation to the Superintendent. The Superintendent may choose to post the recommendation as its intended action of the District in accordance with Section 120.57(3) Florida Statutes or the Superintendent may choose to return the recommendation to the Committee for further deliberations consistent with the RFI.
- 5.4 **Selection:** SBBC intends to make a selection only to the Respondent that has complied with the terms, conditions and requirements of the overall RFI. After the conclusion of negotiations, the recommended selection would be made for the services sought in the RFI in accordance with the terms of negotiations. The selection(s) shall not be a guarantee of business or a guarantee of volume of service. Any Agreement resulting from these negotiations must be approved by SBBC's Attorney, must be governed by the laws of the State of Florida, and must have venue established in the 17<sup>th</sup> Court of Broward County, Florida or the United States Court of the Southern District of Florida. This Agreement approved by the SBBC's Attorney will be submitted to SBBC for final approval. **Approval shall not be a guarantee of business, a guarantee of specified volume of service or minimum dollar revenue to be received on this contract.**

## 6.0 SPECIAL CONDITIONS

- 6.1 The complete original hard-copy Response properly completed and signed must be submitted in a sealed envelope and received **on or before 2:00 p.m. ET, December 11, 2013** at the following address in order to be considered:

SUPPLY MANAGEMENT & LOGISTICS DEPARTMENT  
SBBC  
7720 West Oakland Park Boulevard, Suite 323  
Sunrise, Florida 33351-6704

**Attention: RFI 14-063P – PROPERTY AND CASUALTY INSURANCE BROKERAGE SERVICES**

Respondent shall submit one complete original hard-copy Response with an original manual signature (**blue ink preferred**) as well as an original electronic copy. Respondent should also submit ten (10) additional copies of RFI. The RFI containing the original manual signature (blue ink preferred) should be clearly identified as the original RFI. In the case of any discrepancy between the original RFI and any other documents provided, the original RFI will be the governing document. All RFIs shall be submitted in sealed packaging with RFI number and the Respondents firm name clearly marked on the exterior of package.

- 6.2 **JOINT VENTURES:** In the event multiple Respondents submit a joint RFI in response to the RFI, a single Respondent shall be identified as the Prime Respondent. If offering a joint RFI, Prime Respondent must include the name and address of all parties of the joint RFI. Prime Respondent shall provide all bonding and insurance requirements, execute any Contract, complete the **REQUIRED RESPONSE FORM** shown herein, have overall and complete accountability to resolve any dispute arising within this contract. Only a single contract with one Respondent shall be acceptable. Prime Respondent responsibilities shall include, but not be limited to, performing of overall contract administration, preside over other Respondents participating or present at SBBC meetings, oversee preparation of reports and presentations, and file any notice of protest and final protest as described herein. Prime Respondent shall also prepare and present a consolidated invoice(s) for services performed. SBBC shall issue only one check for each consolidated invoice to the Prime Respondent for services performed. Prime Respondent shall remain responsible for performing services associated with response to this RFI.

### 6.3 **INSURANCE REQUIREMENTS**

#### **MINIMUM INSURANCE REQUIREMENTS**

- 6.3.1 **GENERAL LIABILITY:** Limits not less than \$1,000,000 per occurrence for Bodily Injury/ Property Damage; \$1,000,000 General Aggregate. Limits not less than \$1,000,000 for Products/Completed Operations Aggregate.
- 6.3.2 **WORKER'S COMPENSATION:** Florida Statutory limits in accordance with Chapter 440; Employer's Liability limits not less than \$100,000/\$100,000/\$500,000 (each accident/disease-each employee/disease-policy limit).
- 6.3.3 **PROFESSIONAL LIABILITY:** Limits not less than \$1,000,000 per occurrence covering services provided under this contract.
- 6.3.4 **AUTO LIABILITY:** Owned, Non-Owned and Hired Auto Liability with Bodily Injury and Property Damage limits of not less than \$1,000,000 Combined Single Limit.  
If Awardee does not own any vehicles, hired and non-owned automobile liability coverage in the amount of \$1,000,000 will be accepted. In addition, an affidavit signed by the Awardee must be furnished to SBBC indicating the following:  
\_\_\_\_\_(Awardee Name) does not own any vehicles. In the event insured acquires any vehicles throughout the term of this agreement, insured agrees to provide proof of "Any Auto" coverage effective the date of acquisition. (Fax affidavit with Certificate of Insurance to SBBC Risk Management at 866-897-0424.)
- 6.3.5 **ACCEPTABILITY OF INSURANCE CARRIERS:** The insurance policies shall be issued by companies qualified to do business in the State of Florida. The insurance companies must be rated at least A- VI by AM Best or Aa3 by Moody's Investor Service.

## 6.0 SPECIAL CONDITIONS

### 6.3 INSURANCE REQUIREMENTS (Continued):

- 6.3.6 **VERIFICATION OF COVERAGE:** Proof of the required insurance must be furnished by an Awardee to SBBC Risk Management Department by Certificate of Insurance within 15 days of notification of award. All certificates (and any required documents) must be received and approved by SBBC before any work commences to permit Awardee time to remedy any deficiencies. **FAX CERTIFICATES OF INSURANCE TO SBBC RISK MANAGEMENT AT 866-897-0424.**
- 6.3.7 **REQUIRED CONDITIONS:** Liability policies must contain the following provisions. In addition, the following wording must be included on the Certificate of Insurance:  
The School Board of Broward County, FL, its members, officers, employees and agents are added as additional insured. The endorsement # is: \_\_\_\_\_.  
All liability policies are primary of all other valid and collectable coverage maintained by the School Board of Broward County, Florida.  
(\*Please include the Contract # and Title on the Certificate of Insurance.)  
(Certificate Holder: School Board of Broward County, 600 Southeast Third Avenue, Fort Lauderdale, Florida 33301.)
- 6.3.8 **CANCELLATION OF INSURANCE:** Vendors are prohibited from providing services under this contract with SBBC without the minimum required insurance coverage and must notify SBBC within two business days if required insurance is cancelled.

### 6.4 AWARDEE ACCOUNTING RECORDS AND RIGHT TO AUDIT PROVISIONS:

- 6.4.1 Awardee's and Sub-Contractor's records shall include, but not be limited to, accounting records, payroll time sheets, audited and unaudited financial statements to substantiate payment rates and income, written policies and procedures, Sub-Contractor's files and any other supporting evidence necessary to substantiate payments and income related to this Agreement (all the foregoing herein after referred to as "records") shall be open to inspection and subject to audit and/or reproduction, during normal working hours, by SBBC's agent or its authorized representative to the extent necessary to adequately permit evaluation and verification of any invoices, payments or claims submitted by the Awardee(s) or any of his/her payees pursuant to the execution of the Agreement. Such records subject to examination shall also include, but not be limited to, those records necessary to evaluate and verify payments and any other matters or items associated with this Agreement.
- 6.4.2 For the purpose of such audits, inspections, examinations and evaluations, SBBC's agent or authorized representative shall have access to said records from the effective date of this Agreement, for the duration of the work, and until five (5) years after the date of final payment by Awardee(s) pursuant to this Agreement. All payments which cannot be documented as paid as required by the Agreement, and found not to be in compliance with the provisions of this Agreement, shall be reimbursed to SBBC.
- 6.4.3 SBBC's agent or its authorized representative shall have access to the Awardee's facilities, shall have access to all necessary records and shall be provided adequate and appropriate work space, in order to conduct audits in compliance with this article. SBBC's agent or its authorized representative shall give audited firm reasonable advance notice of intended audits.
- 6.4.4 Awardee(s) shall certify that payments are accurate and correct on each and every payment. If an audit reveals discrepancies, such as an over payment, the Awardee will be required to reimburse SBBC for the discrepancy with a minimum of eighteen percent (18%) per annum.
- 6.4.5 If an audit inspection or examination in accordance with this article, discloses over payments (of any nature) to the Awardee(s) by SBBC in excess of ten (10%) percent of the total payments, the actual cost of SBBC's audit shall be paid by the Awardee as well as the over payments by SBBC.

### 6.5 W-9 FORM

- 6.5.1 All Respondents are requested to complete the attached W-9, **Attachment C**, and submit with their RFI.



