



Exhibit "B"

Centerline Services Group, Inc
1604 Pennsylvania Ave Unit 2
Miami Beach, FL 33139
(305)988-8042
contact@centerlineservices.us

Date: 06/11/2025

To:
City of Delray Beach
Purchasing and Contract Administration Division
100 NW 1st Avenue
Delray Beach, FL 33444

Subject: Litigation History Disclosure

Dear Purchasing and Contract Administration Division,

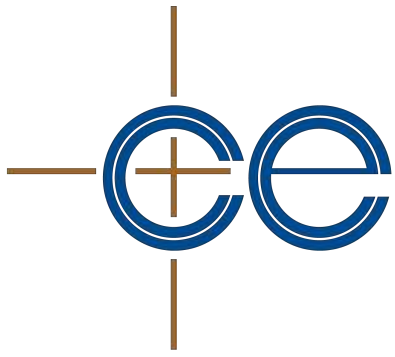
Pursuant to the requirements of the City of Delray Beach, we hereby submit our company's litigation history for the past three (3) years.

We confirm that Centerline Services Group, Inc has no reported litigation history during this period. There are no material cases, claims, or legal proceedings, pending or concluded, involving our company in any court or jurisdiction over the past three years.

Should you require any additional information or documentation, please do not hesitate to contact us.

Sincerely,

Dolly Giraldo
President
Centerline Services Group, Inc



Centerline Services Group, Inc Licenses and Certifications



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

GIRALDO, LUZ EDITH

CENTERLINE SERVICES GROUP INC
1604 PENNSYLVANIA AVE
UNIT 2
MIAMI BEACH FL 33139

LICENSE NUMBER: CGC1521387

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/07/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.





Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

HOME INSPECTORS LICENSING PROGRAM

THE HOME INSPECTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 468, FLORIDA STATUTES

GIRALDO, LUZ EDITH

15700 NE 2ND AVE
MIAMI FL 33162

LICENSE NUMBER: HI3587

EXPIRATION DATE: JULY 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 07/24/2024

Do not alter this document in any form.

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE ROOFING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

GIRALDO, LUZ EDITH

CENTERLINE SERVICES GROUP INC
15700 NE 2ND AVE
MIAMI FL 33162

LICENSE NUMBER: CCC1335693

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at [MyFloridaLicense.com](https://myfloridalicense.com)

ISSUED: 07/13/2024

Do not alter this document in any form.

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United States Environmental Protection Agency

This is to certify that



Centerline Services Group, Inc.

has fulfilled the requirements of the Toxic Substances Control Act (TSCA) Section 402, and has received certification to conduct lead-based paint renovation, repair, and painting activities pursuant to 40 CFR Part 745.89

In the Jurisdiction of:

All EPA Administered States, Tribes, and Territories

This certification is valid from the date of issuance and expires July 24, 2029

NAT-F266609-1

Certification #

July 10, 2024

Issued On



A handwritten signature in black ink, appearing to read "Marc Edmonds".

Marc Edmonds, Chief

Risk Assessment Management Branch 2.

Seagull Environmental Management Company

2835 N.W. 12TH Avenue, Fort Lauderdale, Florida 33311 (954) 524-7208



This is to Certify that

Luz Giraldo

15700 NE 2nd Avenue, Miami, FL 33162

has successfully completed a Spanish

8 Hr. Lead-Safe Renovator Course

13-Jul-24

TO

13-Jul-24

Accepted as Individual Certification in EPA administered states.

Alabama Accreditation Since: Jan. 27, 2011

Georgia Accredited: Chapter 391-3-24

Approved in Mississippi and accepted in most authorized states.

Trainer(s): Steve Leon

Training Address: 2835 NW 12th Ave., Wilton Manors, FL 33311

Passed an examination & hands-on skills assessment on: 07/13/24

This Certificate Expires:

Federally Administered States	14-Jul-29
Most authorized states	14-Jul-27
Georgia & Alabama	14-Jul-27

Processed By:

Seagull

To Authenticate Certificate
www.seagulltraining.com
1-800-966-9933

UNDER CIVIL AND CRIMINAL PENALTIES UNDER CIVIL AND CRIMINAL
PENALTIES OF LAW FOR MAKING OR SUBMISSION OF FALSE OR
FRAUDULENT STATEMENTS OR REPRESENTATIONS (18 U.S.C. 1001
AND 15 U.S.C 2615)

[Signature]

Certificate Number:



1 9 5 9 6 2

R-I-Subpart Q-24-95962

Course Number: SE2429

This certificate is only valid in conjunction with the appropriate firm certification. In addition, in some EPA authorized states, one must surrender this certificate to obtain a state certification for the individual. For additional certificates, contact Seagull at www.seagull.manage@gmail.com.



Office of Small Business Development
111 NW 1 Street, 19th Floor
Miami, Florida 33128
T 305-375-3111 F 305-375-3160
miamidade.gov

August 26, 2024

DOLLY GIRALDO
CENTERLINE SERVICES GROUP, INC.
1604 Pennsylvania Ave., Unit 2
Miami Beach, FL 33139

Approval Date: February 29, 2024 Small Business Enterprise - Construction (SBE-Con)
Expiration Date: February 28, 2027

Dear DOLLY GIRALDO,

Miami-Dade County Office of Small Business Development (SBD), has completed the review of your application and attachments submitted for certification. Your firm is officially certified as a Miami-Dade County Small Business Enterprise. The Small Business Enterprise (SBE) programs are governed by Sections 2-8.1.1.1.1; 2-8.1.1.1.2; 2-10.4.01; 10-33.02 of Miami-Dade County's Codes. This Small Business Enterprise - Construction (SBE-Con) certification is valid for three (3) years. However, to validate continuing eligibility, SBD may conduct random audit(s) within the three (3) year certification period. **Failure to provide required documentation for a random audit will initiate the decertification process.**

At the time of expiration, your firm will submit a Re-certification Application at least one hundred and eighty (180) days, but not less than, ninety (90) days, prior to the end of the three (3) year certification term via the County's web-based system, Business Management Workforce System (BMWS). This will ensure sufficient time for process by SBD. **Failure to provide the re-certification application and required supporting documentation will initiate the decertification process.**

If at any time there is a material or business structure change in the firm including, but not limited to, ownership, officers, director, scope of work being performed, daily operations, affiliations(s) with other businesses or the physical location of the firm, you must notify this office within thirty (30) calendar days of the effective date of the change(s) via the BMWS. Notification should include supporting documentation. You will receive timely instructions from this office as to how you should proceed, if necessary. **Failure to notify SBD of any changes may result in immediate action to decertify the firm.**

This letter will be the only approval notification issued for the duration of your firm's three-year certification. If the firm attains graduation or becomes ineligible during the three-year certification period, you will be properly notified following an administrative process that your firm's certification has been removed pursuant to the code. Your firm's name and tier level will be listed in the directory for all SBE certified firms, which can be accessed through Miami-Dade County's SBD website: <https://www.miamidade.gov/global/business/smallbusiness/home.page>. The categories as listed below affords you the opportunity to bid and participate on contracts with Small Business Enterprise measures.

