

SECTION A: FEE SCHEDULE *(This form must be completed, no substitute forms allowed)*

Description	Monthly Rate	Months	Annual total
Monthly Custodial Services as described herein	\$ 935.00	12	\$ 11,220.00

SECTION B: SUBMISSION INFORMATION

Submit pages with section A, B, C, D, and current W-9 form.

Awarded Contractor will be asked to submit certificate of insurance with minimum standards stated herein prior to commencing work.

Deliver to: City of Daytona Beach Purchasing Division
301 S. Ridgewood Avenue; Daytona Beach, FL 32115-2451

Email to: purchasing@codb.us

Fax to: (386) 671-8085

Questions to: Kirk Zimmerman, CPPB ~ Buyer
purchasing@codb.us

SECTION C: VENDOR / RESPONDENT INFORMATION

- By signing below I agree that I am an authorized representative of the company.
- I have read and fully understand the scope, terms, and conditions described herein.
- I understand this is only an offer and not a guarantee that the company listed below will be selected.
- If selected, I agree to bind the company listed below to the terms and conditions set forth in this quote.

Company Name: Precision Carpet-Tile & Upholstery Cleaning, Inc. dba: Precision Building Services	Representative Signature: <i>Steve Gois</i>
Full Address: 2024 Hibiscus Drive Suite B Edgewater, FL 32141	Printed Name & Title: Steve Gois President
Telephone: 386-756-1125	Email: Precisionctuc@yahoo.com
Fax: 386-426-5343	FEI/EIN Number: 02-0558867

SECTION D: REFERENCES (This form must be completed, no substitute forms allowed)

List references for whom similar work has been performed. List people whom you worked directly with, not Presidents or CEO's that may not have knowledge of your work.

Name Gambro Renal Products Contact Person Barry Arnett

Address 1845 Mason Ave Daytona Beach FL 32117 Telephone Number 386-481-1155

Name East Central Florida Outpatient Imaging Contact Person Tim Smith

Address 1673 Mason Ave Daytona Beach FL 32117 Telephone Number 386-679-1692

Name International Hair Academy Contact Person Annette Dejourneff

Address 2550 S. Ridgewood Ave South Daytona FL 32119 Telephone Number 386-872-4247 Ext 223

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) Precision Carpet-Tile & Upholstery Cleaning, Inc.	
	Business name/disregarded entity name, if different from above d/b/a: Precision Building Services	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input checked="" 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) ▶ _____	
	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____	
	Address (number, street, and apt. or suite no.) 2024 Hibiscus Drive Suite B City, state, and ZIP code Edgewater, FL 32141 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 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 <i>How to get a TIN</i> on page 3. Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="9" style="text-align: center;">Social security number</th> </tr> <tr> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="9" style="text-align: center;">Employer identification number</th> </tr> <tr> <td style="width: 20px; height: 20px;">0</td> <td style="width: 20px; height: 20px;">2</td> <td style="width: 20px; height: 20px;">-</td> <td style="width: 20px; height: 20px;">0</td> <td style="width: 20px; height: 20px;">5</td> <td style="width: 20px; height: 20px;">5</td> <td style="width: 20px; height: 20px;">8</td> <td style="width: 20px; height: 20px;">8</td> <td style="width: 20px; height: 20px;">6</td> <td style="width: 20px; height: 20px;">7</td> </tr> </table>	Social security number																		Employer identification number									0	2	-	0	5	5	8	8	6	7
Social security number																																						
Employer identification number																																						
0	2	-	0	5	5	8	8	6	7																													

Part II Certification	
Under penalties of perjury, I certify that:	
<ol style="list-style-type: none"> 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person (defined below), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. 	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	

Sign Here	Signature of U.S. person ▶	Date ▶ 10/12/16
------------------	----------------------------	-----------------

General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

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, payments made to you in settlement of payment card and third party network transactions, 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, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and 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 under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 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 section 1446 withholding on your share of partnership income.



THE CITY OF DAYTONA BEACH
OFFICE OF THE PURCHASING AGENT

Post Office Box 2451
Daytona Beach, Florida 32115-2451

Phone (386) 671-8080
Fax (386) 671-8085

ADDENDUM NO. 1

DATE: October 3, 2016
PROJECT: QUOTE 9917-2871
REQUOTE-TENNIS CENTER CUSTODIAL SERVICES
CLOSING DATE: OCTOBER 13, 2016 AT 5:00 PM

This addendum is hereby incorporated into the Bid Documents for the project referenced above. The following items are clarifications, corrections, additions, deletions and/or revisions to and shall take precedence over the original documents. Additions are indicated by underlining, deletions are indicated by ~~strikethrough~~.

1. Answers to Bidders' written questions:

Q1: Is the building single story or two stories.

A1: Winning quote will clean 2nd story plus stairway and entry.

Q2: What is the current price for cleaning services?

A2: \$950 per month

Q3: What is the name of current cleaning company?

A3: J.W. Professional Looks

Q4: How many years have they been cleaning the Tennis Center?

A5: Six

Q5: Who will be cleaning interior and exterior windows?

A5: City Staff

2. All other terms and conditions remain the same.

The Bidder shall acknowledge receipt of this addendum at bottom of Quote schedule.

The City of Daytona Beach
Kirk Zimmerman, CPPB
Buyer