## 7.0 GENERAL CONDITIONS

- 7.1 **INDEMNIFICATION:** This General Condition of the RFI is NOT subject to negotiation and any RFI that fails to accept these conditions will be rejected as "non-responsive".
- 7.1.1 By SBBC: SBBC agrees to be fully responsible for its acts of negligence or its agents' acts of negligence when acting within the scope of their employment and agrees to be liable for any damages resulting from said negligence. Nothing herein is intended to serve as a waiver of sovereign immunity by SBBC. Nothing herein shall be construed as consent by SBBC to be sued by third parties in any matter arising out of any contract. Nothing herein shall be construed as a waiver by SBBC to any rights or limits to liability under Section 768.28, Florida Statutes.
- 7.1.2 By AWARDEE: AWARDEE agrees to indemnify, hold harmless and defend SBBC, its agents, servants and employees from any and all claims, judgments, costs and expenses including, but not limited to, reasonable attorney's fees, reasonable investigative and discovery costs, court costs and all other sums which SBBC, its agents, servants and employees may pay or become obligated to pay on account of any, all and every claim or demand, or assertion of liability, or any claim or action founded thereon, arising or alleged to have arisen out of the products, goods or services furnished by the VENDOR, its agents, servants or employees; the equipment of the AWARDEE, its agents, servants or employees while such equipment is on premises owned or controlled by SBBC; or the negligence of AWARDEE or the negligence of AWARDEE's agents when acting within the scope of their employment, whether such claims, judgments, costs and expenses be for damages, damage to property including SBBC's property, and injury or death of any person whether employed by the AWARDEE, SBBC or otherwise.
- 7.2 **IRREVOCABILITY OF RFI:** An RFI may not be withdrawn before the expiration of 90 days from the date of RFI opening.
- 7.3 **EVALUATION COMMITTEES AND RFI:** SBBC and its RFI Evaluation Committees evaluate and negotiate all RFIs in accordance with State Statutes 119.071 and 286.0113.
- ..
- 7.4 **INFORMATION NOT IN RFI:** No verbal or written information which is obtained other than by information in this document or Addenda to this Request for Information shall be binding on SBBC.
- 7.5 **RFI PUBLIC RECORD:** Respondent acknowledges that all information contained within their RFI is part of the public domain as defined by the State of Florida Sunshine and Public Record Laws.
- 7.6 **NONCONFORMANCE TO CONTRACT CONDITIONS:** Services offered must be in compliance with RFI conditions and specifications and any resulting Agreement at all times. Services not conforming to RFI conditions, specifications or time frames may be terminated at Awardee(s) expense and acquired on the open market. Any increase in cost may be charged against the Awardee(s). Any violation of these stipulations may also result in:
- 7.6.1 For a period of two years, any RFI submitted by Respondent will not be considered and will not be recommended for award.
- 7.6.2 All departments being advised not to do business with Respondent.
- 7.7 **APPLICABLE LAW:** This RFI and any Agreement resulting from it shall be interpreted and construed according to the laws of the State of Florida.
- 7.8 **GOVERNING LAW:** This RFI, and any award(s) resulting from this RFI, shall be interpreted and construed in accordance with the laws of the State of Florida. Any protests arising from this RFI shall be subject to Section 120.57(3), Florida Statutes. Any disputes or controversies arising out of a contract awarded under this RFI shall be submitted to the jurisdiction of the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida.
- 7.9 **LEGAL REQUIREMENTS:** Federal, state, county and local laws, ordinances, rules and regulations that in any manner affect the goods or services covered herein apply. Lack of knowledge by the Respondent will in no way be a cause for relief from responsibility.
- 7.10 **ADVERTISING:** In submitting an RFI, Respondent agrees not to use the results therefrom as a part of any commercial advertising without prior written approval of SBBC.

## 7.0 GENERAL CONDITIONS (Continued)

- 7.11 **PAYMENT:** A purchase order will be released after award by SBBC for any services to be performed as a result of the RFI. Payment will be provided after services are in compliance with all the conditions of this RFI. All payments will be made by ACH (Automated Clearing House) for automatic deposits (credits). ACH Payment Agreement Form is attached to this RFI.
- 7.12 **EXPENDITURE:** No guarantee is given or implied as to the total dollar value or work as a result of this RFI. SBBC is not obligated to place any order for services performed as a result of this award. Order placement will be based upon the needs and in the best interest of SBBC.
- 7.13 **CONFLICT OF INTEREST AND CONFLICTING EMPLOYMENT OR CONTRACTUAL RELATIONSHIP:** Section 112.313 (3) and (7), Florida Statutes, sets forth restrictions on the ability of SBBC employees acting in a private capacity to rent, lease, or sell any realty, goods, or services to SBBC. It also places restrictions on SBBC employees concerning outside employment or contractual relationships with any business entity which is doing business with SBBC. Each Respondent is to disclose any employees it has who are also SBBC employees by submitting Attachment B with its RFI. Any employees identified by the Respondent when completing Attachment B should obtain legal advice as to their obligations and restrictions under Section 112.313 (3) and (7), Florida Statutes.
- 7.14 **PATENTS AND ROYALTIES:** The Respondent, without exception, shall indemnify and save harmless SBBC and its employees from liability of any nature or kind, including cost and expenses for any copyrighted, patented, or unpatented invention, process, or article manufactured or used in the performance of the contract, including its use by SBBC. If the Respondent uses any design, device, or materials covered by letters, patent, or copyright, it is mutually understood and agreed without exception that the RFI prices shall include all royalties or cost arising from the use of such design, device or materials in any way involved in the work.
- 7.15 **DISPUTES:** In the event of a conflict between the documents, the order of priority of the documents shall be as follows:
- Any Agreement resulting from the award of this RFI (if applicable); then
  - Addenda released for this RFI, with the latest Addendum taking precedence; then
  - the RFI; then
  - Respondent's RFI
- In case of any other doubt or difference of opinion, the decision of SBBC shall be final and binding on both parties.
- 7.16 **OSHA:** The Respondent warrants that the product supplied to SBBC shall conform in all respects to the standards set forth in the Occupational Safety and Health Act of 1970, as amended, and the failure to comply with this condition will be considered as a breach of contract.
- 7.17 **ANTI-DISCRIMINATION:** SBBC prohibits any policy or procedure which results in discrimination on the basis of age, color, disability, gender identity, gender expression, national origin, marital status, race, religion, sex or sexual orientation. Individuals who wish to file a discrimination and/or harassment complaint may call the Executive Director, Benefits & EEO Compliance at 754-321-2150 or Teletype Machine TTY 754-321-2158.
- 7.18 **LIABILITY, INSURANCE, LICENSES AND PERMITS:** The Respondent agrees to The Indemnification Provision stated herein and will assume the full duty, obligation and expense of obtaining all necessary licenses, permits and insurance. Where Awardee(s) is required to enter or go onto SBBC property to deliver materials or perform work or services, the Awardee(s) shall be liable for any damages or loss to SBBC occasioned by negligence of the Awardee(s) (or agent) or any person the Awardee(s) has designated in the completion of the contract.
- 7.19 **BILLING INSTRUCTIONS AND PAYMENT:** Invoices, unless otherwise indicated, must show purchase order numbers and shall be submitted in duplicate to the Accounts Payable Department of SBBC, 1643 N. Harrison Parkway, Building H, Sunrise, Florida 33323. Payment will be made a minimum of 30 days after delivery, authorized inspection and acceptance. When vendors are directed to send invoices to a school, the school will make direct payments to the vendor.
- 7.20 **PUBLIC ENTITY CRIMES:** Section 287.133(2)(a), Florida Statutes, as currently enacted or as amended from time to time, states that a person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a RFI on a contract to provide any goods or services to a public entity, may not submit an RFI on a contract with a public entity for the construction or repair of a public building or public work, may not submit an RFI on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017 for CATEGORY TWO [currently \$25,000] for a period of 36 months from the date of being placed on the convicted vendor list.

## 7.0 GENERAL CONDITIONS (Continued)

- 7.21 **CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY OR VOLUNTARY EXCLUSION - Lower Tier Covered Transactions:** Executive Order 12549, as currently enacted or as amended from time to time, provides that, to the extent permitted by law, Executive departments and agencies shall participate in a government-wide system for non-procurement debarment and suspension. A person who is debarred or suspended shall be excluded from Federal financial and non-financial assistance and benefits under Federal programs and activities. Except as provided in § 85.200, Debarment or Suspension, § 85.201, Treatment of Title IV HEA participation, and §85.215, Exception provision, debarment or suspension of a participant in a program by one agency shall have government-wide effect. A lower tier covered transaction is, in part, any transaction between a participant [SBBC] and a person other than a procurement contract for goods or services, regardless of type, under a primary covered transaction; and any procurement contract for goods or services between a participant and a person, regardless of type, expected to equal or exceed the Federal procurement small purchase threshold fixed at 10 U.S.C. 2304(g) and 41 U.S.C. 253(g) (currently \$100,000) under a primary covered transaction; or any procurement contract for goods or services between a participant and a person under a covered transaction, regardless of amount, under which that person will have a critical influence on or substantive control over that covered transaction. A participant may rely upon the certification of a prospective participant in a lower tier covered transaction that it and its principals are not debarred, suspended, proposed for debarment under 48 CFR part 9, subpart 9.4, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. Each participant shall require participants in lower tier covered transactions to include the certification for it and its principals in any RFI submitted in connection with such lower tier covered transactions.

### CERTIFICATION

- 7.21.1 The prospective lower tier participant certifies, by submission of this RFI, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- 7.21.2 Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this RFI.
- 7.22 **BUSINESS ENTERPRISE (M/WBE) PARTICIPATION:** SBBC has a Supplier Diversity & Outreach Program whose intent is to have a diverse group of Minorities and Women Business enterprises (M/WBE) participating on SBBC contract awards. SBBC encourages each Respondent to make every reasonable effort to include M/WBE participation on any contract award under this RFI. An M/WBE is defined by SBBC as any legal entity, other than a joint venture, which is organized to engage in commercial transactions and which is at least 51% owned and controlled by minority or women. If the Respondent is a Certified M/WBE by SBBC or by the State of Florida, Office of Supplier Diversity, Department of Management, Respondent should indicate its certification number in its RFI.

