

PAGE: 1 OF 1

DEPARTMENT
Fac. Maint./Parks & Rec.

REQUISITION BY:

[illegible]

APPROVED BY:

☐ Subtotal

☐ Total

**\$62,342.05**

**NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS**  
**RESTROOM PAINTING INTERIOR AND EXTERIOR - BEACH FRONT PARKS**  
**BID NO.: NC17-005**  
**BID OPENING: MARCH 16, 2017**

**BID TABULATION**

	Contractor	Burney Park	Peters Point Park	Bid Amount	#Days
1	Dunmar Group, Inc.	\$19,950.00	\$42,392.05	\$ 62,342.05	120
1	Krystal Companies, LLC, DBA Krtstal Kleen	\$41,000.00	\$67,210.00	\$ 108,210.00	120
1	Hall's Quality Painting Co, Inc.	\$27,255.00	\$75,440.00	\$ 102,695.00	90

Non-compliance Notes: (None)

Contract Management  
 Prepared by: David J. Pensante  
 Report Date: 3/16/2017, 4:00 PM

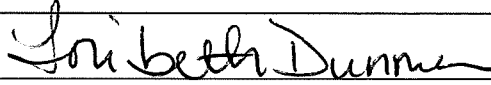


## INVITATION TO BID

### NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS

Bid Title: <b>Restroom Painting Interior and Exterior – Beach Front Parks</b>	
Bid Number: <b>NC17-005</b>	
Requesting Department: <b>Facilities Maintenance</b>	Bid Contact: <b>David J. Pensante, Procurement Manager</b>
Contact Address: <b>96135 Nassau Place, Suite 6, Yulee, FL 32097</b>	Contact Number and Email: <b>904-530-6040 dpensante@nassaucountyfl.com</b>
Bid Due Date or Closing Date/Time: <b>Wednesday, March 15, 2017 @ 4:00 p.m.</b>	Bid Opening Date/Time: <b>Thursday, March 16, 2017 @ 10:00 or soon there after</b>
Location to Deliver Bid: <b>Nassau County Board of County Commissioners, John A. Crawford, Ex-Officio Clerk, 76347 Veterans Way, Suite 456, Yulee, FL 32097</b>	

In accordance with the intent and content of this Invitation to Bid (ITB), we the undersigned do hereby offer to perform as stipulated in this response. Failure to do so may result in the forfeiting of bid security, removal from the County's bidder list, or other remedies available to the County under the laws of the State of Florida.

Legal Name of Bidder: <b>Dunmar Group, Inc.</b>		
Business Address <b>85101 Commercial Park Drive, Yulee, FL 32097</b>		
Phone Number <b>904-849-7346</b>	Fax Number <b>904-849-7571</b>	E-Mail Address: <b>info@dunmargroup.com</b>
Contractor's Florida License Number (as applicable): <b>CGC1522817</b>		
Authorized Signature (manual) 		Date: <b>03/15/2017</b>
Printed Signature: <b>Loribeth Dunman</b>		Title: <b>President</b>

#### BIDDER DECLARATION / ACKNOWLEDGMENT

1. Bids will be opened by a representative of the Clerk's Office in the Clerk's Small Conference Room (76347 Veterans Way, Yulee, FL 32097) on the appropriate date and time as shown above. Bid documents will be available upon notice of an intended decision or after 30 days after bid opening (whichever is earliest), pursuant to FS 119.071 (b).
2. Bids must be SUBMITTED ON THE FORM FURNISHED BY THE COUNTY and in accordance with specifications and list of quantities desired.
3. Page One must be completed and submitted as the top sheet of your bid response.
4. It is the intent and purpose of Nassau County that this Invitation to Bid promotes competitive bidding. It shall be the bidder's responsibility to advise the Contract Management Office at the address noted above, if any language, requirements, etc., or any combination thereof, inadvertently restricts or limits the requirements stated in this Invitation to Bid to a single source. Such notification must be submitted in writing and must be received by the Contract Management Office not later than seven (7) calendar days prior to the bid closing date.
5. **THERE WILL BE A MANDATORY PRE-BID CONFERENCE FOR THIS BID (SEE ARTICLE A19).**

