



DEPARTMENT OF PURCHASING AND CONTRACTS

15470 FLIGHT PATH DRIVE • BROOKSVILLE, FLORIDA 34604
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DATE: 9/24/2025

TO: Joe Goulart, Contracting Agent II

FROM: Sam Burdin, Project Manager

SUBJECT: Recommendation for Award Bid No. 25-C01119/JG
Project Name: Hernando County Detention Center Bravo Roof Replacement

The attached bid received from Allied Roofing, Inc. for the above referenced project/solicitation is submitted for your review, evaluation, and award recommendation. In accordance with the Hernando County Ordinance No. 93.16, Section 2-105 (6) and Purchasing and Contracts Department Policies and Procedures Manual, Procedure No. 130F, Paragraph 3. (D), Policy 140I, Paragraph 2(H), please complete items 2 through 6 and return this award recommendation form with your technical evaluation attached, approved by your department director/manager.

1. Total Contract Bid Price is: \$303,995.97 with alternate \$312,258.87
2. Reference checks are satisfactory: ☒ YES ☐ NO
If no, provide an explanation using the space provided below and/or attached to this form.
3. Recommend award as responsive and responsible bidder ☒ YES ☐ NO
If no, provide a detailed explanation using the space provided below and/or attached to this form.
4. Request Next Bidder? ☐ YES ☒ NO
5. Provide a statement that addresses the reason(s) for your recommendation or rejection. Include your basis for determining that pricing is fair and reasonable and that the Bidder has the ability and resources to perform in accordance with the bid terms, conditions and scope.

Allied roofing can provide services needed to accomplish the re-roof of bravo housing unit. Bid came in lower than what was budgeted for project.

6. Provide the funding information: Fund 1203 Dept 02114 Account 5606301

Recommendation Approved By: Juan Aceto

Date: 9/24/25

Department Director/Manager

Enclosure

TECHNICAL EVALUATION FOR BID AWARD

ITB# **25-C01119/JG**

Hernando County Detention Center Bravo Roof Replacement

This document has been developed to facilitate your evaluation. Your evaluation should be limited to the attached. **Purchasing will ensure that all documents required by the solicitation are contained for evaluation. This documentation will be included with the bid submitted for evaluation. Bids that are determined non-responsive by the Purchasing Division will not be submitted to you for evaluation.** Please note that you should focus your attention on the areas contained within this document. Your evaluation will be a major consideration as to the responsiveness and/or responsibility of a bidder.

- A. Is the amount of the bid reasonable and realistic for the services to be performed or the item or equipment to be purchased? Yes

If the bid is considered reasonable/realistic, provide justification for your conclusion. Bid came in way under budget; there were concerns that being a detention facility there would be additional cost added to project. Was not the case

If you consider the bid to be unreasonable and/or unrealistic, please explain in detail.

- B. Was an independent County estimate developed prior to soliciting for the procurement? No

If affirmative, submit this estimate with your evaluation in the same format as the bid schedule and describe the extent the estimate was used in the analysis of the bid.

- C. Do the resources (manpower, equipment, supplies, etc.) proposed by the bidder meet the minimum requirements, if any, established by the solicitation? Yes

If minimums were not identified in the solicitation, you may request information on proposed resources from the bidder **through Purchasing.**

TECHNICAL EVALUATION FOR BID AWARD

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When specific types and quantities of equipment are required to meet minimum standards, the bidder may address this requirement by providing purchasing with a pro-forma invoice with confirmation from a bank or lending institution to the effect that they are prepared to finance the lease or purchase of equipment necessary to perform the services if the bidder is awarded the contract.

D. Does the bidder have a satisfactory record of performance? Yes

At a minimum, the bidder's record on previous county contracts must be considered and an attempt must be made to contact all references. The reference form attached is to be used for your documentation of your reference check. If references cannot be contacted, the Department shall contact Purchasing for additional references. Purchasing shall request from the bidder in writing of this fact and inform that the reference must contact the project person within two business days or it will negatively impact the evaluation the bid.

E. Provide your overall recommendation on the Recommendation for Award Form. Facilities recommend awarding project to allied roofing

Note: At no time will the user/project person/bid evaluator discuss responsiveness, responsibility or withdrawal from the bidding process with any bidder. Moreover, it is strictly prohibited for any County representative involved in the bidding process to attempt to negotiate bids, influence or otherwise impact the business decisions of a bidder.

REFERENCE

Reference For (Firm/Company): Allied Roofing, Inc _____

Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):

Company Name: Resource Property Management

First Name, Last Name: Al Freda

PHONE #: 727-519-5325 Email: afreda@resourcepropertymgmt.com

1. Describe the work contracted to firm/company. Replacement of mod bit roofs on 30 one story buildings
2. Was the work completed on time? Yes
3. Were you satisfied with the final results? Yes
4. Did you implement their recommendations? Yes
5. Did you encounter any problems? Yes, but not their responsibility
6. How would you rate the company on a scale of 1 to 5 (low to high) on the following:

Professionalism 5

Qualifications 5

Final Product 5

Cooperation 4

Reliability 4

7. Would you contract with this company again?

Yes X No Maybe

Hernando County Use Only

Reference checked by: Sam Burdin

Date: 9/17/25

REFERENCE

Reference For (Firm/Company): Allied Roofing, Inc _____

Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):

Company Name: Sarasota Manatee Airport Authority

First Name, Last Name: Bob Joseph

PHONE #: 941-359-2270 Email: bob.joseph@flysrq.com

1. Describe the work contracted to firm/company.

Called and emailed above with no response

2. Was the work completed on time?
3. Were you satisfied with the final results?
4. Did you implement their recommendations?
5. Did you encounter any problems?
6. How would you rate the company on a scale of 1 to 5 (low to high) on the following:

Professionalism _____

Qualifications _____

Final Product _____

Cooperation _____

Reliability _____

7. Would you contract with this company again?

Yes _____ No _____ Maybe _____

Hernando County Use Only

Reference checked by: Samm Burdin Date: 9/24/25

REFERENCE

Reference For (Firm/Company): Allied Roofing, Inc _____

Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):

Company Name: Turner Construction Company

First Name, Last Name: Steven Dukes

PHONE #: 407-694-5265 Email: sdukes@tcco.com

1. Describe the work contracted to firm/company. Roof at James A. Haley VA Hospital
2. Was the work completed on time? Yes
3. Were you satisfied with the final results? Yes
4. Did you implement their recommendations? Yes assisted on design build
5. Did you encounter any problems? No
6. How would you rate the company on a scale of 1 to 5 (low to high) on the following:

Professionalism 5

Qualifications 5

Final Product 5

Cooperation 5

Reliability 5

7. Would you contract with this company again?

Yes X No _____ Maybe _____

Hernando County Use Only

Reference checked by: Sam Burdin

Date: 9/22/25