It is strongly recommended that you register your firm as a bidder with Miami-Dade County. To register, you may visit: <https://www.miamidade.gov/global/business/procurement/home.page>. Thank you for your interest in doing business with Miami-Dade County. If you have any questions or concerns, you may contact our office at 305-375-3111 or via email at sbdcert@miamidade.gov.

Sincerely,

Jeanise Cummings-Labossiere
Section Chief, Small Business Development

CATEGORIES: (Your firm may bid or participate on contracts only under these categories)

NAICS 236115: NEW SINGLE-FAMILY HOUSING CONSTRUCTION (EXCEPT FOR-SALE BUILDERS)
NAICS 236116: NEW MULTIFAMILY HOUSING CONSTRUCTION (EXCEPT FOR-SALE BUILDERS)
NAICS 236117: NEW HOUSING FOR-SALE BUILDERS
NAICS 236118: RESIDENTIAL REMODELERS
NAICS 236210: INDUSTRIAL BUILDING CONSTRUCTION
NAICS 236220: COMMERCIAL AND INSTITUTIONAL BUILDING CONSTRUCTION
NAICS 237110: WATER AND SEWER LINE AND RELATED STRUCTURES CONSTRUCTION
NAICS 238110: POURED CONCRETE FOUNDATION AND STRUCTURE CONTRACTORS
NAICS 238120: STRUCTURAL STEEL AND PRECAST CONCRETE CONTRACTORS
NAICS 238160: ROOFING CONTRACTORS
NAICS 238910: SITE PREPARATION CONTRACTORS



Office of Small Business Development
111 NW 1 Street, 19th Floor
Miami, Florida 33128
T 305-375-3111 F 305-375-3160
miamidade.gov

August 26, 2024

DOLLY GIRALDO
CENTERLINE SERVICES GROUP, INC.
1604 Pennsylvania Ave., Unit 2
Miami Beach, FL 33139

Approval Date: February 29, 2024 Small Business Enterprise - Goods & Services (SBE-G&S)
Expiration Date: February 28, 2027

Dear DOLLY GIRALDO,

Miami-Dade County Office of Small Business Development (SBD), has completed the review of your application and attachments submitted for certification. Your firm is officially certified as a Miami-Dade County Small Business Enterprise. The Small Business Enterprise (SBE) programs are governed by Sections 2-8.1.1.1.1; 2-8.1.1.1.2; 2-10.4.01; 10-33.02 of Miami-Dade County's Codes. This Small Business Enterprise - Goods & Services (SBE-G&S) certification is valid for three (3) years. However, to validate continuing eligibility, SBD may conduct random audit(s) within the three (3) year certification period. **Failure to provide required documentation for a random audit will initiate the decertification process.**

At the time of expiration, your firm will submit a Re-certification Application at least one hundred and eighty (180) days, but not less than, ninety (90) days, prior to the end of the three (3) year certification term via the County's web-based system, Business Management Workforce System (BMWS). This will ensure sufficient time for process by SBD. **Failure to provide the re-certification application and required supporting documentation will initiate the decertification process.**

If at any time there is a material or business structure change in the firm including, but not limited to, ownership, officers, director, scope of work being performed, daily operations, affiliations(s) with other businesses or the physical location of the firm, you must notify this office within thirty (30) calendar days of the effective date of the change(s) via the BMWS. Notification should include supporting documentation. You will receive timely instructions from this office as to how you should proceed, if necessary. **Failure to notify SBD of any changes may result in immediate action to decertify the firm.**

This letter will be the only approval notification issued for the duration of your firm's three-year certification. If the firm attains graduation or becomes ineligible during the three-year certification period, you will be properly notified following an administrative process that your firm's certification has been removed pursuant to the code. Your firm's name and tier level will be listed in the directory for all SBE certified firms, which can be accessed through Miami-Dade County's SBD website: <https://www.miamidade.gov/global/business/smallbusiness/home.page>. The categories as listed below affords you the opportunity to bid and participate on contracts with Small Business Enterprise measures.

It is strongly recommended that you register your firm as a bidder with Miami-Dade County. To register, you may visit: <https://www.miamidade.gov/global/business/procurement/home.page>. Thank you for your interest in doing business with Miami-Dade County. If you have any questions or concerns, you may contact our office at 305-375-3111 or via email at sbdcert@miamidade.gov.

Sincerely,

Jeanise Cummings-Labossiere
Section Chief, Small Business Development

CATEGORIES: (Your firm may bid or participate on contracts only under these categories)

NIGP 91000: BUILDING MAINTENANCE, INSTALLATION AND REPAIR SERVICES
NIGP 91066: ROOFING, GUTTERS, AND DOWNSPOUTS MAINTENANCE AND REPAIR SERVICES
NIGP 91473: ROOFING AND SIDING
NIGP 91831: CONSTRUCTION CONSULTING
NIGP 91891: ROOFING CONSULTING
NIGP 96121: COST ESTIMATING
NIGP 96847: INSPECTION SERVICES, CONSTRUCTION TYPE

CITY OF DELRAY BEACH

NEIGHBORHOOD SERVICES DIVISION

CONTRACTOR APPLICATION AND QUALIFICATION SHEET



(PLEASE PRINT CLEARLY)

I have had experience working with government rehabilitation programs:

☐ New contractor/business

☒ 1 - 3 yrs.

☐ 4 - 10 yrs.

APPLICANT'S INFORMATION

Contractor Name (Last, First, MI) Giraldo Dolly J

BUSINESS INFORMATION

Business Full Name: <u>Centerline Services Group, Inc</u>			
D/B/A (if applicable)			
Address <u>1604 Pennsylvania Ave</u>		Suite. # <u>2</u>	
city <u>Miami Beach</u>	State <u>FL</u>	Zip Code <u>33139</u>	
Telephone-home: <u>(786)340-3476</u>		Office: <u>(305)988-8042</u>	
Fax:		Mobile:	
Email address: <u>contact@centerlineservices.us</u>			

License No.: CGC1521387 No. of years active: 12
Tax I.D. No.: 46-2052975 (Attach copies of licensure).