**(THIS PAGE MUST BE RETURNED WITH YOUR BID)**

## ATTACHMENT "B"

## BID PRICE SHEET

RESTROOM PAINTING – BEACH FRONT PARKS  
BID NUMBER NC17-005

Location/Description	Lump Sum Bid
<b>BURNEY PARK:</b> Provide all necessary materials, labor, insurances and permits required for the interior and exterior restroom painting project in accordance with the scope of work and terms and conditions detailed in the bid documents referenced above.	\$ <u>19,950.00</u>
<b>PETERS POINT PARK:</b> Provide all necessary materials, labor, insurances and permits required for the interior and exterior restroom painting project in accordance with the scope of work and terms and conditions detailed in the bid documents referenced above.	\$ <u>42,392.05</u>
<b>TOTAL BID:</b>	\$ <u>62,342.05</u>

(Total bid amount in words)

The projects shall be completed within 120 days from the date Contractor receives a Purchase Order.

**Note:** All Products shall be the listed Sherwin Williams Products or an equivalent or greater product. Vendors who choose to quote an alternate product shall provide submittals on product **NO LATER THAN** 10 days prior to bid close date for review by Facilities Maintenance Department to determine if product substitution is acceptable. Data Sheets are to be provided to Nassau County for all products to be used. All products are to be applied as listed in manufacturer submittal directions at the rate listed for coverage, at a minimum, to provide a clean neat finish.

The undersigned declares that they have examined the Notice to Bidders, Instructions to Bidders, and Technical Specifications/Scope of Work and is informed fully with regard to all terms and conditions pertaining thereto and agrees under these specifications at the prices set forth above.

Company: Dunmar Group, Inc.

Address: 85101 Commercial Park Drive

City, State, Zip: Yulee, FL 32097

By:   
(Signature)

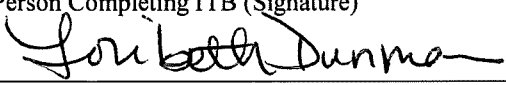
Loribeth Dunman

(Above name printed or typed)

Phone: 904-849-7346 Fax: 904-849-7571

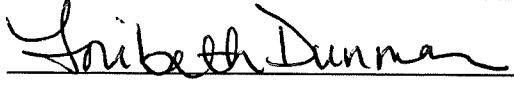
Email: info@dunmargroup.com, ddunman@dunmargroup.com

**ATTACHMENT “D”****Addenda Acknowledgment**

Acknowledgment is hereby made of receipt of addenda issued during the solicitation period.  Bid Number NC17-005	Addendum # <u>  1  </u> through # <u>  1  </u>  Initial:   LD  Date:     03/15/2017
Person Completing ITB (Signature) 	
Name (Printed):  Loribeth Dunman	Title:  President

&gt;&gt;&gt;Failure to submit this form may disqualify your response&lt;&lt;&lt;

**ACKNOWLEDGMENT IS HEREBY MADE OF RECEIPT OF THIS ADDENDUM NO. 1, ISSUED DURING THE SOLICITATION PERIOD:**

Vendor Signature:  Date: 3/15/17

**NOTE:** You are required to acknowledge receipt of this addendum by signing and submitting it with your bid/proposal (signature page only). In addition you are required to acknowledge receipt on the Addenda Acknowledgment (Attachment D).

**End of Addendum #1**

**ATTACHMENT “E”****NASSAU COUNTY****SWORN STATEMENT UNDER SECTION 287.133(3)(a), FLORIDA STATUTES,  
ON PUBLIC ENTITY CRIMES**

THIS MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS

1. This sworn statement is submitted with Bid, Proposal or Contract for Restroom Painting Interior & Exterior - Beach Front Parks.
2. This sworn statement is submitted by Dunmar Group, Inc. (entity submitting sworn statement), whose business address is 85101 Commercial Park Drive, Yulee, FL 32097 and its Federal Employee Identification Number (FEIN) is 26-4834062. (if the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: \_\_\_\_\_).
3. My name is Loribeth Dunman (please print name of individual signing), and my relationship to the entity named above is as President.
4. I understand that a “public entity crime” as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services, any leases for real property, or any contract for the construction or repair of a public building or public work, to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that “convicted” or “conviction” as defined in paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction or a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that an “affiliate” as defined in paragraph 287.133(1)(a), Florida Statutes, means:
  - a) A predecessor or successor of a person convicted of a public entity crime; or
  - b) An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term “affiliate” includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not to fair market value under an arm’s length agreement, shall be prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.
7. I understand that a “person” as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term “person” includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
8. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

X Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one of more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, and (Please indicate which additional statement applies.)

