

# **TOWN OF DAVIE**

## **TOWN COUNCIL AGENDA REPORT**

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Bruce Taylor/954-327-3741

**PREPARED BY:** Bruce Taylor (Heidi Cavicchia)

**SUBJECT:** Purchase of Potable Water and Wastewater Polymers

**AFFECTED DISTRICT:** Townwide

**TITLE OF AGENDA ITEM:** A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE AWARD OF THE BID FOR POTABLE WATER AND WASTEWATER POLYMERS TO FORT BEND SERVICES (DEWATERING POLYMER), TROPICHEM ENTERPRISES (STARCH) AND ATLANTIC COAST POLYMERS, INC. (POTABLE WATER POLYMER)

**REPORT IN BRIEF:** The Town of Davie recently solicited sealed proposals for potable water and wastewater polymers for water and wastewater treatment. Eleven (11) vendors were solicited and seven (7) vendors responded with four (4) bids received and three (3) vendors returning a "No Bid" response. The Utilities Department recommended awarding the bid in three parts: Fort Bend Services-Dewatering Polymer (low bid at \$1.30/pound); Tropicchem Enterprises - Starch (the only bidder for this product at \$2.46 per pound); Atlantic Coast Polymers, Inc. - Potable Water Polymer (low bid at \$1.748 per pound).

The products were tested at the water and wastewater plants and were found to meet all plant specifications as well as all regulatory parameters. Each vendor was contacted and agreed to sell their products as stand alone items. By awarding the bid in three parts, the Town will realize a savings of approximately \$23,000.

**PREVIOUS ACTIONS:** None

**CONCURRENCES:**

**FISCAL IMPACT:** Yes

Has request been budgeted? Yes

If yes, expected cost: \$68,832

Account Name: Water - Chemicals

**RECOMMENDATION(S):** Motion to approve the resolution

**Attachment(s):** Resolution, Bid Recommendation with attachments, Procurement Authorization, W-9 Form for all three vendors, Vendor/Bidder Disclosure Form for all three vendors, Corporation Public Inquiry for all three vendors.

RESOLUTION NO. R-2007-

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE AWARD OF THE BID FOR POTABLE WATER AND WASTEWATER POLYMERS TO FORT BEND SERVICES (DEWATERING POLYMER), TROPICHEM ENTERPRISES (STARCH) AND ATLANTIC COAST POLYMERS, INC. (POTABLE WATER POLYMER)

WHEREAS, the Town is in need of Potable Water and Wastewater Polymers for treating water and wastewater in the Utilities Department; and

WHEREAS, the Town solicited sealed bids for such polymers; and

WHEREAS, after review, the Town Council wishes to award the bid in three parts to: Fort Bend Services – Dewatering Polymer; Tropicchem Enterprises – Starch; and Atlantic Coast Polymers, Inc. – Potable Water Polymer.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA.

SECTION 1. The Town Council hereby accepts the bids submitted by Fort Bend Services for dewatering polymer at a cost of \$1.30 per pound, Tropicchem Enterprises for starch at a cost of \$2.46 per pound, and Atlantic Coast Polymers, Inc. for potable water polymer at a cost of \$1.748 per pound.

SECTION 2. The initial contract term is a three (3) year term with an option to extend the contract for two (2) additional two (2) year terms by mutual agreement of the parties. Contract extensions, if appropriate, will be subject to approval by Town Council

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2007.

\_\_\_\_\_  
MAYOR/COUNCILMEMBER

ATTEST:

\_\_\_\_\_  
TOWN CLERK

APPROVED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2007.

# TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER	BUDGET ITEM & DESCRIPTION	APPROXIMATE COST
040-1058-536-0630	Potable Water and Wastewater Polymers	\$85,000

**METHOD OF PROCUREMENT (check the one that applies)**

- Open Competitive Bidding
- Piggyback on Contract Number \_\_\_\_\_
- Sole Source
- Request For Proposals

**SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED**

Signed *Bruce Taylor*  
 Department Head

Have Funds been Reserved NA CANNOT ENCUMBER FY06/07 FUNDS

Date 9/12/06 Signed *[Signature]*

Signed *[Signature]*  
 Town Administrator

VENDOR	BIDS SUBMITTED	COST
<i>Fort Bend Services</i>	<i>) See attached Bid Tabulation</i>	
<i>Tropicchem Enterprises</i>		
<i>Atlantic Coast Polymer</i>		
<i>Acachem Industries</i>		
<i>Inf Polydome</i>	<i>) NO Bid</i>	
<i>Industrial Chemicals</i>		
<i>C/O Specialty Chemicals</i>		