ALL PRINCIPLES IN FIRM

Full Legal Name	Address	Phone Number
Dolly J Giraldo	2706 Taylor Street Hollywood FL 33020	(786)340-3476
Luz E Giraldo	15700 NE 2nd Ave Miami FL 33162	(305)988-8042

LIST LAST THREE REHABILITATION PROJECTS:

Full Legal Name	Address	Type of Work	Amount
Adisha Francois	Varios Location - Hallandale Beach	CRA Program	\$400.000
Liliana Beltran	5815 N FARRAGUT DR HOLLYWOOD, FL 33021	CRA Program	\$
Cheryl Griffin	19200 NW 5th Place, Miami Gardens FL 33169	CRA program	\$90,650

LIST ANY OTHER FEDERALLY FUNDED OR LOCAL GOVERNMENT HOUSING PROGRAMS IN WHICH YOU ARE CURRENTLY OR HAVE PREVIOUSLY PARTICIPATED:

- Miami Dade County: Weatherization Program, - City of Hollywood : Community Development Program, - City of Miami Gardens:Community Development Program
- City of Hallandale Beach : Community Redevelopment Agency, North Miami: Housing & Social Services - City of North Miami Beach: Home Rehabilitation Program
- City of Delray Beach: Housing Rehabilitation Program - My Safe Florida Home

LIST BANK REFERENCES:

Bank of America: Cidny Pierre Small Business Banker (305) 853-9543

☐ I am a Section 3 Business
☐ I am a Minority/Women's Business Entity

LIST THREE PERSONAL REFERENCES

Full Legal Name	Address	Phone Number	Email Address
Adisha Francois	City of Hallandale Beach Community Redevelopment Agency	(954) 457-2236	afrancois@hallandalebeachfl.gov
Liliana Beltran	City of Hollywood Community Development Division	954-924-2923	LBELTRAN@hollywoodfl.org
Gustavo Velez	15700 NE 2nd Ave Miami Beach Fl 33162 - Sub contractor - Regosa Engineering Services	(786) 262-2964	contractorwork@gmail.com

INSURANCE CARRIER(S): Bona Insurance Gorup, LLC (Attach copy of certificate(s) of insurance).

Per department policy, all contractors are required to have \$1,000,000 insurance coverage for "Each Occurrence" and "General Aggregate". The City of Delray Beach should be named as the Certificate holder).

CERTIFICATION AND WAIVER OF PRIVACY:

The contractor(s) certify that all information in this application, and all information furnished in support of this application, is given for the purpose participating in the Affordable Housing Grant Rehabilitation Programs under the City of Delray Beach, and is true and complete to the best of the contractor(s) knowledge and belief.

The contractor(s) understand that Florida Statute 817 provides that willful false statements or misrepresentation concerning income; asset or liability information relating to financial condition is a misdemeanor of the first degree, punishable by fines and imprisonment provided under Statutes 775.082 and 775.083. I/we further understand that any willful misstatement of information will be grounds for disqualification. I/we certify that the application information provided is true and complete to the best of my/our knowledge. I/we consent to the disclosure of information for the purpose of income verification related to making a determination of my/our eligibility for program assistance. I further grant permission, and authorize any bank, employer or other public or private agency to disclose information deemed necessary to complete this application

I/we agree to provide any documentation needed to assist in determining eligibility and are aware that all information and documents provided are a matter of public record. I hereby waive my rights under the privacy and confidentiality provision act, and give my consent to the City of Delray Beach Affordable Housing Program, its agents and contractors to examine any confidential information given herein. I further grant permission, and authorize any bank, employer or other public or private agency to disclose information deemed necessary to complete this application.

06/11/2025

DATE

SIGNATURE OF CONTRACTOR

DATE

SIGNATURE OF CONTRACTOR

RETURN TO:

CITY OF DELRAY BEACH NEIGHBORHOOD
SERVICES DIVISION 100 NORTHWEST 1ST
AVENUE DELRAY BEACH, FLORIDA 33444

Office: (561) 243-7280 Fax: (561) 243-7221

Required Vendor Documents: W-9/Vendor List Application (Upon approval, you will have to complete the City's vendor application).



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/10/2025

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 have **ADDITIONAL INSURED** provisions or 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 Bona Insurance Group LLC 150 S Pine Island Rd Ste 300 Plantation FL 33324	CONTACT NAME: Andres Villabona PHONE (A/C, No, Ext): 954-417-8625 E-MAIL ADDRESS: nelson@globalginsurance.com FAX (A/C, No): 9544178627
INSURED Centerline Services Group, Inc 1604 Pennsylvania Ave Apt 2 Miami Beach FL 33139	INSURER(S) AFFORDING COVERAGE INSURER A: Sutton Specialty Insurance Company INSURER B: Kemper Infinity Commercial INSURER C: Accredited Surety and Casualty Company Inc. INSURER D: INSURER E: INSURER F:
	NAIC # 16848 39497 26379

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	ISCP04000048770	03/15/2025	03/15/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	50003659801	03/03/2025	03/03/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	1AUJFL160140385502	12/15/2024	12/15/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

City of Delray Beach 100 N.W. 1st Avenue Delray Beach, FL 33444	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 <i>Andres Villabona</i>
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City of Delray Beach

Neighborhood Services Division

CONTRACTOR SELF-CERTIFICATION

FISCAL YEAR 2024-2025

(10/1/24 to 9/30/25)

CONTRACTOR INFORMATION

Name and Address	Centerline Services Group, Inc 1604 Pennsylvania Ave Unit 2 Miami Beach FL, 33139
------------------------	--

SECTION 3 BUSINESS CONCERN STATUS

The Section 3 Business Concern status of the above-named contractor is:

- [] The contractor is 51%, or more, owned by an individual or individuals who:
- reside in public housing, or
 - reside in City of Delray Beach CDBG target area and whose household income, by household size, is at or below the income limits shown on the attached chart.
- [] At least 30% of the contractor's permanent full-time employees are individuals who within three years of the date of first employment were, or who currently are:
- residing in public housing, or
 - residing in City of Delray Beach CDBG target area and whose household income, by household size, is at or below the income limits shown on the attached chart.
- [] The Contractor commits to subcontract in excess of 25% of the dollar award of all subcontracts to business concerns that meet the qualifications set forth in either of the above two paragraphs. The Contractor provides the attached evidence of such commitment.

Note: Contractors who meet one of the above qualifications are regarded as Section 3 Business Concerns for the purpose of this self-certification.

- [x] The Contractor does not meet any of the above qualifications, and the Contractor is not a Section 3 Business Concern.

CONTRACTOR'S SELF-CERTIFICATION

The undersigned Contractor hereby certifies that the Contractor

[] IS a Section 3 Business Concern
[x] IS NOT a Section 3 Business Concern.

The Contractor, if certifying to be a Section 3 Business Concern, further certifies that the Contractor shall submit, if requested by the City of Delray Beach Neighborhood Services Division or the U. S. Department of Housing and Urban Development, evidence of the qualifications meeting the Section 3 Business Concern indicted above by the Contractor.