For information on M/WBE Certification, or to obtain information on locating certified M/WBE's, contact SBBC's Supplier Diversity & Outreach Programs at 754-321-0550 or [www.broward.k12.fl.us/supply/vendors/mwbe.htm](http://www.broward.k12.fl.us/supply/vendors/mwbe.htm).

To receive evaluation points for M/WBE participation, the RFI shall identify the specific certified M/WBE which will be utilized. The specific elements of work each M/WBE will be responsible for performing, and the dollar value of the work, as the percentage of the total contract value, must be provided.

## 7.0 GENERAL CONDITIONS (Continued)

7.23 **PROTESTING OF RFI CONDITIONS/SPECIFICATIONS:** Any person desiring to protest the conditions/specifications in this RFI, or any Addenda subsequently released thereto, shall file a notice of intent to protest, in writing, within 72 hours after electronic release of the competitive solicitation or Addendum and shall file a formal written protest within ten calendar days after the date the notice of protest was filed. Saturdays, Sundays, state holidays or days during which the school district administration is closed shall be excluded in the computation of the 72 hours. If the tenth calendar day falls on a Saturday, Sunday, state holiday or day during which the school district administration is closed, the formal written protest must be received on or before 5:00 p.m. EST of the next calendar day that is not a Saturday, Sunday, state holiday or day during which the school district administration is closed. Section 120.57(3)(b), Florida Statutes, as currently enacted or as amended from time to time, states that **"The formal written protest shall state with particularity the facts and law upon which the protest is based"**.

Failure to file a notice of protest or to file a formal written protest within the time prescribed by Section 120.57(3), Florida Statutes, or a failure to post the bond or other security required by Policy 3320, within the time allowed for filing a bond, shall constitute a waiver of proceedings. The failure to post the bond required by SBBC Policy 3320, Part VIII, as currently enacted or as amended from time to time, shall constitute a waiver of proceedings. Notices of protest, formal written protests, and the bonds required by Policy 3320, shall be filed at the office of the Director of Supply Management & Logistics, 7720 West Oakland Park Boulevard, Suite 323, Sunrise, Florida 33351 (fax 754-321-0936). Fax filing will not be acceptable for the filing of bonds.

7.24 **POSTING OF RFI RECOMMENDATIONS/TABULATIONS:** RFI Recommendations and Tabulations will be posted in the Supply Management & Logistics Department and on [www.demandstar.com](http://www.demandstar.com) on January 10, 2014 at 3:00 p.m. ET, and will remain posted for 72 hours. Any change to the date and time established herein for posting of RFI Recommendations/Tabulations shall be posted in the Supply Management & Logistics Department and/or at [www.demandstar.com](http://www.demandstar.com) (under the document section for this RFI). In the event the date and time of the posting of RFI Recommendations/Tabulations is changed, it is the responsibility of each Respondent to ascertain the revised date of the posting of RFI Recommendations/Tabulations. Any person desiring to protest the intended decision shall file a notice of protest, in writing, within 72 hours after the posting of the RFI tabulation and shall file a formal written protest within ten calendar days after the date the notice of protest was filed. Saturdays, Sundays, state holidays and days during which the school district administration is closed shall be excluded in the computation of the 72 hours. If the tenth calendar day falls on a Saturday, Sunday, state holiday or day during which the school district administration is closed, the formal written protest must be received on or before 5:00 p.m. EST of the next calendar day that is not a Saturday or Sunday, state holiday or days during which the school district administration is closed. No submissions made after the RFI opening amending or supplementing the RFI shall be considered. Section 120.57(3)(b), Florida Statutes, as currently enacted or as amended from time to time, states that **"The formal written protest shall state with particularity the facts and law upon which the protest is based"**. Any person who files an action protesting an intended decision shall post with SBBC, **at the time of filing the formal written protest**, a bond, payable to SBBC in an amount equal to one percent (1%) of SBBC's estimate of the total volume of the contract. SBBC shall provide the estimated contract amount to the vendor within 72 hours, excluding Saturdays, Sundays and other days during which SBBC administration is closed, of receipt of notice of intent to protest. The estimated contract amount is not subject to protest pursuant to Section 120.57(3), Florida Statutes. The bond shall be conditioned upon the payment of all costs which may be adjudged against the protestant in an Administrative Hearing in which the action is brought and in any subsequent appellate court proceeding. In lieu of a bond, SBBC may accept a cashier's check, official bank check or money order in the amount of the bond. If, after completion of the Administrative Hearing process and any appellate court proceedings, SBBC prevails, SBBC shall recover all costs and charges which shall be included in the Final Order or judgment, including charges made by the Division of Administrative Hearings, but excluding attorney's fees. Upon payment of such costs and charges by the protestant, the bond shall be returned. If the protestant prevails, then the protestant shall recover from the Board all costs and charges which shall be included in the Final Order or judgment, excluding attorney's fees. **All documentation necessary for the protest proceedings will be provided electronically by SBBC.**

Failure to file a notice of protest or to file a formal written protest within the time prescribed by Section 120.57(3), Florida Statutes, or a failure to post the bond or other security required by Policy 3320 within the time allowed for filing a bond, shall constitute a waiver of proceedings. The failure to post the bond required by SBBC Policy 3320, Part VIII, as currently enacted or as amended from time to time, shall constitute a waiver of proceedings. Notices of protests, formal written protests, and the bonds required by Policy 3320, shall be filed at the office of the Director of Supply Management & Logistics, 7720 West Oakland Park Boulevard, Suite 323, Sunrise, Florida 33351 (fax 754-321-0936). Fax filing will not be acceptable for the filing of bonds.

## 7.0 GENERAL CONDITIONS (Continued)

- 7.25 **USE OF OTHER CONTRACTS:** SBBC reserves the right to utilize any other SBBC contract, any State of Florida Contract, any contract awarded by any other city or county governmental agencies, other school boards, other community college/state university system cooperative agreements, or to directly negotiate/purchase per SBBC policy and/or State Board Rule 6A-1.012, as currently enacted or as amended from time to time, in lieu of any offer received or award made as a result of this RFI if it is in its best interest to do so.
- 7.26 **ASSIGNMENT:** Neither any award of this RFI nor any interest in any award of this RFI may be assigned, transferred or encumbered by any party without the prior written consent of the Director, Supply Management & Logistics Department. There shall be no partial assignments of this RFI including, without limitation, the partial assignment of any right to receive payments from SBBC.
- 7.27 **CANCELLATION:** In the event any of the provisions of this RFI are violated by the Awardee, the Superintendent shall give written notice to the Awardee stating the deficiencies and unless deficiencies are corrected within five days, recommendation will be made to SBBC for immediate cancellation.
- 7.28 **REASONABLE ACCOMMODATION:** Individuals with disabilities requesting accommodations under the Americans with Disabilities Act (ADA) may call Equal Educational Opportunities (EEO) at 754-321-2150 or Teletype Machine 754-321-2158.
- 7.29 **CONE OF SILENCE:** Any vendor or lobbyist for a vendor is prohibited from having any communications concerning this solicitation for a competitive procurement with any School Board Member or the Superintendent of Schools, after the Supply Management & Logistics Department releases the solicitation to the general public. This "Cone of Silence" shall go into effect and shall remain in effect from the time of release of the solicitation until the contract is awarded by SBBC. All communications regarding this solicitation shall be directed to the designated Purchasing Agent unless so notified by the Supply Management & Logistics Department. Further, any vendor, its principals, or their lobbyists shall not offer campaign contributions to School Board Members or offer contributions to School Board Members for campaigns of other candidates for political office during the period in which the vendor is attempting to sell goods or services to the School Board. This period of limitation of offering campaign contributions shall commence at the time of the "cone of silence" period for any solicitation for a competitive procurement as described by School Board Policy 3320, Part II, Section HH as well as School Board Policy 1007, Section 5.4 – Campaign Contribution Fundraising. **Any vendor or lobbyist who violates this provision shall cause their RFI to be considered non-responsive and therefore be ineligible for award.**
- 7.30 **SBBC PHOTO IDENTIFICATION BADGE:**  
**Background Screening:** Awardee agrees to comply with all the requirements of Sections 1012.32 and 1012.465, Florida Statutes, and that Awardee and all its personnel who (1) are to be permitted access to school grounds when students are present, (2) will have direct contact with students, or (3) have access or control of school funds will successfully complete the background screening required by the referenced statutes and meet the standards established by the statutes. **Personnel shall include employees, representatives, agents or sub-contractors performing duties under the contract to SBBC and who meet any or all of the three requirements identified above.** This background screening will be conducted by SBBC in advance of Awardee or its personnel providing any services. Awardee will bear the cost of acquiring the background screening required under Section 1012.32, Florida Statutes, and any fee imposed by the Florida Department of Law Enforcement to maintain the fingerprints provided with respect to Awardee and its personnel. The Parties agree that the failure of Awardee to perform any of the duties described in this section shall constitute a material breach of this RFI entitling SBBC to terminate immediately with no further responsibilities or duties to perform under this Agreement. Awardee agrees to indemnify and hold harmless SBBC, its officers and employees of any liability in the form of physical or mental injury, death or property damage resulting in Awardee's failure to comply with the requirements of this section or Sections 1012.32 and 1012.465, Florida Statutes.