Signed *[Signature]*  
 Procurement Manager

**BID SPECIFICATION COMMITTEE'S RECOMMENDATION**

Vendor	Cost
<i>FORT BEND SERVICES - DEWATERING POLYMER</i>	<i>) PER ATTACHED BID TABULATION</i>
<i>TROPICHEM ENTERPRISES - STARCH</i>	
<i>ATLANTIC COAST POLYMER - POTABLE WATER POLYMER</i>	

BID OPENING REPORT

BID NAME: POLYMERS FOR POTABLE WATER WASTEWATER

TIME: 2:11 PM

BID NUMBER: B-06-131

DATE: 10/10/06

ESTIMATED COST: \$85,000/YR.

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	CIBA SPECIALTY CHEMICALS	No Bid	
2.	ATLANTIC COAST POLYMERS	Incomplete Bid	
3.	INDUSTRIAL CHEMICALS	No Bid	
4.	TROPICHEM ENTERPRISES	97,314.00	
5.	LEACH CHEM INDUSTRIES	Incomplete Bid	
6.	SNF POLYDYNE	No Bid	
7.	FORT BEND SERVICES	Incomplete Bid	
8.			
9.			
10.			

REMARKS

1. Specifications were sent out to vendors.  
7. Vendors responded.

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Hulk Bryan

DATE: 10/10/06

WITNESS: Bruce Taylor

DATE: 10/10/06



Administration	797-1030	Parks & Recreation	797-1145
Budget & Finance	797-1050	Police Department	693-8200
Development Services	797-1111	Public Works	797-1240
Engineering	797-1113	Town Clerk's Office	797-1023
Fire Department	797-1090	Utilities	327-3742
Human Resources	797-1010		

TOWN OF DAVIE UTILITIES 6591 Orange Drive, Davie, Florida 33314-3399 (954) 327-3742

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**MEMORANDUM**

**TO:** Herb Hyman, Procurement Manager  
**FROM:** Bruce Taylor, Utilities Director *BT*  
**DATE:** December 8, 2006  
**RE:** Bid Recommendation – Water and Wastewater Polymers

The Utilities Department would like to recommend awarding the bid for Water and Wastewater Polymers in three parts as follows:

- Fort Bend Services - Dewatering Polymer
- Tropicem Enterprises – Starch
- Atlantic Coast Polymers, Inc. – Potable Water Polymer

We have been testing the products provided by Fort Bend Services and Atlantic Coast Polymers, Inc. at our water and wastewater plants for the past week and have found that they meet all plant specifications as well as meet all regulatory parameters.

Four bids were submitted for these products with only one bidder, Tropicem Enterprises, submitting a bid for Starch. Starch is a coagulant aid to the water treatment plant polymer and is vital to the settlement and flocculation in the clarification process of the water treatment plant.

We have contacted each vendor who has agreed to sell their products as stand alone items (see attached letters). By awarding this bid in three parts, the Town will realize a savings of approximately \$23,000.

If you need additional information, please contact me.

:hkc

	A	B	C	D	E
1					
2					
3					
4					
5					
6					
7					
8	DEWATERING POLYMER-14,000 LBS.	\$30,660.00	\$18,200.00	\$19,152.00	\$21,700.00
9	STARCH-18,000 LBS.	\$44,280.00			
10	POTABLE WATER POLYMER-6,600 LBS.	\$22,374.00	\$12,408.00	\$11,536.80	\$12,144.00
11					
12	TOTAL	\$97,314.00	\$30,608.00	\$30,688.80	\$33,844.00
13					
14					

POLYMERS

TROPICHEM ENT. FORT BEND SERVICES ATLANTIC COAST LEACHEM INDUSTRIES

6207 BEF CAVES ROAD  
SUITE 180  
AUSTIN, TX 78746  
Phone: 512.732.0007  
Fax: 512.732.0008

**Atlantic Coast Polymers, Inc.**

# Fax

**To:** Mr. Bruce Taylor, Utility Director **From:** Stuart Siegele  
**Fax:** 954-327-3752 **Date:** November 29, 2006  
**Phone:** **Pages:** 1  
**Re:** Town of Davie Potable Polymer Bid **CC:**

Urgent  For Review  Please Comment  Please Reply  Please Recycle

**-Comments:** Dear Bruce,

Atlantic Coast Polymers Inc. (ACP) offers to supply our Stockhausen 2515TR Potable polymer as a stand alone item, at our bid price, for your bid: "POLYMERS FOR POTABLE WATER AND WASTEWATER, B-06-131" without ACP being awarded or supplying the other two bid items.