The Contractor also certifies that the Contractor shall comply with the Section 3 requirements regardless of whether the contractor qualifies as a Section 3 Business Concern or not, and understands that non-compliance may result in sanctions, termination of contracts for default, and debarment or suspension from federally funded contracts.

Name of individual or company officer: Dolly J Giraldo

Signature:  Date: 06/11/2025

Contractor Application Rev. 5/2024



CITY OF DELRAY BEACH

NEIGHBORHOOD SERVICES DIVISION HOUSING REHABILITATION PROGRAM

CONTRACTOR'S QUALIFICATION SHEET

ANNUAL LICENSURE UPDATE

PLEASE COMPLETE AND RETURN WITH ALL REQUIRED DOCUMENTS TO INSURE YOUR CONTINUED PARTICIPATION AS A HOUSING REHABILITATION CONTRACTOR.

NOTE: ALL LICENSURE WILL NEED TO BE UPDATED AS REQUIRED.

If your company fails to turn in the requested information before this date your company will be required to reapply for participation in the Neighborhood Services Division as an active Contractor. Please contact staff for more information.

☒ Information Unchanged

DATE: 06/11/2025

COMPANY NAME: Centerline Services Group, Inc

CONTACT PERSON: *please print* Dolly J Giraldo

MAILING ADDRESS: 1604 Pennsylvania Ave Unit 2

Miami Beach CITY: FL STATE: 33139 ZIP:

OFFICE PHONE NO: (305)988-8042 FAX NO: _____

HOME PHONE NO: (786)340-3476 MOBILE NO: _____

EMAIL ADDRESS: contact@centerlineservices.us

ANNUAL VERIFICATION OF THE FOLLOWING INFORMATION MUST BE PROVIDED:

- ☐ THIS COMPLETED FORM (If applicable)
- ☐ COPY OF LICENSURE FROM THE COUNTY & STATE
- ☐ COPY OF OCCUPATIONAL LICENSE WITH DELRAY BEACH
- ☐ COPY OF CERTIFICATE OF LIABILITY INSURANCE COVERAGE
- ☐ UPDATED SECTION 3 FORM (If you haven't filled it out in the last (3) three years)
- ☐ COPY OF CURRENT LEAD "RRP" CERTIFICATION

Mail back to: Neighborhood Services Division

100 NW 1st Avenue
Delray Beach, FL 33444

It is the contractors' responsibilities to confirm that all needed documents have arrived at our office before the deadline. If you have any questions, please call the office at (561) 243-7280.



CITY OF DELRAY BEACH

NEIGHBORHOOD SERVICES DIVISION

100 N. W. 1st Avenue
Delray Beach, Florida 33444
Phone: 561-243-7280

Work Write-up

Case#: 22-093
Job Total: \$ 93,800

Property Information

423 SW 5th Ave

Delray Beach
Florida

Owner Information

Howard K Jones

Delray Beach
Florida 33444

Bid Closing Date: _____

Bid Opening Date: _____

Contractor Information

Name: Dolly Giraldo

Address: 1604 Pennsylvania Ave Unit 2

Voice: (305)988-8042

Fax: _____

Email: contact@centerlineservices.us

☎ 561-271-1055



Note



QUOTE APPROVAL STATEMENT

The below owner signature hereby declares that the work write - up has been reviewed by the applicant. Furthermore, the owner understands the scope of work to be performed on the owner's property. The applicant understands that there will be no changes to the work write up specifications except to meet housing and or building code requirements. The owner is authorizing the City of Delray Beach to obtain quotes for the work contained in the write up.

Signed: Howard Keith Jones Date: 04/15/2025 2025

Signed: _____ Date: _____ 2025

The below quote's signature hereby declares he/she has received a copy of the Neighborhood Services Division's Instructions to Bidders which includes General Conditions, Parts I and II as well as Special Conditions. By signing this proposal, the bidder is asserting he/she has made a full examination of the existing condition of the location of where the scope of work on this project is to be performed. The bidder hereby also declares that in order to complete the full scope of work he/she agrees to furnish, unless otherwise provided, all implements, machinery, equipment, transportation, tools, materials, supplies, labor and all other necessary items which are to be included in the quote amount submitted above within the following time frame:

The successful bidder will start permit process within three (3) days of the date on the Notice to Proceed. The notice establishes that the work be completed within sixty (60) days from issuance of permit. The bidder understands that the right is reserved by the property owner and the City of Delray Beach, Neighborhood Services Division to reject any and all quotes."

Signed: _____ Date: _____ 2025

Signed: _____ Date: _____ 2025

Single Family - | Single Family - | Whole Unit - Roof | Roof -

S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
1	0070030019	1.00	All	1.00	-	\$500

Task: Install Hurricane Clips

Remove sheathing, planking to expose truss/wall connection, prepare area and install Simpson hurricane clips "HGA10" or equal with a minimum 520 lb up lift on side of truss. replace sheathing, re-nail to 2023 Florida Building Code 8th edition and install secondary water barrier and cover with new felt, tin tag, and roofing material to match existing as close as possible when needed.

Note: Inspector must be called when clips are installed before opening is closed. Or the contractor will be responsible for the cost exposing clips and re-closing opening as determined by the inspector.

2	0070010008	650.00	SF	1.00	-	\$ 10000
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Task: Install 4-ply Built Up Roof

All roofing work must be performed by a roofing contractor who holds a current CC/RC licence with the State of Florida.

Remove entire flat deck roof covering. Replace damaged sheathing, repair/replace damaged rafters and related roof components. Replace defective or damaged soffit venting/screening to match existing as needed. **Contractors shall include in their bid replacing up to 48 lf of rafter/trusses top chords, and up to "5" full sheets of sheathing or 160 sq ft** of exposed planking if needed **Damage in excess of "5" Sheets** of sheathing or 160 sq ft of planking and up to 48 lf of rafter/truss top chords shall be addressed in a change order. Replacement sheathing shall be minimum 19/32" plywood but may be thicker to match existing sheathing. In instances where the sheathing is an exposed ceiling, replacement sheathing shall match existing and may be planks.

Contractors shall submit the installed unit cost for change order material above the covered damage as follows:

Sheet of plywood sheathing (each) above the covered 5 sheets	\$	
Square foot of planking above the covered 160 sq ft	\$	
Liner foot of rafter/trusses top chords above the covered 48 lf	\$	

All roof sheathing/decking nailing shall be brought up to meet the 2023 Florida Building Code 8th edition. Existing fasteners may be used to partially satisfy this requirement and additional nailing shall consist of the required ring shank nails. Plywood sheathing joints shall be covered with a secondary water barrier.