\_\_\_\_\_ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the Hearing Officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)

\_\_\_\_\_ The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)

\_\_\_\_\_ The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

*Loisbeth Durman*  
(Signature)

03/15/2017  
Date

STATE OF FLORIDA  
COUNTY OF *Nassau*

PERSONALLY APPREAED BEFORE ME, the undersigned authority, *Loisbeth Durman*, who, after first beingsworn by me, affixed his/her signature in the space provided above on this *15<sup>th</sup>* day of *March*, 201 *7*.

*Christine E. Connery*  
(Notary Public)

My Commission Expires: *October 1, 2018* (seal)



CHRISTINE E. CONNERY  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# FF155758  
Expires 10/1/2018



## ATTACHMENT "F" EXPERIENCE OF BIDDER

The following questionnaire shall be answered by the bidder for use in evaluating the bid to determine the lowest, responsive, and responsible bidder, meeting the required specifications.

1. **FIRM NAME:** Dunmar Group, Inc.  
 Address: 85101 Commercial Park Drive  
 City/State/Zip: Yulee, FL 32097  
 Phone: 904-849-7346 Fax: 904-849-7571  
 Name of primary contact responsible for work performance: Loribeth Dunman  
 Phone: 904-849-7346 Cell Phone: 904-583-1946 Email loridunman@dunmargroup.com
  
2. **INSURANCE:**  
 Surety Company: FCCI Insurance Company  
 Agent Company: Bouchard Insurance Company  
 Agent Contact: Mark Pichowski  
 Total Bonding Capacity: \$ 5,000,000 Value of Work Presently Bonded: 300,000
  
3. **EXPERIENCE:**  
 Years in business: 8 Years  
 Years in business under this name: 8 Years  
 Years performing this type of work: 8 Years  
 Value of work now under contract: 100,000  
 Value of work in place last year: 1.3 million  
 Percentage (%) of work usually self-performed: 50%  
 Name of subcontractors you may use: N/A  
 Has firm: Failed to complete a contract: No  
 Been involved in bankruptcy or reorganization: No  
 Pending judgment claims or suits against firm: No
  
4. **PERSONNEL**  
 How many employees does your company employ:
 

Management	<u>3</u> Full time	<u>    </u> Part time
Site/Crew Supervisors	<u>3</u> Full time	<u>    </u> Part time
Workers/Laborers	<u>6</u> Full time	<u>    </u> Part time
Clerical	<u>1</u> Full time	<u>    </u> Part time
Other	<u>1</u> Full time	<u>    </u> Part time

**5. WORK EXPERIENCE:**

List your three (3) most significant commercial/governmental accounts where the contract was similar in scope and size to this bid.

Reference #1:

Company/Agency Name: Nassau County Board of County Commissioners  
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097  
Contract Person: Jeff Little  
Phone: 904-530-6126 Fax: cell-904-753-4033 Email: j.little@nassaucountyfl.com  
Project Description: Build & Paint Concession Stand & Football Press Box at Yulee Sports Complex  
Contract \$ Amount: \$ 80,635.00  
Date Completed: October 2016

Reference #2:

Company/Agency Name: Nassau County Board of County Commissioners  
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097  
Contract Person: Joe Novello- Animal Control  
Phone: 904-530-6151 Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Project Description: Paint & Carpet Offices at Animal Control  
Contract \$ Amount: \$ 27,867.87  
Date Completed: March 2016

Reference #3:

Company/Agency Name: Nassau County Board of County Commissioners  
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097  
Contract Person: Jeff Little  
Phone: 904-530-6126 Fax: cell-904-753-4033 Email: j.little@nassaucountyfl.com  
Project Description: Restore/Repaint Pavillion at Burney Park  
Contract \$ Amount: \$ 9,341.98  
Date Completed: September 2016