If I can be of further assistance please feel free to contact me at anytime.

Sincerely,



Stuart Siegele

President ACP, Inc.



j.w.beltz@att.net  
12/08/2006 10:32 AM

To janis\_zajac@davie-fl.gov  
cc  
bcc  
Subject Bid B-06-131 Polymers for Potable and Wastewater

With respect to the above bid, Tropicem Enterprises will accept an award of ant portion or portions of the bid that the Town of Davie sees fit to award to Tropicem Enterprises.

All terms and conditions set forth in the bid shall apply to each portion awarded.

If you need further information please give me a call.

James W. Beltz  
Vice President, Tropicem Enterprises

## FORT BEND SERVICES, INC.

MAILING ADDRESS  
P.O. Box 1688  
Stafford, TX 77497  
(800) 933-3678 Toll Free



13303 Redfish Lane  
Stafford, TX 77477  
Office (281) 261-5199  
Fax (281) 261-2295

*Waste & Water Treatment Specialists*

Nov 29, 2006

Mr. Bruce Taylor  
Town of Davie  
Davie, FL  
Fax #: 954-327-3752

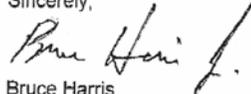
RE: Flocculant, Polymer/Waste Water Sludge

Mr. Taylor,

As per my discussion with your office, we agree to supply the FBS-C683 as specified in your Bid Request # B-06131.

If you should have any questions, please call.

Sincerely,



Bruce Harris  
National Sales Manager  
Fort Bend Services, Inc.

**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)  
**EPB Inc.**  
Business name, if different from above  
**Tropicchem Enterprises**

Check appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other  Exempt from backup withholding

Address (number, street, and apt. or suite no.)  
**111 Green Point Circle**  
City, state, and ZIP code  
**Palm Beach Gardens, FL 33418-8040**

Requester's name and address (optional)

List account number(s) here (optional)

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

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is 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  
| | | | | | | | | |  
OR  
Employer identification number  
**6 5 4 0 5 7 1 7 7 4**

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

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

**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.)

Sign Here Signature of U.S. person *Laura W. Bell* Date *10/06/2006*

**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.

**U.S. person.** 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:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, 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.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

**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,

**Town of Davie  
Vendor/Bidder Disclosure**

I, James W. Beltz, being first duly sworn state that:  
The full legal name and business address of the person(s) or entity contracting with the  
Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: EPB Inc. dba Tropichem Ent.  
Address: 111 Green Point Circle  
Palm Beach Gardens, FL 33418-804  
FEIN 65-0571774  
State and date of incorporation Florida March 27, 1995

**OWNERSHIP DISCLOSURE AFFIDAVIT**

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
<u>Elizabeth P. Beltz</u>	<u>See Below</u>	<u>51 %</u>
<u>James W. Beltz</u>	<u>See Below</u>	<u>49 %</u>
<u>111 Green Point Circle, Palm Beach Gardens, FL 33418-8040</u>		<u>%</u>

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

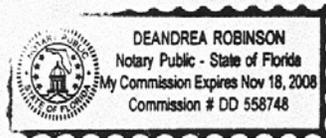
Full Legal Name	Address
<u>None</u>	

By: James W. Beltz  
Signature of Affiant

Date: 10/04/2006

James W. Beltz  
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 4 day of  
October 2006, by James Beltz, he/she is  
personally known to me or has presented FDL as  
identification.