Install a 4 ply built up roof system consisting of 75# fiberglass base sheet, 3 ply's of hot mopped fiberglass finishing with a hot mopped mineral surfaced modified fiberglass cap sheet. New 3"x 3" metal drip edge (see note below) and flashing shall be installed throughout the entire roof system. The entire new roof system shall conform to the 2023 Florida Building Code 8th edition

Note 1: Contractor shall replace existing 1"x 2" build-out for the drip edge at the top of fascia. If no 1"x 2" exists at the top of the fascia, the contractor shall install all new 1"x 2" primed and painted to match existing fascia color.

Note 2: The metal drip edge shall be a minimum 3"x 3". Fastening of the drip edge shall be with nails placed into the sheathing, roof rafter, truss, or sub-fascia. No fasteners shall penetrate into the fascia or 1 x 2 wood drip edge nailer.

Note 3: Plywood sheathing joints shall be covered with a 4"-6" self-adhering bitumen secondary water barrier applied directly to the plywood sheathing. If planks Two layers of 30# felt will be used. Contractor shall submit photos of the secondary water barrier when requesting payment for this item.

Single Family - | Single Family - | Sidewalls - | Walls -

S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
3	0010100001	10.00	NO	1.00	-	\$16000

Task: Install Impact Windows

Remove **ALL** existing windows. Replace windows with new missile resistant single hung windows with aluminum framed screen. Bathrooms shall have obscure glass. One egress window shall be installed in each sleeping room. Replace/repair damaged window sills with marble sill(s) or match existing finish. Provide Modifications to openings and move electric outlets or switches as necessary to accommodate the new windows.

Note 1: Contractor shall submit 2023 Florida Building Code 8th edition approvals, stamped by the City of Delray Beach Building Department, with this Project's close-out package.

Note 2: Patch holes and touch up the paint patches and discolored finish resulting from the removal of existing window(s) to match existing as close as possible. The inspector shall be responsible for determining if the touch-up paint matches as close as possible.

4	0010090006	2.00	EA	1.00	-	\$ 4300
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Task: Install Prehung Exterior Impact Door

Remove the existing front and rear door(s) and jamb(s), prepare sufficient door buck(s). For front door install a prehung fiberglass 1/2 top impact glazed glass window, rear door install a pre-hung metal clad six (6) panel door(s). The doors must be Hurricane Impact Test Rated and meet or exceed 2023 Florida Building Code 8th edition standards. Patch to match interior and exterior walls, install new interior wood casing and exterior wood brick mold. Prepare new door assembly for painting by washing with TSP and a light sanding then apply one (1) coat of acrylic primer/sealer and two (2) coats of acrylic semi-gloss paint to match existing finishes.

Door installation shall include keyed entry lockset with lever handle both sides: "Schlage", Flair F51 and matching deadbolt or approved equal, deadbolt keyed one side to the lockset, vinyl bubble weatherstripping, wind crash chain stop, and aluminum threshold with peep hole on the front door

Note 1: Door paint color choice shall be by owner in accordance with deed restrictions, homeowner's association, and building code of jurisdiction. Contractor shall comply with manufacturer recommended time intervals between coats of paint and shall deliver a smooth full paint coverage. Roller and brush marks, runs, orange peels, and other defective paint application **shall not be accepted**.

Note 2: Touch-up paint affected finishes resulting from the replacement of the door(s). to match existing as close as possible. Inspector shall be responsible for determining if the touch-up paint matches as close as possible.

Note 3: Contractor shall submit Impact Resistant Rated Florida Building Code product approvals, stamped by the Delray Beach Building Division, with this Project's close-out package. Door assembly shall meet current 2023 Florida Building Code 8th edition product approval without using interior slide bolts.

Note 4: A landing is required according to code. In the absence of a landing, Contractor shall construct a concrete landing in front of the door as required by code, (or where a landing exists, Contractor shall re-construct/modify the existing landing in order to meet code.)

5	0010090030	1.00	ea	1.00	-	\$400
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Task: Replace Existing Screen Door

Remove the existing Screen Door unit. Provide and install a new white, prefinished alum. screen door with all hardware (Larson or approved equal). Swing to be in swing and complement exterior door. Caulk where necessary.

6	0100020001	1125.00	SF	1.00	-	\$3900
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Task: Paint House Complete

Pressure clean with water, fill all cracks and holes, and prepare for paint by scraping off loose and peeling paint, and light sanding of all the exterior wood including, fascia, soffit, doors, garage door, trim, and columns. Contact the rehabilitation inspector and request an inspection (24 hour notice to inspect will be made available). Upon an approval given of pressure cleaning, proceed and apply one (1) coat of acrylic primer/sealer and two (2) coats of acrylic exterior grade paint. Masonry grade paint or wood grade paint, as appropriate, shall be applied. Primer and paint shall be of the same manufacturer, Sherwin Williams or equal. Include all trim and shutters with complete house painting.

Note #1: Paint color choice shall be by owner in accordance with deed restrictions, homeowner's association, and building code of jurisdiction.

Note #2: Masonry surfaces painted with a spray applicator shall be back-rolled to ensure complete coverage.

Note #3: Contractor shall comply with manufacturer recommended time intervals between coats of paint.

Note #4: Contractor shall deliver a smooth full paint coverage over the average substrate finish. Roller and brush marks, runs, orange peels, and other defective paint application shall not be accepted.

Single Family - | Single Family - | Soil - Site | Floor - Site

S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
7	0080020022	1.00	Lump Sum	1.00	-	\$ 500

Task: Survey

Prior to start of work, contractor shall obtain a property survey from a licensed survey firm on behalf of owner. A minimum of three (3) copy's of survey is needed, two (2) for permit process, and one (1) to owner.

8	0020040012	370.00	SF	1.00	-	\$ 8900
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Task: Pour Concrete Driveway

Remove existing driveway, existing concrete walkway and dispose of properly. Provide all sub grade fill required for application of a concrete driveway. Provide all forming, pour, and finish 6" (min.) deep x 14' width x 25' length and shall have thickened edges on all sides and shall consist of 3000 p.s.i. concrete. Reinforce driveway concrete with 6x6 10/10 wire mesh and/or Fiber Crete to building code of Delray Beach.

New driveway is to be a minimum of 5' from North property line.

All surveys, and plans needed by building department is the contractors responsibility. Bid accordingly

- The thickened edge where the apron meets the street shall be 9" (inches) thick and extend back 2' (feet).
- The rest of the apron and driveway shall be 6" (inches) thick, this includes the sidewalk.
- If side walk is less than 6"(side walk is to be removed and poured as part of the driveway.
- Concrete shall be 3000 P.S.I. with reinforcing fibers embedded in the mix.

NOTE: Include the "Apron and sidewalk" area which shall be included in this scope of work.

