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## DEPARTMENT OF PURCHASING AND CONTRACTS

15470 FLIGHT PATH DRIVE \*\* BROOKSVILLE, FLORIDA 34604
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DATE: 11/17/2025 TO: Joseph Goulart, Contracting Agent II FROM: J. Scott Herring SUBJECT: Recommendation for Award Bid No. 25-T01093/JG Project Name: Mowing Services-Hernando Beach and Weeke Wachee The attached bid received from Triple Crown C Lawn Jockeys LLC 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), Policy140I, 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 Annual Contract Bid Price is: \$141,000.00 estimated 2. Reference checks are satisfactory: If no, provide an explanation using the space provided below and/or attached to this form. 3. Recommend award as responsive and responsible bidder  $\boxtimes$  YES  $\square$  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. It is recommended to award Triple Crown Lawn Jockeys as the lowest and responsible bidder. 6. Provide the funding information: Fund 1017 Dept 3232 Account 5303413

Recommendation Approved By:

Department Dector/Manager

**Enclosure** 

## TECHNICAL EVALUATION FOR BID AWARD

ITB# 25-T01093/JG ITB Name Mowing Services - Hernando Beach and Weeki Wachee

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.

### Lowest/responsible

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

N/A

B. Was an independent County estimate developed prior to soliciting for the procurement?

N/A

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.

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. RECOMMENDATION FOR AWARD

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 (Futtive Company):				
Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):				
Company Name: HERNANDO CO. PARKS & RECREATION				
First Name, Last Name: ROB TREMAGE				
PHONE #: 352-428-1988 Email: RTALMAGE CO. MERMADO. FL. US				
1. Describe the work contracted to firm/company.  Common AREA MOWING (DOES NOT INCLOSE ATHLETIC FISCO TURE)  FOR ZO PARKS AND 3 ADDITIONAL SITES.				
2. Was the work completed on time?  Typicater, yes				
3. Were you satisfied with the final results?  OUGNALC, YSS. DETRIL WORK SOME FINES IS CACKING. EMPLOYOUS SHOULD BE MORE CAUTIOUS AROUND PEOPLE IN THE PARKS, AND ANOUND PARK FIXTURES.  4. Did you implement their recommendations?  N/A  5. Did you encounter any problems?  SEE QUESTION 3.				
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				
ni 923 11/14/25				

# REFERENCE

Reference For (Firm/Company): Inple Cours Igun Jockeys					
Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):					
•	Company Name:	nordo Ca	My DPW		
1	First Name, Last Name:/	Nicholas	Babino		
1	PHONE #: <u>352-540</u>	1-6276	Email: Nibabino @gmail-Can		
1.	• •				
	moving the right of way				
2. Was the work completed on time?					
	yes				
3. 1	3. Were you satisfied with the final results?				
	yes				
4. 1	4. Did you implement their recommendations?				
	NA				
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	_ H	_		
	Qualifications	_3	_		
	Final Product	4	_		
	Cooperation	4	<del></del> :		
	Reliability	24			
7. Would you contract with this company again?					
	Yes	No	Maybe		
		593	11/14/2		

# **REFERENCE**

Reference For (Firm/Company): TRIPLE CROWN C LAWN JOCKEY'S				
Company & Person Completing Reference: (Company & First and Last Name of Person Completing this Form):				
Company Name: PRESTON HOllow HOA				
First Name, Last Name: DENALD TRIBBETT - VPOF HOA				
PHONE #: 352-777-4384 Email: DON of ris @ amail. com				
1. Describe the work contracted to firm/company.  IMAINTAIN COMMON PREAS AND DRH'S FOR PRESTON HOLLOW HOA.  2. Was the work completed on time?  HLWAYS				
3. Were you satisfied with the final results?  HAVE BEEN MAINTAING OUR DROPERTY FOR 3 YEARS.  AND WE WILL BE EXTENDING THEIR CONTRACT FOR HOOTHER  JEAR IN JUNE. NEVER HAD A COMPLAINT  1. 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 5				
Reliability				
7. Would you contract with this company again?				
Yes X No Maybe/				
and 92 1/14/25				