**SBBC issued identification badges must be worn at all times when on SBBC property and must be worn where they are visible and easily readable.**

L-1 Enrollment Services has been contracted to provide all background and fingerprinting services. All questions pertaining to fingerprinting, photo identification and background check services must be directed to the EasyPath Project Coordinator at 754-321-1830 or [easypathinfo@L1ID.com](mailto:easypathinfo@L1ID.com). **Each individual, for whom a SBBC photo identification badge is requested, must fill out the forms that are required, provide his/her driver's license and social security card, and must be fingerprinted.** A background check will be conducted for each badge applicant. SBBC reserves the right to require additional information, should it be necessary, and to deny the issuance of a badge to an applicant. Any applicant, that has been denied a badge, is prohibited from entering SBBC property as an employee, sub-contractor or agent of a contract Awardee. There will be two websites used for services: 1) <http://www.L1Enrollment.com> (used for scheduling and registering applicants) and 2) <http://sbbc-easypath.browardschools.com> (used for vendors to check the status of applicants and order replacement badges). The total fee for the SBBC photo identification badge, fingerprinting and a FBI background check can be found at the following website: [www.L1Enrollment.com](http://www.L1Enrollment.com). Payment options can be made by electronic check (e-check), Visa, MasterCard or use of an established escrow account code. **These fees are non-refundable and are subject to change without notice. Badges are issued for a one-year period and must be renewed annually. The renewal date will be one year from date of issuance. Failure to renew the badge, at that time, will result in the vendor being required to re-apply and pay the going rate for badging and fingerprinting.**

**Vendors shall return expired and/or terminated employee badges to the following location: SBBC, Attn: L-1 Enrollment Services, 600 SE 3<sup>rd</sup> Avenue, Fort Lauderdale, Florida 33301.**

## 7.0 GENERAL CONDITIONS (Continued)

- 7.31 **GRATUITIES:** Respondents shall not offer any gratuities, favors, or anything of monetary value to any official, employee, or agent of SBBC; including any School Board Member, Superintendent of Schools and any Evaluation Committee Members, for the purpose of influencing consideration of this RFI.
- 7.32 **LOBBYIST ACTIVITIES:** In accordance with SBBC Policy 1100B, as currently enacted or as amended from time to time, persons acting as lobbyists must state, at the beginning of their presentation, letter, telephone call, e-mail or facsimile transmission to School Board Members, Superintendent or Members of Senior Management, the group, association, organization or business interest she/he is representing.
- 7.32.1 A lobbyist is defined as a person who, for immediate or subsequent compensation (e.g., monetary profit/personal gain), represents a public or private group, association, organization or business interest and engages in efforts to influence School Board Members on matters within their official jurisdiction.
- 7.32.2 A lobbyist is not considered to be a person representing school allied groups (e.g., PTA, DAC, Band Booster Associations, etc.) nor a public official acting in her/his official capacity.
- 7.32.3 Lobbyists shall annually (July 1) disclose in each instance and for each client prior to any lobbying activities, their identity and activities by completing the lobbyist statement form which can be obtained from official School Board Records, School Board Member's Offices or the Superintendent's Office and will be recorded on SBBC's website, [www.browardschools.com](http://www.browardschools.com).
- 7.32.4 The lobbyist must disclose any direct business association with any current elected or appointed official or employee of SBBC or any immediate family member of such elected or appointed official or employee of SBBC.
- 7.32.5 Senior-level employees (Pay Grade 30 and above) and/or School Board Members are prohibited from lobbying activities for one year after resignation or retirement or expiration of their term of office.
- 7.32.6 The Deputy to the Superintendent shall keep a current list of persons who have submitted the lobbyist statement form.
- 7.33 **PREPARATION COST OF RFI:** Respondent is solely responsible for any and all costs associated with responding to this RFI. SBBC will not reimburse any Respondent for any costs associated with the preparation and submittal of any RFI, or for any travel and per diem costs that are incurred by any Respondent.
- 7.34 **WITHDRAWAL OF RFI:** In the best interest of SBBC, SBBC reserves the right to withdraw this RFI at any time prior to the time and date specified for the RFI opening.
- 7.35 **SEVERABILITY** In case of any one or more of the provisions contained in this RFI shall be for any reason be held to be invalid, illegal, unlawful, unenforceable or void in any respect, the invalidity, illegality, unenforceability or unlawful or void nature of that provision shall not affect any other provision and this shall be considered as if such invalid, unlawful, unenforceable or void provision had never been included herein.
- 7.36 It is the sole responsibility of the **Respondent** to assure it has received the entire RFI and any and all Addendum.
- 7.37 It is the sole responsibility of the **Respondent** to assure that its RFI is time stamped in the **SUPPLY MANAGEMENT & LOGISTICS DEPARTMENT** on or before 2:00 p.m. EST on the date due.
- 7.38 No verbal or written information which is obtained other than by information in this document or by Addenda to this RFI shall be binding on SBBC.
- 7.39 No submissions made after the RFI opening, amending or supplementing the RFI, shall be considered.

## 7.0 GENERAL CONDITIONS (Continued)

### 7.40 ACCEPTANCE AND REJECTION OF RFIS:

- 7.40.1 **Acceptance:** All RFIs properly completed and submitted will be evaluated in accordance with Section 5.1. SBBC reserves the right to reject any or all RFIs that contain material deviations from the RFI or that fail to meet all mandatory requirements. SBBC may reject any or all RFIs when it services the best interest of SBBC.
- 7.40.2 SBBC also reserves the right to waive irregularities or technicalities in any RFI received if such action is in the best interest of SBBC. However, such a waiver shall in no way modify the RFI requirements or excuse the Respondent from full compliance with the RFI specifications and other contract requirements if the Respondent is awarded the contract.
- 7.40.3 **Rejection:** An RFI may be rejected if it does not conform to the rules or the requirements contained in this RFI. Examples for rejection include, but are not limited to, the following:
- 7.40.3.1 The RFI is time-stamped at the Supply Management & Logistics Department after the deadline specified in the RFI.
  - 7.40.3.2 Failure to execute and return the enclosed original **REQUIRED RESPONSE FORM** as defined in Subsection 4.1.4 (see Section 1.0).
  - 7.40.3.3 Failure to respond to all subsections within the RFI.
  - 7.40.3.4 Proof of collusion among Respondents, in which case all suspected RFIs involved in the alleged collusive action shall be rejected, and any participants to such collusion shall be barred from future procurement opportunities until reinstated.
  - 7.40.3.5 The RFI shows non-compliance with applicable laws or contains any unauthorized additions or deletions, is a conditional RFI, is an incomplete RFI, or contains irregularities of any kind which make the RFI incomplete, indefinite, or ambiguous as to its meaning.
  - 7.40.3.6 The Respondent adds provisions reserving the right to accept or reject an award or to enter into a contract pursuant to an award or adds provisions contrary to those in the RFI.

7.41 **ORIGINAL DOCUMENT FORMAT:** Only the terms and conditions of this solicitation as they were released by SBBC, or amended via Addendum, are valid. Any modification to any term or condition by a Respondent is not binding unless it is expressly agreed to in writing by SBBC.

7.42 **TERMINATION:** This RFI may be terminated with or without cause by SBBC during the term hereof upon thirty (30) days written notice to the other parties of its desire to terminate this RFI. In the event of such termination, SBBC shall not be obligated to pay for any services beyond the effective date of termination.

7.43 **PRICE REDUCTIONS:** If, from date of RFI opening, the Awardee either bids the same products and/or services at a lower price than offered to SBBC or reduces the price of the proposed product or service, the lowest of these reduced prices will be extended to SBBC.

7.44 **DISTRIBUTION:** DemandStar by Onvia, [www.demandstar.com](http://www.demandstar.com), is the official method approved by the Supply Management Department for the distribution of all competitive solicitations including ITBs and RFIs. It is the responsibility of all interested parties to assure they have received all necessary documents, including Addenda and have included all necessary information within their response. SBBC is not responsible for Respondent's failure to obtain complete bidding documents from DemandStar. SBBC reserves the right to reject any RFI as non-responsive for failure to include all necessary documents or required Addenda. For information regarding the above-referenced solicitation, contact the designated Purchasing Agent as stated herein.

7.45 **PURCHASE BY OTHER PUBLIC AGENCIES:** With the consent and agreement of the Awardee(s), purchases may be made under this RFI by other agencies. Such purchases shall be governed by the same terms and conditions as stated herein.