NOTE: Cut Sheet can be attained at the Delray Beach Building Department

9	0080020022	1.00	NO	1.00	-	\$ 4000
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Task: Install Irrigation

Provide and install all necessary pipes and zone lines, sprinkler heads, back flow preventer, timer with rain sensor for a new irrigation system. All work to follow code, have proper inspections and meet irrigation design standards. System to be connected to city service. Include new electric digital zone sprinkler controller (use "Genie" or pre-approved equal determined by Rehabilitation Inspector) with a 24 hour, 14 day controller.

Do not use an index valve set up

NOTE: Contractor shall install new electrical circuit with wiring complete for the "Timer" controller in accordance with the building code of jurisdiction.

10	0080020005	945.00	SF	1.00	-	\$ 1500
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Task: Install Sod

Grade, level front and side yards. Provide and install sod and water until turned over to owner. (Front of house to street, sides to property line).

11	0080020008	1.00	NO	1.00	-	\$ 1000
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Task: Install Tree (Gumbo Limbo)

Provide and install One (1) Gumbo Limbo tree with a minimum height of 12 feet.

Location: Centrally between the new driveway and south property line and front of house and street.

Single Family - | Single Family - | Whole Unit - | Floor - Interior

S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
12	0010090001	2.00	NO	1.00	-	\$ 2000

Task: Install Interior Door

Remove existing doors, jamb, and casing. Replace door assembly with a pre hung 1 3/8" hollow core door, casing, and lever - both sides - privacy lockset. Fill all nail holes and apply one (1) coat of acrylic primer/sealer and paint with two (2) coats of semi-gloss acrylic enamel paint.

Locations: Bedroom and bathroom doors

Note 1: Door paint color choice shall be by owner. Contractor shall comply with manufacturer recommended time intervals between coats of paint and shall deliver a smooth full paint coverage. Roller and brush marks, runs, orange peels, and other defective paint application **shall not be accepted.**

Note 2: Touch-up paint affected finishes resulting from the replacement of the door(s). to match existing as close as possible. Inspector shall be responsible for determining if the touch-up paint matches as close as possible.

13	0010030001	16.00	LF	1.00	-	\$ 7000
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Task: Install Base and Wall Cabinets and Countertop

Provide and install new mid-line series "Kraft Maid", "Kitchen Kompact", "American Woodmark", or approved equal base and wall cabinetry. See attached Kitchen layout, this line item will include a pantry type cabinet. All work to be level, plumb, and true. Cabinets are to be attached to studs in the wall. Seal all holes and openings where pipes, wires and other materials may come through cabinets with removable material such as "Thumb Gum" to keep out any rodents. (Cabinet fronts are to be made of the flat panel/rail design vs. the raised panel type, and wood fronts vs. particleboard fronts.)

Install Formica or Wilsonart laminated counter-tops, securely attached to cabinets. All work to be level, plumb, and true. Seal all holes and openings where pipes, wires and other materials may come through cabinets with removable material such as "Thumb Gum" to keep out any rodents. Also attach cabinets to studs in walls. Caulk all seams where counter top meets walls

14	0090010002	10.00	SF	1.00	-	\$ 400
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Task: Repair Drywall

Remove damaged wall covering and dispose of properly and install insulation as needed. Patch wall and ceiling area using similar materials, and match to the average existing finish tape all joints and finish with 3 coat process. The contractor may patch with drywall, tape and finish in the 3-coat process. Apply acrylic primer/sealer and paint corner-to-corner with two coats to match as close as possible.

Location: As needed

15	0100010018	1125.00	SF	1.00	-	\$ 4800
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Task: Prepare Walls and Paint Interior Complete

Prepare for painting kitchen by cleaning walls and ceilings in kitchen with a "De-greaser Solvent" such as TSP to remove built-up grease on walls and ceiling. For the entire house: Preparation shall include filling all holes and patching to match the average finish of the existing wall surface and caulking at base boards and door casing. Apply one(1) coat of acrylic primer/sealer and paint with two (2) coats of acrylic semi-gloss enamel on kitchen walls/ceilings and bathroom walls/ceilings, doors and trim. On all other rooms walls and ceilings apply one(1) coat of acrylic primer/sealer and paint with two (2) coats of flat washable paint.

Note 1: Paint color choice shall be by owner. Contractor shall comply with manufacturer recommended time intervals between coats of paint and shall deliver a smooth full paint coverage. Roller and brush marks, runs, orange peels, and other defective paint application **shall not be accepted**.

Note 2: Inspection of paint preparation area is required prior to application of primer/sealer paint. 24 hours advance notice is required.

Single Family - | Single Family - | Bathroom - | All Walls - Bathroom

S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
16	0130040011	1.00	NO	1.00	-	\$ 1000

Task: Install Kitchen Sink

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Install new stainless steel double bowl sink with Moen single lever faucet with sprayer if equipped. Include assembly, trap, new shut off valves, new supply lines, basket, and caulk seal at counter top.

17	0130040007	1.00	NO	1.00	-	\$ 1200
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Task: Install Vanity w/Sink

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Remove vanity and existing lavatory. Replace with a new vanity of the same dimensions, constructed with solid wood frame on the doors and cabinet face; the box shall be comprised of minimum 1/2" plywood; finish covering must be wood veneer or plastic laminate. Counter top and 4" back splash shall be a minimum of 5/8" plywood with drop in sink or cultured marble with integral bowl cast in the counter top. Install new water supply valves, supply lines, and escutcheons, strainer assembly, p-trap and tail assembly, and single handle washerless faucet, Moen or equal quality.

Locations: Bathroom

Owner to have a choice in style and color.

18	0130040023	1.00	NO	1.00	-	\$ 800
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Task: Install Toilet

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Remove the existing toilet, supply water valve and tubing. Replace the toilet with an American Standard "Renaissance", or approved equal, elongated toilet with water saver tank, complete with new seat, bullock, water supply valve, escutcheon and tubing.

Note: Toilet shall be grouted where the base meets the floor.

19	0130040019	1.00	EA	1.00	-	\$ 6500
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Task: Install Shower

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Remove existing shower down to framing, including removal of south wall. Remove wall materials affected by framing of the new shower. Replace damaged studs, and install new studs / furring as required. Install wood backing to fasten handicap bars and prepare for cementitious tile backer for the new shower. Relocate hot and cold water supply line to west wall. Install new **Moen washer-less single handle diverter assembly** faucet valves with screwdriver stops. Install new water saving shower head. Reinforce existing floor/sub-floor as necessary and install Delta Foundation 32" X 32" corner shower pan with center drain or equal per 2023 Florida Building Code 8th edition. New shower pan shall be built up with concrete/mortar and positively pitched to new drain location and allowed to completely dry, and water test. Install new water saving shower head. Install cementitious tile backer and propitiatory fasteners as per manufacturers recommendations. Cementitious tile backer shall be equal to or better than "Wonderboard". Install new ceramic tile, new tile to be 12" x 24" white or bone in color. Install new bull nose trim around perimeter. Tile to finish will be to the ceiling.