**REMINDER:**

THIS FORM IS TO BE INCLUDED WITH BID. FAILURE TO SUBMIT ALONG WITH BID MAY BE CAUSE FOR DISQUALIFICATION.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/15/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 904-277-3495

T C Russo Associates Inc  
608 S. 8th St.  
Fernandina Beach, FL 32034

CONTACT NAME: T C Russo Associates Inc

PHONE (A/C, No, Ext): 904-277-3495

FAX (A/C, No):

E-MAIL ADDRESS: tcrinsurance@comcast.net

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : United Specialty Insurance Co.

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED

Dunmar Group Inc.  
85101 Commercial Park Way  
Yulee, FL 32097

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DCG00985-02	01/31/2017	01/31/2018	EACH OCCURRENCE
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		\$ 1,000,000				
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
			MED EXP (Any one person) \$ 5,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 1,000,000
							PRODUCTS - COMP/OP AGG \$ 1,000,000
							\$
B	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO		BODILY INJURY (Per person) \$				
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS		BODILY INJURY (Per accident) \$				
	<input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		PROPERTY DAMAGE (Per accident) \$				
							\$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		AGGREGATE \$				
	DED <input type="checkbox"/> RETENTION \$		\$				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N		N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

licensed contractor

## CERTIFICATE HOLDER

Nassau County Board of County Commissioners  
96135 Nassau Pl., Suite 6  
Yulee, FL 32097

## CANCELLATION

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

AUTHORIZED REPRESENTATIVE

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# CERTIFICATE OF LIABILITY INSURANCE

DUNMA-1

OP ID: SH

DATE (MM/DD/YYYY)

03/15/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Brown & Brown of Florida, Inc. Building 100, Suite 100 10151 Deerwood Park Blvd Jacksonville, FL 32256 Pilar Willis Dixon, CIC		<b>CONTACT NAME:</b> Pilar Willis Dixon, CIC <b>PHONE (A/C, No, Ext):</b> 904-565-1952 <b>FAX (A/C, No):</b> 904-565-2440 <b>E-MAIL ADDRESS:</b>		
<b>INSURED</b> Dunmar Group, Inc. 85101 Commercial Park Drive Yulee, FL 32097		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		<b>INSURER A : Auto Owners Insurance</b>		<b>18988</b>
		<b>INSURER B : Owners Insurance Company</b>		<b>32700</b>
		<b>INSURER C :</b>		
		<b>INSURER D :</b>		
		<b>INSURER E :</b>		
<b>INSURER F :</b>				

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

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
<b>B</b>	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		5084070100	08/17/2016	08/17/2017	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <b>DED</b> <input type="checkbox"/> <b>RETENTION \$</b> <input type="checkbox"/>					EACH OCCURRENCE \$ AGGREGATE \$ \$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	78228857	08/17/2016	08/17/2017	WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>

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

**CERTIFICATE HOLDER****CANCELLATION**

Nassau County Board of County Commissioners  
96135 Nassau Place, Suite 6  
Yulee, FL 32097

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

AUTHORIZED REPRESENTATIVE

*Pilar Willis Dixon*



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

**CONSTRUCTION INDUSTRY LICENSING BOARD  
2601 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-0783**

**(850) 487-1395**

**DUNMAN, DERRICK DEWAYNE  
DUNMAR GROUP, INC.  
85101 COMMERCIAL DR  
YULEE FL 32097**

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

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

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

**DETACH HERE**

**RICK SCOTT, GOVERNOR**

**KEN LAWSON, SECRETARY**

**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD**

<b>LICENSE NUMBER</b>	
<b>CGC1522817</b>	

The **GENERAL CONTRACTOR**  
Named below IS **CERTIFIED**  
Under the provisions of Chapter 489 FS.  
Expiration date: **AUG 31, 2018**



**DUNMAN, DERRICK DEWAYNE  
DUNMAR GROUP, INC.  
85101 COMMERCIAL DR  
YULEE FL 32097**