7.46 **SBBC INFORMATION SECURITY GUIDELINES:** It is the responsibility of the vendor to read and adhere to the SBBC Information Security Guidelines when using any device connected to the SBBC's network. Following the conclusion of the contract term, all of SBBC's confidential information must be removed from vendor's equipment and all access privileges must be revoked. Final payment will be withheld until the vendor has confirmed, in writing, that all SBBC's confidential information has been purged from any and all electronic technology devices that were used during this contract and were connected to the SBBC's network.

## 7.0 GENERAL CONDITIONS (Continued)

7.47 **CONFIDENTIAL RECORDS:** The Vendor acknowledges that certain information about the District's students is contained in records created, maintained or accessed by the Vendor and that this information is confidential and protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) (20 U.S. C. 1232g), and/or the Health Insurance Portability and Accountability Act (HIPAA) (45 CFR parts 160-164) and related District policies, as amended from time to time, currently available at [www.browardschools.com](http://www.browardschools.com). The confidential information cannot be disclosed unless valid consent is obtained from the District's students or their legal guardians. Both parties agree to protect these records in compliance with FERPA, HIPAA, and the District's policy. To the extent permitted by law, nothing contained herein shall be construed as precluding either party from releasing such information to the other so that each can perform its respective responsibilities.

Vendor agrees that it may create, receive from or on behalf of the District, or have access to, records or record systems that are subject to FERPA and/or HIPAA (collectively, the "Confidential Records"). Vendor represents, warrants, and agrees that it will: (1) hold the Confidential Records in strict confidence and will not use or disclose the Confidential Records except as (a) permitted or required by this Agreement, (b) required by law, or (c) otherwise authorized by the District in writing; (2) safeguard the Confidential Records according to commercially reasonable administrative, physical and technical standards as required by law; and (3) continually monitor its operations and take any and all action necessary to assure that the Confidential Records are safeguarded in accordance with the terms of this Agreement. At the request of the District, Vendor agrees to provide the District with a written summary of the procedures Vendor uses to safeguard the Confidential Records. A breach of these confidentiality requirements shall constitute grounds for the District to terminate any Agreement with Vendor.

7.48 **TIE BID PROCEDURES:** If the Committee's evaluation results in a tie total score between two or more RFIs, priority shall be given to Respondents in the following sequence:

- A business that certifies that it has implemented a drug-free workplace program shall be given preference in accordance with the provisions of Chapter 287.087, Florida Statutes, as currently enacted or as amended from time to time;
  - The Broward County Certified Minority/Women Business Enterprise vendor;
  - The Palm Beach or Miami-Dade County Certified Minority/Women Business Enterprise vendor;
  - The Florida Certified Minority/Women Business Enterprise vendor;
  - The Broward County vendor, other than a Minority/Women Business Enterprise vendor;
  - The Palm Beach or Miami-Dade County vendor, other than a Minority/Women Business Enterprise vendor;
  - The Florida vendor, other than a Minority/Women Business Enterprise vendor.
- If application of the above criteria does not indicate a priority for award, the award will be decided by a coin toss. The coin toss shall be held publicly either in the Supply Management & Logistics Department or the location where the RFI Evaluation takes place. The vendors with the same scores will be invited to be present as witnesses.

7.49 If the RFI is for auditing services, and in accordance with Policy 3100 – Annual Financial Audit, the independent audit firm selected by the School Board shall serve at the discretion of the School Board for five (5) consecutive years: the firm selected shall not succeed itself as the School Board's independent auditor except for the first selection when the current auditor will be exempted.



# ATTACHMENT A

- A1 M/WBE Utilization Report
- A2 Employment Diversity Statistics
- A3 M/WBE Participation

Respondent's Company Name: \_\_\_\_\_

**Monthly Utilization Reports to be Submitted to:**  
**The School Board of Broward County, Florida** 754-321-0550 Telephone  
**Supplier Diversity & Outreach Program**  
**7720 West Oakland Park Boulevard, Suite 323** 754-321-0934 FAX  
**Sunrise, FL 33351-6704**

**Monthly M/WBE Utilization Report**

**This report is required 15 days after the end of each month, whether the M/WBE(s) received payments or not, until all committed remuneration has been received by the M/WBE.**

1. Reporting Period From: \_\_\_\_\_ Reporting Period To: \_\_\_\_\_

This report is required by The School Board of Broward County, Florida. Failure to comply may result in the School Board commencing proceedings to impose sanctions on the Prime Vendor, in addition to pursuing any other available legal remedy. Sanctions may include the withholding of payments for work committed to M/WBE participants, and a negative recommendation to award further contracts bid by The School Board of Broward County, Florida.

**Prime Vendor Information**

NAME & ADDRESS OF PRIME VENDOR	CONTRACT AMOUNT (if applicable)	LENGTH OF CONTRACT	CONTRACT START DATE	CONTRACT END DATE	TOTAL % OR \$ AMOUNT TO MINORITY/ WOMEN
RFI Number: 14-063P  RFI Title: Property and Casualty Insurance Brokerage Services					

**SUPPLIER DIVERSITY & OUTREACH PROGRAM VENDOR INFORMATION**

NAME OF CERTIFIED M/WBE VENDOR	WORK DESCRIPTION	AMOUNT DRAWN/PAID TO VENDOR	AMOUNT FOR WORK PERFORMED DURING MONTH	AMOUNT PAID TO DATE	% of TOTAL PAID TO CONTRACT AMOUNT

Company Official's Signature & Title: \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_ Date: \_\_\_\_\_

# Employment Diversity Statistics

Respondent's Company Name: \_\_\_\_\_

Provide the following employment diversity statistics by completing the chart below.

JOB CATEGORIES	TOTAL	NON-HISPANIC WHITE		NON-HISPANIC BLACK		HISPANIC		ASIAN		AMERICAN INDIAN/ ALASKA NATIVE	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Officials and Managers											
Professionals											
Technicians											
Sales Workers											
Office and Clerical											
Craft Workers (Skilled)											
Operatives (Semi-Skilled)											
Laborers (Unskilled)											
Service Workers											
<b>TOTAL</b>											
% of Total Workforce											

### M/WBE PARTICIPATION

Complete the following information on the proposed M/WBE participation on this contract.

Respondent's Company Name: \_\_\_\_\_

M/WBE Firm Information	Scope and/or Nature of Work to be Performed by the M/WBE	% of M/WBE Participation	Actual Amount to be expended with M/WBE *
Firm Name: _____ Contact Person: _____ Address: _____ _____ Telephone No.: _____ Facsimile No.: _____ M/WBE Certification No.: _____ Certifying Agency Name: _____ Address: _____ _____ Telephone No.: _____			
Firm Name: _____ Contact Person: _____ Address: _____ _____ Telephone No.: _____ Facsimile No.: _____ M/WBE Certification No.: _____ Certifying Agency Name: _____ Address: _____ _____ Telephone No.: _____			
Firm Name: _____ Contact Person: _____ Address: _____ _____ Telephone No.: _____ Facsimile No.: _____ M/WBE Certification No.: _____ Certifying Agency Name: _____ Address: _____ _____ Telephone No.: _____			

\* PLEASE INDICATE IF AMOUNT TO BE EXPENSED IS: PER YEAR  - PER CONTRACT PERIOD  OR OTHER

# **ATTACHMENT B**

## **Disclosure of Potential Conflict of Interest and Conflicting Employment or Contractual Relationship**

The School Board of Broward County, Florida  
RFI 14-063P

**DISCLOSURE OF POTENTIAL CONFLICT OF INTEREST AND CONFLICTING EMPLOYMENT OR CONTRACTUAL RELATIONSHIP**

In accordance with General Condition 7.12, each Respondent must disclose, in its RFI, the names of any employees who are employed by Respondent who are also an employee of SBBC. Persons identified below may have obligations and restrictions applicable to them under Chapter 112, Florida Statutes.

Name of Respondent's Employee	SBBC Title or Position of Respondent's Employee	SBBC Department/ School of Respondent's Employee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Check one of the following and sign:

- I hereby affirm that there are no known persons employed by Respondent who are also an employee of SBBC.
- I hereby affirm that all known persons who are employed by Respondent, who are also an employee of SBBC, have been identified above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Name of Official

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
City, State, Zip Code

# ATTACHMENT C

W-9 Form

Form **W-9**  
(Rev. January 2011)  
Department of the Treasury  
Internal Revenue Service

**Request for Taxpayer  
Identification Number and Certification**

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <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 type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		<b>The School Board of Broward County, Fla 7720 West Oakland Park Blvd., #323 Sunrise, Florida 33351</b>
List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number																									
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**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number																									
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**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).

**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 on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶

**General Instructions**

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

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.