DR

Notary Public, State of Florida at Large

DeAndrea Robinson  
Print or Stamp of Notary

DD 558748  
Serial Number

My Commission Expires: Nov 18, 2008

**Request for Taxpayer  
 Identification Number and Certification**

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

Name (as shown on your income tax return)  
**Fort Bend Services, Inc.**

Business name, if different from above

Check appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other  Exempt from backup withholding

Address (number, street, and apt. or suite no.)  
**P.O. Box 1688**

City, state, and ZIP code  
**Stafford, Texas 77497**

Requester's name and address (optional)  
**Town of Davie  
 6591 Orange Drive  
 Davie, Florida 33314-3399**

List account number(s) here (optional)

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

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is 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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or

Employer identification number

7	4	2	1	4	4	6	4	2
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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.

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

**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.)

Sign Here      Signature of U.S. person *Summary Luena*      Date **October 6, 2006**

**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.

**U.S. person.** 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.

In 3 above, 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 the Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

**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.

**Town of Davie  
Vendor/Bidder Disclosure**

I, David James, being first duly sworn state that:  
The full legal name and business address of the person(s) or entity contracting with the  
Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Fort Bend Services, Inc.  
Address: P.O. Box 1688  
Stafford, Texas 77497  
FEIN 74-2144642  
State and date of incorporation Texas, 1979

**OWNERSHIP DISCLOSURE AFFIDAVIT**

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Lyn Levens, CEO	13303 Redfish Lane Stafford, Tx 77477	55 %
J.C. Dromgoole, President	13303 Redfish Lane Stafford, Tx 77477	45 %
_____	_____	_____ %
_____	_____	_____ %

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

By: David James  
Signature of Affiant

Date: October 6, 2006

David James  
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 6<sup>th</sup> day of  
October, 2006, by David James, he/she is  
personally known to me or has presented \_\_\_\_\_ as  
identification.



Marjorie R. Lazio  
Notary Public, State of Florida ~~at Large~~

\_\_\_\_\_  
Print or Stamp of Notary

\_\_\_\_\_  
Serial Number

My Commission Expires : \_\_\_\_\_

**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 last, first, and middle initial (as shown on your income tax return)  
**Atlantic Coast Polymers Inc.**

Business name if different from above

Check appropriate box  Individual/Sole proprietor  Corporation  Partnership  Other  Exempt from backup withholding

Address (number, street, and apt. or suite no.)  
**6207 Bee Coves Rd, Suite 190**

City, state, and ZIP code  
**Dustin, TX 78746**

List account number(s) here (optional)

Requester's name and address (optional)

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

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is 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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or

Employer identification number

**01611341016911**

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

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

**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.)

Sign Here Signature of U.S. person **SA [Signature]** Date **9/00/06**

**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.

- U.S. person.** 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:
- Certify that the TIN you are giving is correct for you are waiting for a number to be issued;
  - Certify that you are not subject to backup withholding; or
  - Claim exemption from backup withholding if you are a U.S. exempt payee.
- In 3 above, 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 may file the requester's form if it is substantially similar to the Form W-9.

For federal estate purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

**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.

**TOWN OF DAVIE  
Vendor/Bidder Disclosure**

I, Stuart Siegel being first duly sworn state that:  
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: ATLANTIC COAST POLYMERS, INC.  
6207 Bee Caves Road  
Suite 180  
Address: Austin, Texas 78746  
Phone: (888) 632-0007  
Fax: (512) 732-0008

FEIN 06-1348691

State and date of incorporation Delaware 3/92

**OWNERSHIP DISCLOSURE AFFIDAVIT**

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
<u>Stuart Siegel</u>	<u>2304 Camino Alto</u>	<u>Dustin TX % 53</u>
<u>Fred Siegel</u>	<u>2723 Barton Blvd</u>	<u>Dustin TX % 15</u>
<u>Stephen Siegel</u>	<u>3600 Woodcutters</u>	<u>Dustin TX % 13</u>
<u>Steve Kuzick</u>	<u>145 Pennwoods Dr, Irwin PA</u>	<u>% 13</u>

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
<u>Stouckhusen</u>	<u>Greensboro NC.</u>

By: St. l  
Signature of Affiant

Date: 9/30/06

Stuart Siegel  
Print Name

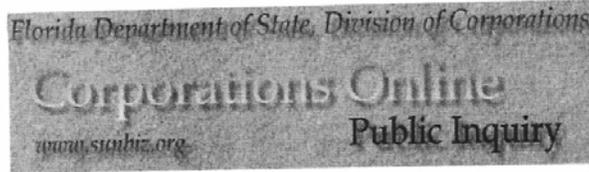
SUBSCRIBED AND SWORN TO or affirmed before me this 30<sup>th</sup> day of September 2006, by Stuart Siegel, he/she is personally known to me or has presented DL as identification.