Install Delta 32: W x 71" H corner shower enclosure in chrome with clear glass, or equal. Accessories shall include a ceramic shower nook placed in the same setting material used for the ceramic tile. Color choice shall be white or bone in color as chosen by the home owner.

Install (2) two stainless steel covered flange grab bars, one on west and north tile wall each side (1) one 18" and (1) one 36" Installed per manufactures specifications.

Location: Bathroom

Note 1: Place wood backing to fasten handicap bars prior to hanging cementitious tile backer.

Note 2: Inspections needed during process Rough, Topout, Framing, Plumbing Final

Attention: This work will require a framing inspection from the building code of jurisdiction.

20	0130060014	1.00	NO	1.00	-	\$ 1200
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Task: Relocate Hot Water Heater

Remove hot water heater off rear porch. New location on ground against south exterior wall. Properly clear and level area for concrete pad. Provide and install new water heater metal enclosure to house new water heater.

21	0130060001	1.00	NO	1.00	-	\$ 1600
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Task: Install Hot Water Heater

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Remove existing water heater, electrical pig tail, and water supply valves. Install a new energy efficient water heater of same size, and Drain Pan with dual 250 volt, 2500 watt heating elements, water supply valves, and pressure relief valve with 3/4" copper piped to the exterior or the new drain pan. Sweat solder copper fittings to connect the new water heater. The electrical connection shall be hard wired and meet current 2023 Florida Building Code 8th edition.

22	0130060014	1.00	EA	1.00	-	\$ 1000
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Task: Inspect Plumbing Waste and Drain Lines

All Plumbing work must be performed by a plumbing contractor who holds a current CF and RF license with the State of Florida.

Check all waste lines, building drain lines and sewer lines for stoppages and clean out as necessary. Inspect all shower pans, sinks, lavatories and water closets for leaks and fix as necessary.

Single Family - Single Family - Whole Unit - Electrical All Walls - Electrical						
S.No	WorkItem Code	Units	Unit Type	Cost Factor	Priority	Item Cost
23	0110040012	3.00	ea	1.00	-	\$ 300

Task: Carbon Monoxide / Smoke Detector w/ Arc Fault

Install UL approved Combination Carbon Monoxide/Smoke Detectors, wired 115 volt with battery backup. Place in accordance with the electrical and building code of jurisdiction. Contractor shall run a new Arc Fault protected circuit to energize all smoke detectors.

Note: Jurisdiction may require two smoke detectors in hallway and in each bedroom.

24	0110010006	1.00	Each	1.00	-	\$ 10000
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Task: Upgrade Electric to (150) Amp Service

Install a new minimum 150 Amp electrical service complete with breaker panel box with all circuits labeled and balanced. Replace mast and weather head if insufficiently sized. Panel shall be sufficiently sized to accommodate four (4) additional circuits.

Install **GFCI** protection in the kitchen and bathroom(s) and exterior of home. Disable non protected electrical outlets in existing light fixture(s) Disable and place covers on receptacles in light fixtures in the kitchen and bathroom that are not GFCI protected.

Note: Repair/restore surfaces affected to match existing finishes.

25	0110040003	2.00	NO	1.00	-	\$ 600
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Task: Install Exterior Light Fixtures

Install new exterior light fixture over front and rear doors. Homeowner is to be given a choice of style by contractors supplied options.

Note: Fixture cost shall not exceed \$50.00

26	0110020007	1.00	NO	1.00	-	\$ 1000
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Task: Repair Electrical Service

Inspect entire electrical system from service in. Replace all existing duplex receptacles with tamper resistant duplex receptacles, and all switches and cover plates. Install **GFCI** protection in the kitchen and bathroom(s) and exterior of home and install one (1) in each bathroom according to code.

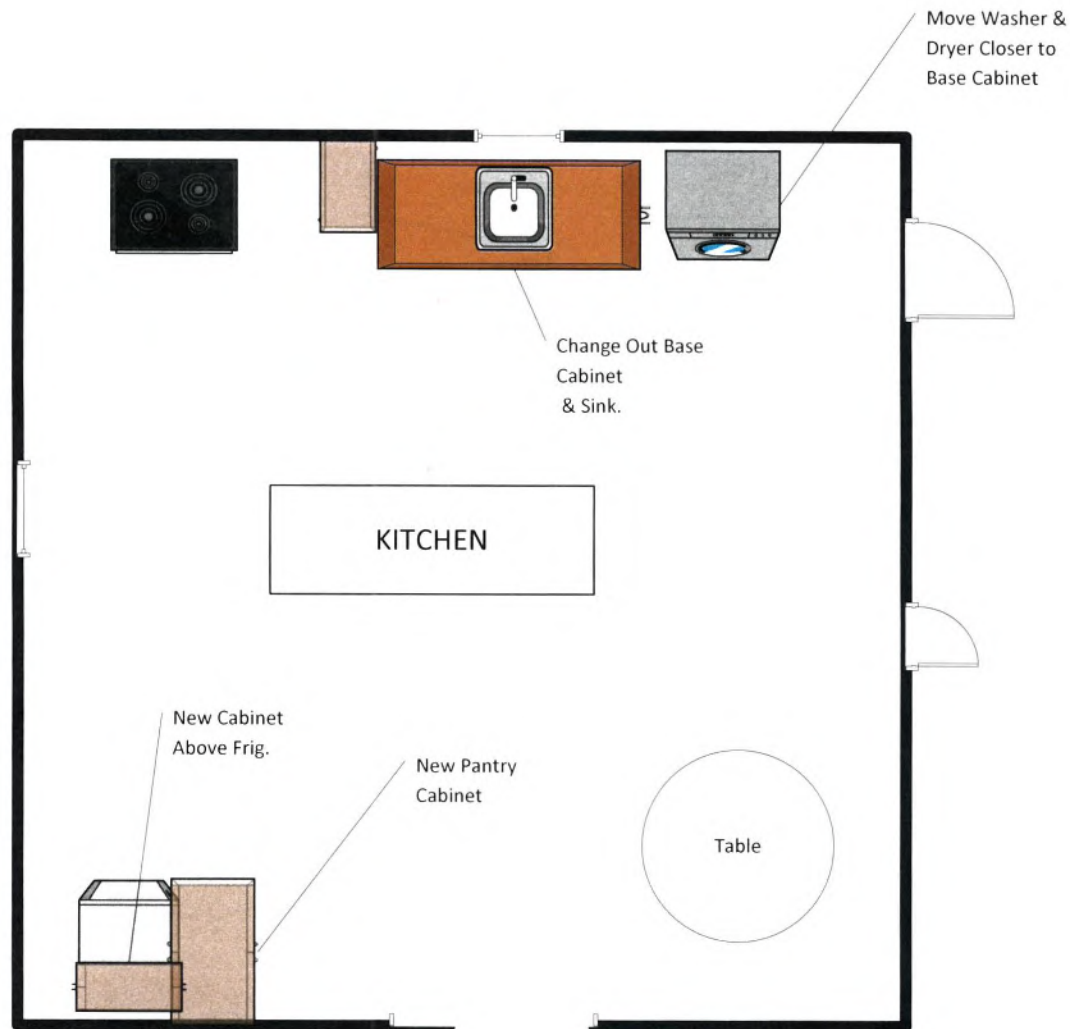
27	0120050010	1.00	EA	1.00	-	\$ 3400
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Task: Install Ductless Mini Split A/C