The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity, and
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

### Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

### Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

### Specific Instructions

#### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Partnership, C Corporation, or S Corporation.** Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

**Disregarded entity.** Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

**Note.** Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

**Limited Liability Company (LLC).** If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

**Exempt Payee**

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
  2. The United States or any of its agencies or instrumentalities,
  3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
  4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
  5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
  7. A foreign central bank of issue,
  8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
  9. A futures commission merchant registered with the Commodity Futures Trading Commission,
  10. A real estate investment trust,
  11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
  12. A common trust fund operated by a bank under section 584(a),
  13. A financial institution,
  14. A middleman known in the investment community as a nominee or custodian, or
  15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

**Part I. Taxpayer Identification Number (TIN)**

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

**Part II. Certification**

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

**Signature requirements.** Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records from Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>3</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>4</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>4</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor <sup>4</sup>
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

**Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

# ATTACHMENT D

## Drug-Free Workplace

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA  
SWORN STATEMENT PURSUANT TO SECTION 287.087, FLORIDA STATUTES, AS CURRENTLY ENACTED OR AS  
AMENDED FROM TIME TO TIME, ON PREFERENCE TO BUSINESSES WITH DRUG-FREE WORKPLACE  
PROGRAMS.

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

This sworn statement is submitted to The School Board of Broward County, Florida,

by \_\_\_\_\_  
(Print individual's name and title)

for \_\_\_\_\_  
(Print name of entity submitting sworn statement)

whose business address is

\_\_\_\_\_

and (if applicable) its Federal Employer Identification Number (FEIN) is \_\_\_\_\_  
(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:  
\_\_\_\_\_.)

I certify that I have established a drug-free workplace program and have complied with the following:

1. Published 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. Informed 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. Given each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notified 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 days after such conviction.
5. Will impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by, any employee who is so convicted.
6. Am making a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. \_\_\_\_\_  
(Signature)

Personally Known \_\_\_\_\_

OR Produced identification \_\_\_\_\_

\_\_\_\_\_  
(Type of identification)

Notary Public - State of \_\_\_\_\_

My commission expires \_\_\_\_\_

\_\_\_\_\_  
(Printed, typed or stamped commissioned name of notary public)

# ATTACHMENT E

## Sample Agreement

**AGREEMENT**

**THIS AGREEMENT** is made and entered into as of this \_\_\_\_ day of \_\_\_\_\_, 2013, by and between

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA**  
(hereinafter referred to as “SBBC”),  
a body corporate and political subdivision of the State of Florida,  
whose principal place of business is  
600 Southeast Third Avenue, Fort Lauderdale, Florida 33301

and

**INSERT NAME OF OTHER PARTY**  
(hereinafter referred to as “ *[insert a short name here]* ”),  
whose principal place of business is  
*[insert their address here]* .

**WHEREAS**, *[insert information in this portion of the document to explain the purposes and objectives for which the parties are entering into an agreement]*; and

**WHEREAS**, *[you may use as many of these recitals or “whereas clauses” as necessary to express the parties’ purposes and objectives]*.

**NOW, THEREFORE**, in consideration of the premises and of the mutual covenants contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties hereby agree as follows:

**ARTICLE 1 - RECITALS**

1.01 **Recitals.** The parties agree that the foregoing recitals are true and correct and that such recitals are incorporated herein by reference.

**ARTICLE 2 – SPECIAL CONDITIONS**

2.01 **Term of Agreement.** Unless terminated earlier pursuant to Section 3.05 of this Agreement, the term of this Agreement shall commence on \_\_\_\_\_, 20\_\_ and conclude on \_\_\_\_\_, 20\_\_ .

2.02

2.03

2.04 **Priority of Documents.** In the event of a conflict between documents, the following priority of documents shall govern.

- First: This Agreement
- Second: Addendum Nos.....
- Third: RFI (*Number*) – (*Title*)
- Fourth: RFI submitted in response to the RFI by (*Company Name*)

**ARTICLE 2 – SPECIAL CONDITIONS**

2. Inspection of *Insert Name's* Records by SBBC. *Insert Name* shall establish and maintain books, records and documents (including electronic storage media) sufficient to reflect all income and expenditures of funds provided by SBBC under this Agreement. All *Insert Name's* Records, regardless of the form in which they are kept, shall be open to inspection and subject to audit, inspection, examination, evaluation and/or reproduction, during normal working hours, by SBBC's agent or its authorized representative to permit SBBC to evaluate, analyze and verify the satisfactory performance of the terms and conditions of this Agreement and to evaluate, analyze and verify any and all invoices, billings, payments and/or claims submitted by *Insert Name* or any of *Insert Name's* payees pursuant to this Agreement. *Insert Name's* Records subject to examination shall include, without limitation, those records necessary to evaluate and verify direct and indirect costs (including overhead allocations) as they may apply to costs associated with this Agreement. *Insert Name's* Records subject to this section shall include any and all documents pertinent to the evaluation, analysis, verification and reconciliation of any and all expenditures under this Agreement without regard to funding sources.

(a) *Insert Name's* Records Defined. For the purposes of this Agreement, the term "*Insert Name's* Records" shall include, without limitation, accounting records, payroll time sheets, cancelled payroll checks, W-2 forms, written policies and procedures, computer records, disks and software, videos, photographs, executed subcontracts, subcontract files (including RFIs of successful and unsuccessful bidders), original estimates, estimating worksheets, correspondence, change order files (including sufficient supporting documentation and documentation covering negotiated settlements), and any other supporting documents that would substantiate, reconcile or refute any charges and/or expenditures related to this Agreement.

(b) Duration of Right to Inspect. For the purpose of such audits, inspections, examinations, evaluations and/or reproductions, SBBC's agent or authorized representative shall have access to *Insert Name's* Records from the effective date of this Agreement, for the duration of the term of this Agreement, and until the later of five (5) years after the termination of this Agreement or five (5) years after the date of final payment by SBBC to *Insert Name* pursuant to this Agreement.

(c) Notice of Inspection. SBBC's agent or its authorized representative shall provide *Insert Name* reasonable advance notice (not to exceed two (2) weeks) of any intended audit, inspection, examination, evaluation and or reproduction.

(d) Audit Site Conditions. SBBC's agent or its authorized representative shall have access to *Insert Name's* facilities and to any and all records related to this Agreement, and shall be provided adequate and appropriate work space in order to exercise the rights permitted under this section.

(e) Failure to Permit Inspection. Failure by *Insert Name* to permit audit, inspection, examination, evaluation and/or reproduction as permitted under this Section shall constitute grounds for termination of this Agreement by SBBC for cause and shall be grounds for the denial of some or all of any *Insert Name's* claims for payment by SBBC.

(f) Overcharges and Unauthorized Charges. If an audit conducted in accordance with this Section discloses overcharges or unauthorized charges to SBBC by *Insert Name* in excess of two percent (2%) of the total billings under this Agreement, the actual cost of SBBC's audit shall be paid by *Insert Name*. If the audit discloses billings or charges to which *Insert Name* is not contractually entitled, *Insert Name* shall pay said sum to SBBC within twenty (20) days of receipt of written demand under otherwise agreed to in writing by both parties.



**ARTICLE 2 – SPECIAL CONDITIONS**

(g) Inspection of Subcontractor’s Records. *Insert Name* shall require any and all subcontractors, insurance agents and material suppliers (hereafter referred to as “Payees”) providing services or goods with regard to this Agreement to comply with the requirements of this section by insertion of such requirements in any written subcontract. Failure by *Insert Name* to include such requirements in any subcontract shall constitute grounds for termination of this Agreement by SBBC for cause and shall be grounds for the exclusion of some or all of any Payee’s costs from amounts payable by SBBC to *Insert Name* pursuant to this Agreement and such excluded costs shall become the liability of *Insert Name*.

(h) Inspector General Audits. *Insert Name* shall comply and cooperate immediately with any inspections, reviews, investigations, or audits deemed necessary by the Florida Office of the Inspector General or by any other state or federal officials.

2. Notice. When any of the parties desire to give notice to the other, such notice must be in writing, sent by U.S. Mail, postage prepaid, addressed to the party for whom it is intended at the place last specified; the place for giving notice shall remain such until it is changed by written notice in compliance with the provisions of this paragraph. For the present, the Parties designate the following as the respective places for giving notice:

To SBBC: Superintendent of Schools  
The School Board of Broward County, Florida  
600 Southeast Third Avenue  
Fort Lauderdale, Florida 33301

With a Copy to: *Insert Job Title of District Representative*  
*Insert Address of District Representative*

To *Insert Name*: *Insert Name Provided by Other Party*  
*Insert Address Provided by Other Party*

With a Copy to: *Insert Name Provided by Other Party*  
*Insert Address Provided by Other Party*

2. Background Screening: *Insert Name* agrees to comply with all requirements of Sections 1012.32 and 1012.465, Florida Statutes, and all of its personnel who (1) are to be permitted access to school grounds when students are present, (2) will have direct contact with students, or (3) have access or control of school funds, will successfully complete the background screening required by the referenced statutes and meet the standards established by the statutes. This background screening will be conducted by SBBC in advance of *Insert Name* or its personnel providing any services under the conditions described in the previous sentence. *Insert Name* shall bear the cost of acquiring the background screening required by Section 1012.32, Florida Statutes, and any fee imposed by the Florida Department of Law Enforcement to maintain the fingerprints provided with respect to *Insert Name* and its personnel. The parties agree that the failure of *Insert Name* to perform any of the duties described in this section shall constitute a material breach of this Agreement entitling SBBC to terminate immediately with no further responsibilities or duties to perform under this Agreement. To the extent permitted by law, *Insert Name* agrees to indemnify and hold harmless SBBC, its officers and employees from any liability in the form of physical or mental injury, death or property damage resulting in *Insert Name*’s failure to comply with the requirements of this Section or with Sections 1012.32 and 1012.465, Florida Statutes. Nothing herein shall be construed as a waiver by SBBC or *Insert Name* of sovereign immunity or of any rights or limits to liability existing under Section 768.28, Florida Statutes.