Brenda Schuder  
Notary Public, State of ~~Florida~~ Texas at Large

Print or Stamp of Notary

Serial Number

My Commission Expires: 7-9-07



**Florida Profit**

**E P B INC.**

**PRINCIPAL ADDRESS**  
 111 GREEN POINT CIRCLE  
 PALM BEACH GARDENS FL 33418-8040

**MAILING ADDRESS**  
 111 GREEN POINT CIRCLE  
 PALM BEACH GARDENS FL 33418-8040

<b>Document Number</b> P95000024965	<b>FEI Number</b> 650571774	<b>Date Filed</b> 03/27/1995
<b>State</b> FL	<b>Status</b> ACTIVE	<b>Effective Date</b> NONE

**Registered Agent**

Name & Address
BELTZ, JAMES W 111 GREEN POINT CIRCLE PALM BEACH GARDENS FL 33418-8040

**Officer/Director Detail**

Name & Address	Title
BELTZ, JAMES W 111 GREEN POINT CIRCLE PALM BEACH GARDENS FL 33418-8040	VD
BELTZ, ELIZABETH P 111 GREEN POINT CIRCLE PALM BEACH GARDENS FL 33418-8040	PD

**Annual Reports**

Report Year	Filed Date
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2004	01/19/2004
2005	01/23/2005
2006	01/09/2006

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No Events  
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### Document Images

Listed below are the images available for this filing.

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01/23/2005 -- ANNUAL REPORT  
01/19/2004 -- ANNUAL REPORT  
01/20/2003 -- ANNUAL REPORT  
01/24/2002 -- ANNUAL REPORT  
01/26/2001 -- ANN REP/UNIFORM BUS REP  
01/25/2000 -- ANN REP/UNIFORM BUS REP  
02/19/1999 -- ANNUAL REPORT  
01/28/1998 -- ANNUAL REPORT  
01/16/1997 -- ANNUAL REPORT  
03/22/1996 -- 1996 ANNUAL REPORT

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

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## Corporation Search Results

## Franchise Tax Certification of Account Status

### This Certification Not Sufficient for Filings with Secretary of State

Do **not** include a certification from this Web site as part of a filing with the Secretary of State for dissolution, merger, withdrawal, or conversion. The Secretary of State will reject a filing that uses the certification from this site.

To obtain a certificate that is sufficient for dissolution, merger, or conversion, see Publication 98-336d, Requirements to Dissolve, Merge or Convert a Texas Entity.

Certification of Account Status	Officers And Directors Information
Company Information:	<b>FORT BEND SERVICES INC</b> PO BOX 1688 STAFFORD, TX 77497-1688
Status:	<b>IN GOOD STANDING NOT FOR DISSOLUTION OR WITHDRAWAL through May 15, 2007</b>
Registered Agent:	LYN H LEVENS 12201 FM 2759 RICHMOND, TX 77469
Registered Agent Resignation Date:	
State of Incorporation:	TX
File Number:	0054748900
Charter/COA Date:	January 26, 1981
Charter/COA Type:	Charter
Taxpayer Number:	17421446422

Carole Keeton Strayhorn  
Texas Comptroller of Public Accounts

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## Corporation Search Results

## Franchise Tax Certification of Account Status

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To obtain a certificate that is sufficient for dissolution, merger, or conversion, see Publication 98-336d, Requirements to Dissolve, Merge or Convert a Texas Entity.

Certification of Account Status	Officers And Directors Information
Company Information:	<b>ATLANTIC COAST POLYMERS INC</b> 6207 BEE CAVE RD STE 180 AUSTIN, TX 78746-5085
Status:	<b>IN GOOD STANDING NOT FOR DISSOLUTION OR WITHDRAWAL through May 15, 2007</b>
Registered Agent:	STUART F. SIEGELE 6207 BEE CAVES RD., STE 180 AUSTIN, TX 78746
Registered Agent Resignation Date:	
State of Incorporation:	DE
File Number:	0800165487
Charter/COA Date:	January 15, 2003
Charter/COA Type:	COA
Taxpayer Number:	10613406916

Susan Combs  
Texas Comptroller of Public Accounts

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