Install new Ductless Mini Split A/C energy efficient, SEER2 rating up to (specify size). Install Per the manufactures Instructions

Install a new dedicated electrical circuit complete with hook up at panel and receptacle for the new A/C unit location. Size as specified per A/C system Manufactures instructions. Install to meet NEC, and any local, or State codes

Job Total Cost: \$ 93800



22-093 Howard Jones
423 SW 5th Ave
Delray Beach, FL

Drawing Not to Scale

CITY OF DELRAY BEACH

173881

LOCAL BUSINESS TAX RECEIPT & CONTRACTOR REGISTRATION

RESTRICTION:

OWNER/QUALIFIER: GIRALDO, LUZ EDITH
BUSINESS NAME: CENTERLINE SERVICES GROUP INC
LOCATION: OUTSIDE OF DELRAY BEACH
CLASSIFICATION: CONTRACTOR-GENERAL-CERT.

RECEIPT NO 25 00075163

CONTROL NO 158551

DATE ISSUED: 9/06/24

BUSINESS TAX FEE: .00

DELINQUENT FEE: .00

TRANSFER FEE: .00

TOTAL AMOUNT PAID: .00

CENTERLINE SERVICES GROUP INC
1604 PENNSYLVANIA AVE, APT. 2
MIAMI BEACH FL 33139

BUSINESS TAX RECEIPT ISSUED FOR THE PERIOD
OCTOBER 1 2024 TO SEPTEMBER 30 2025

**BUSINESS TAX RECEIPT MUST BE
CONSPICUOUSLY DISPLAYED TO
PUBLIC VIEW AT BUSINESS LOCATION**

Notice: This business tax receipt becomes NULL and VOID if ownership, business name, or address is changed.

CITY OF DELRAY BEACH

BUSINESS TAX RECEIPT INFORMATION

DATE ISSUED: 9/06/24

BUSINESS TAX RECEIPT ISSUED FOR THE PERIOD
OCTOBER 1 2024 TO SEPTEMBER 30 2025

- Business Tax Receipt must be posted in a visible location so that it can be viewed by anyone upon entering your place of business.
- Business Tax Receipts are renewed annually on September 30 of each year. As a courtesy, we will mail renewal reminders in July. However, if you do not receive a renewal notice, it is your responsibility to ensure that your Business Tax Receipt is renewed prior to September 30 of each year. Failure to receive a renewal reminder notice will not exempt you from paying any penalties for late payment. If you have more than one business location, you must obtain a business tax receipt for each location.

If there is a change in the business name, ownership, or location, you must submit a

- Zoning Certificate of Use. Upon approval of the application, a transfer fee of \$19.03 will be due to the Business Tax Office. On the Business Tax Receipt the previous owner must sign and date indicating that all rights, interest and title of the business is assigned to the new owner.

A separate business tax receipt is issued for each use performed within your business. If

- you have any questions regarding the classification of your business, please visit us at 100 NW 1st Avenue, Delray Beach, FL 33444, check our website at DelrayBeachFL.gov, or call us at (561) 243-7040 ext. 4



Notice: The issuance of this business tax receipt is a result of a payment of the business tax and shall not be interpreted as: permitting the business to supersede the zoning code of the City, an endorsement by the City of a business, nor certification by the City of the competence of a business.

CITY OF DELRAY BEACH

173880

LOCAL BUSINESS TAX RECEIPT & CONTRACTOR REGISTRATION

RESTRICTION:

OWNER/QUALIFIER: GERALDO, LUZ EDITH
BUSINESS NAME: CENTERLINE SERVICES GROUP INC
LOCATION: OUTSIDE OF DELRAY BEACH
CLASSIFICATION: CONTRACTOR-ROOFING-CERT.

RECEIPT NO 25 00075164

CONTROL NO 158551

DATE ISSUED: 9/06/24

BUSINESS TAX FEE: .00

DELINQUENT FEE: .00

TRANSFER FEE: .00

TOTAL AMOUNT PAID: .00

CENTERLINE SERVICES GROUP INC
1604 PENNSYLVANIA AVE, APT. 2
MIAMI BEACH FL 33139

BUSINESS TAX RECEIPT ISSUED FOR THE PERIOD
OCTOBER 1 2024 TO SEPTEMBER 30 2025

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CITY OF DELRAY BEACH

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SECTION VIII
SOLICITATION SUMMARY

PURCHASING AND CONTRACT ADMINISTRATION DIVISION

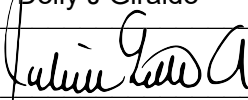
**The City of Delray Beach
100 NW 1st Avenue
Delray Beach, FL 33444**

SOLICITATION SUMMARY

IMPORTANT NOTICE

The information you provide on this page will be read aloud at the PUBLIC OPENING for this solicitation. It is VERY IMPORTANT that the summary information you provide below is exactly the same information contained in your . If subsequent to the opening of , the City determines that the information contained in the electronic version of your is different from the information on this Solicitation Summary form, the City reserves the right to deem your NON-RESPONSIVE and remove your from further evaluation and consideration for contract award.

PROPOSAL INFORMATION

Quote Number:	QQ 2025-010
Title:	Housing Rehabilitation Program – NCS Division - Quote #22-093
Due Date and Time:	June 4, 2025 @ 2:00 P.M., (LOCAL TIME)
Name of Proposer:	Centerline Services Group, Inc
Address:	1604 Pennsylvania Ave Unit 2 Miami Beach Fl 33139
Contact Person:	Dolly J Giraldo
Authorized Signature:	
Date:	06/11/2025

By signing and submitting this Solicitation Summary form, the Proposer affirms that the information provided above is an exact and correct summary of the information contained in the electronic version of the Proposer's Proposal to the City of Delray Beach.

**THIS SOLICITATION SUMMARY MUST BE SIGNED AND UPLOADED WITH
YOUR SECURE ELECTRONIC PROPOSAL SUBMITTAL THROUGH
www.bidnetdirect.com//cityofdelraybeach**