**ARTICLE 2 – SPECIAL CONDITIONS**

2. **Background Screening:** *Insert Name* agrees to comply with all requirements of Sections 1012.32 and 1012.465, Florida Statutes, and all of its personnel who (1) are to be permitted access to school grounds when students are present, (2) will have direct contact with students, or (3) have access or control of school funds, will successfully complete the background screening required by the referenced statutes and meet the standards established by the statutes. This background screening will be conducted by SBBC in advance of *Insert Name* or its personnel providing any services under the conditions described in the previous sentence. *Insert Name* shall bear the cost of acquiring the background screening required by Section 1012.32, Florida Statutes, and any fee imposed by the Florida Department of Law Enforcement to maintain the fingerprints provided with respect to *Insert Name* and its personnel. The parties agree that the failure of *Insert Name* to perform any of the duties described in this section shall constitute a material breach of this Agreement entitling SBBC to terminate immediately with no further responsibilities or duties to perform under this Agreement. *Insert Name* agrees to indemnify and hold harmless SBBC, its officers and employees from any liability in the form of physical or mental injury, death or property damage resulting in *Insert Name's* failure to comply with the requirements of this Section or with Sections 1012.32 and 1012.465, Florida Statutes.

2. **Indemnification.** This section shall survive the termination of all performance or obligations under this Agreement and shall be fully binding until such time as any proceeding brought on account of this Agreement is barred by any applicable statute of limitations.

A. By SBBC: SBBC agrees to be fully responsible up to the limits of Section 768.28, Florida Statutes, for its acts of negligence, or its employees' acts of negligence when acting within the scope of their employment and agrees to be liable for any damages resulting from said negligence.

B. By *Insert Name*: *Insert Name* agrees to indemnify, hold harmless and defend SBBC, its agents, servants and employees from any and all claims, judgments, costs, and expenses including, but not limited to, reasonable attorney's fees, reasonable investigative and discovery costs, court costs and all other sums which SBBC, its agents, servants and employees may pay or become obligated to pay on account of any, all and every claim or demand, or assertion of liability, or any claim or action founded thereon, arising or alleged to have arisen out of the products, goods or services furnished by *Insert Name*, its agents, servants or employees; the equipment of *Insert Name*, its agents, servants or employees while such equipment is on premises owned or controlled by SBBC; or the negligence of *Insert Name* or the negligence of *Insert Name's* agents when acting within the scope of their employment, whether such claims, judgments, costs and expenses be for damages, damage to property including SBBC's property, and injury or death of any person whether employed by *Insert Name*, SBBC or otherwise.

**ARTICLE 3 – GENERAL CONDITIONS**

3.01 **No Waiver of Sovereign Immunity.** Nothing herein is intended to serve as a waiver of sovereign immunity by any agency or political subdivision to which sovereign immunity may be applicable or of any rights or limits to liability existing under Section 768.28, Florida Statutes. This section shall survive the termination of all performance or obligations under this Agreement and shall be fully binding until such time as any proceeding brought on account of this Agreement is barred by any applicable statute of limitations.

3.02 **No Third Party Beneficiaries.** The parties expressly acknowledge that it is not their intent to create or confer any rights or obligations in or upon any third person or entity under this Agreement. None of the parties intend to directly or substantially benefit a third party by this Agreement. The parties agree that there are no third party beneficiaries to this Agreement and that no third party shall be entitled to assert a claim against any of the parties based upon this Agreement. Nothing herein shall be construed as consent by an agency or political subdivision of the State of Florida to be sued by third parties in any matter arising out of any contract.

3.03 **Independent Contractor.** The parties to this agreement shall at all times be acting in the capacity of independent contractors and not as an officer, employee or agent of one another. Neither party or its respective agents, employees, subcontractors or assignees shall represent to others that it has the authority to bind the other party unless specifically authorized in writing to do so. No right to SBBC retirement, leave benefits or any other benefits of SBBC employees shall exist as a result of the performance of any duties or responsibilities under this Agreement. SBBC shall not be responsible for social security, withholding taxes, contributions to unemployment compensation funds or insurance for the other party or the other party's officers, employees, agents, subcontractors or assignees.

3.04 **Equal Opportunity Provision.** The parties agree that no person shall be subjected to discrimination because of age, race, color, disability, gender identity, gender expression marital status, national origin, religion, sex or sexual orientation in the performance of the parties' respective duties, responsibilities and obligations under this Agreement.

3.05 **Termination.** This Agreement may be canceled with or without cause by SBBC during the term hereof upon thirty (30) days written notice to the other parties of its desire to terminate this Agreement.

3.06 **Default.** The parties agree that, in the event that either party is in default of its obligations under this Agreement, the non-defaulting party shall provide to the defaulting party (30) days written notice to cure the default. However, in the event said default cannot be cured within said thirty (30) day period and the defaulting party is diligently attempting in good faith to cure same, the time period shall be reasonably extended to allow the defaulting party additional cure time. Upon the occurrence of a default that is not cured during the applicable cure period, this Agreement may be terminated by the non-defaulting party upon thirty (30) days notice. This remedy is not intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy now or hereafter existing at law or in equity or by statute or otherwise. No single or partial exercise by any party of any right, power, or remedy hereunder shall preclude any other or future exercise thereof. Nothing in this section shall be construed to preclude termination for convenience pursuant to Section 3.05.

3.07 **Annual Appropriation.** The performance and obligations of SBBC under this Agreement shall be contingent upon an annual budgetary appropriation by its governing body. If SBBC does not allocate funds for the payment of services or products to be provided under this Agreement, this Agreement may be terminated by SBBC at the end of the period for which funds have been allocated. SBBC shall notify the other party at the earliest possible time before such termination. No penalty shall accrue to SBBC in the event this provision is exercised, and SBBC shall not be obligated or liable for any future payments due or any damages as a result of termination under this section.

**ARTICLE 3 – GENERAL CONDITIONS**

3.08 **Excess Funds.** Any party receiving funds paid by SBBC under this Agreement agrees to promptly notify SBBC of any funds erroneously received from SBBC upon the discovery of such erroneous payment or overpayment. Any such excess funds shall be refunded to SBBC with interest calculated from the date of the erroneous payment or overpayment. Interest shall be calculated using the interest rate for judgments under Section 55.03, Florida Statutes, applicable at the time the erroneous payment or overpayment was made by SBBC.

3.09 **Public Records.** Pursuant to Section 119.0701, Florida Statutes, any party contracting with SBBC is required to (a) keep and maintain available for public inspection any records that pertain to services rendered under this Agreement; (b) provide the public with access to public records on the same terms and conditions that SBBC would provide such records and at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes or otherwise provided by law; (c) ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law; and (d) meet all requirements for retaining public records and transfer, at no cost, to SBBC all public records in that party's possession upon termination of its contract with SBBC and destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. All of such party's records stored electronically must be provided to SBBC in a format that is compatible with SBBC's information technology systems. Each party shall maintain its own respective records and documents associated with this Agreement in accordance with the records retention requirements applicable to public records. Each party shall be responsible for compliance with any public documents request served upon it pursuant to Section 119.07, Florida Statutes, and any resultant award of attorney's fees for non-compliance with that law. Each party acknowledges that this Agreement and all attachments thereto are public records and do not constitute trade secrets.

3.10 **Student Records:** Notwithstanding any provision to the contrary within this Agreement, any party contracting with SBBC under this Agreement shall fully comply with the requirements of Section 1002.22, Florida Statutes, or any other state or federal law or regulation regarding the confidentiality of student information and records. Each such party agrees, for itself, its officers, employees, agents, representatives, contractors or subcontractors, to fully indemnify and hold harmless SBBC and its officers and employees for any violation of this section, including, without limitation, defending SBBC and its officers and employees against any complaint, administrative or judicial proceeding, payment of any penalty imposed upon SBBC, or payment of any and all costs, damages, judgments or losses incurred by or imposed upon SBBC arising out of a breach of this covenant by the party, or an officer, employee, agent, representative, contractor, or sub-contractor of the party to the extent that the party or an officer, employee, agent, representative, contractor, or sub-contractor of the party shall either intentionally or negligently violate the provisions of this section or of Section 1002.22, Florida Statutes. This section shall survive the termination of all performance or obligations under this Agreement and shall be fully binding until such time as any proceeding brought on account of this Agreement is barred by any applicable statute of limitations.

3.11 **Compliance with Laws.** Each party shall comply with all applicable federal and state laws, codes, rules and regulations in performing its duties, responsibilities and obligations pursuant to this Agreement.

3.12 **Place of Performance.** All obligations of SBBC under the terms of this Agreement are reasonably susceptible of being performed in Broward County, Florida and shall be payable and performable in Broward County, Florida.

**ARTICLE 3 – GENERAL CONDITIONS**

3.13 **Governing Law and Venue.** This Agreement shall be interpreted and construed in accordance with and governed by the laws of the State of Florida. Any controversies or legal problems arising out of this Agreement and any action involving the enforcement or interpretation of any rights hereunder shall be submitted to the jurisdiction of the State courts of the Seventeenth Judicial Circuit of Broward County, Florida.

3.14 **Entirety of Agreement.** This document incorporates and includes all prior negotiations, correspondence, conversations, agreements and understandings applicable to the matters contained herein and the parties agree that there are no commitments, agreements or understandings concerning the subject matter of this Agreement that are not contained in this document. Accordingly, the parties agree that no deviation from the terms hereof shall be predicated upon any prior representations or agreements, whether oral or written.

3.15 **Binding Effect.** This Agreement shall be binding upon and inure to the benefit of the parties hereto and their respective successors and assigns.

3.16 **Assignment.** Neither this Agreement or any interest herein may be assigned, transferred or encumbered by any party without the prior written consent of the other party. There shall be no partial assignments of this Agreement including, without limitation, the partial assignment of any right to receive payments from SBBC.

3.17 **Incorporation by Reference.** Exhibits attached hereto and referenced herein shall be deemed to be incorporated into this Agreement by reference.

3.18 **Captions.** The captions, section designations, section numbers, article numbers, titles and headings appearing in this Agreement are inserted only as a matter of convenience, have no substantive meaning, and in no way define, limit, construe or describe the scope or intent of such articles or sections of this Agreement, nor in any way effect this Agreement and shall not be construed to create a conflict with the provisions of this Agreement.

3.19 **Severability.** In the event that any one or more of the sections, paragraphs, sentences, clauses or provisions contained in this Agreement is held by a court of competent jurisdiction to be invalid, illegal, unlawful, unenforceable or void in any respect, such shall not affect the remaining portions of this Agreement and the same shall remain in full force and effect as if such invalid, illegal, unlawful, unenforceable or void sections, paragraphs, sentences, clauses or provisions had never been included herein.

3.20 **Preparation of Agreement.** The parties acknowledge that they have sought and obtained whatever competent advice and counsel as was necessary for them to form a full and complete understanding of all rights and obligations herein and that the preparation of this Agreement has been their joint effort. The language agreed to herein expresses their mutual intent and the resulting document shall not, solely as a matter of judicial construction, be construed more severely against one of the parties than the other.

3.21 **Amendments.** No modification, amendment, or alteration in the terms or conditions contained herein shall be effective unless contained in a written document prepared with the same or similar formality as this Agreement and executed by each party hereto.

**ARTICLE 3 – GENERAL CONDITIONS**

3.22 **Waiver.** The parties agree that each requirement, duty and obligation set forth herein is substantial and important to the formation of this Agreement and, therefore, is a material term hereof. Any party's failure to enforce any provision of this Agreement shall not be deemed a waiver of such provision or modification of this Agreement unless the waiver is in writing and signed by the party waiving such provision. A written waiver shall only be effective as to the specific instance for which it is obtained and shall not be deemed a continuing or future waiver.

3.23 **Force Majeure.** Neither party shall be obligated to perform any duty, requirement or obligation under this Agreement if such performance is prevented by fire, hurricane, earthquake, explosion, wars, sabotage, accident, flood, acts of God, strikes, or other labor disputes, riot or civil commotions, or by reason of any other matter or condition beyond the control of either party, and which cannot be overcome by reasonable diligence and without unusual expense ("Force Majeure"). In no event shall a lack of funds on the part of either party be deemed Force Majeure.

3.24 **Survival.** All representations and warranties made herein, indemnification obligations, obligations to reimburse SBBC, obligations to maintain and allow inspection and audit of records and property, obligations to maintain the confidentiality of records, reporting requirements, and obligations to return public funds shall survive the termination of this Agreement.

3.25 **Authority.** Each person signing this Agreement on behalf of either party individually warrants that he or she has full legal power to execute this Agreement on behalf of the party for whom he or she is signing, and to bind and obligate such party with respect to all provisions contained in this Agreement.

**IN WITNESS WHEREOF**, the Parties hereto have made and executed this Agreement on the date first above written.

**FOR SBBC**

(Corporate Seal)

THE SCHOOL BOARD OF BROWARD  
COUNTY, FLORIDA

By \_\_\_\_\_

ATTEST:

\_\_\_\_\_  
Robert W. Runcie, Superintendent of Schools

Approved as to Form and Legal Content:

\_\_\_\_\_  
Office of the General Counsel

**FOR *[Insert Name Here]***

(Corporate Seal)

*Insert Full Legal Name of the Corporation,  
Agency or Other Legal Entity*

ATTEST:

By \_\_\_\_\_

\_\_\_\_\_  
, Secretary

-or-

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

**The Following Notarization is Required for Every Agreement Without Regard to  
Whether the Party Chose to Use a Secretary's Attestation or Two (2) Witnesses.**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_ by \_\_\_\_\_ of  
\_\_\_\_\_  
Name of Person  
\_\_\_\_\_, on behalf of the corporation/agency.

Name of Corporation or Agency  
He/She is personally known to me or produced \_\_\_\_\_ as identification and  
did/did not first take an oath. Type of Identification

My Commission Expires:

\_\_\_\_\_  
Signature – Notary Public

(SEAL)

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Notary's Commission No.



**FOR *[Insert Name Here]*:**

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Printed Name

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by \_\_\_\_\_  
Insert Name Here  
who is personally known to me or who produced \_\_\_\_\_ as  
Type of Identification  
identification and who did/did not first take an oath this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

My Commission Expires:

\_\_\_\_\_  
Signature – Notary Public

\_\_\_\_\_  
Notary's Printed Name

(SEAL)

\_\_\_\_\_  
Notary's Commission No.

# ATTACHMENT F

## ACH Payment Agreement Form



The School Board of Broward County, Florida  
ACH Payment Agreement Form (ACH CREDITS)

VENDOR NAME: \_\_\_\_\_

**Authorization Agreement**

I (we) hereby authorize **The School Board of Broward County** to initiate automatic deposits (credits) to my account at the financial institution named below. Additionally, I authorize **The School Board of Broward County** to make the necessary debit entries/adjustments in the event that a credit entry is made in error.

Further, I agree not to hold **The School Board of Broward County** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **The School Board of Broward County** receives written notification of cancellation from me or my financial institution and that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

**Account Information**

Name of Bank or Financial Institution: \_\_\_\_\_

Branch/ State: \_\_\_\_\_

Routing No: \_\_\_\_\_

Account No: \_\_\_\_\_  
Checking  Savings

VENDOR AREA:  
Remittance Confirmation:  
(please select one) \_\_\_\_\_

Fax  Email

Federal Identification No.  
Vendor \_\_\_\_\_

TAX ID#  SS#

**Update Purchase Order Fax & Email Address**

Centralized Fax Number \_\_\_\_\_ Dept. \_\_\_\_\_

Centralized Email \_\_\_\_\_ Dept. \_\_\_\_\_

Centralized Phone No. \_\_\_\_\_ Dept. \_\_\_\_\_

**Signature**

Authorized Signature  
(Primary) and Business title: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature  
(Joint) and Business title: \_\_\_\_\_ Date: \_\_\_\_\_

Please attach a VOIDED check to verify bank details and routing number.

This form must be returned to: SBBC – Purchasing – Data Strategy Group  
7720 W. Oakland Park Blvd, Sunrise FL 33351 call: 754-321-0516 or fax # 754-321-0533

**For Use by DATA STRATEGY GROUP**

Vendor Account# \_\_\_\_\_ Date Entered \_\_\_\_\_ Initials: \_\_\_\_\_

# ATTACHMENT G

Statement of "No Response"

## ATTACHMENT G, STATEMENT OF "NO RESPONSE"

If your company will not be submitting a response to this Request for RFI, please complete this Statement of "No" Response Sheet and return, prior to the RFI Due Date established within, to:

SBBC  
 Supply Management & Logistics Department  
 7720 West Oakland Park Boulevard, Suite 323  
 Sunrise, Florida 33351

This information will help SBBC in the preparation of future RFIs.

RFI Number: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_ E-mail: \_\_\_\_\_

√	Reasons for "NO Response":
<input type="checkbox"/>	Unable to comply with product or service specifications.
<input type="checkbox"/>	Unable to comply with scope of work.
<input type="checkbox"/>	Unable to quote on all items in the group.
<input type="checkbox"/>	Insufficient time to respond to the Request for RFI.
<input type="checkbox"/>	Unable to hold prices firm through the term of the contract period.
<input type="checkbox"/>	Our schedule would not permit us to perform.
<input type="checkbox"/>	Unable to meet delivery requirements.
<input type="checkbox"/>	Unable to meet bond requirements.
<input type="checkbox"/>	Unable to meet insurance requirements.
<input type="checkbox"/>	Other (Specify below)

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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