



June 30, 2020

Dear Vendor:

The BGC Advantage, LLC solicits bids for various projects scheduled during the year. Presently we are seeking bids for relocation services in Daytona Beach, Florida

The project will include the packing, moving, and relocation of residents that are currently residing in the following projects:

600 South Beach St, Daytona Beach, Florida, 32114 and 524 South Beach St, Daytona Beach, Florida 32114. This communities are called Maley Apartments and Windsor Apartments.

*** When submitting the bid please submit a flat rate per bed size***

	Bedroom Size	# of Units	Square footage (approximate)	Elevators
Maley Apartments				
Elderly/Disabled Stack Units	0	150	392	Yes
Windsor Apartments				
Elderly/Towers	0	61	345	Yes
	1	76	504	Yes
	2	13	729	Yes
		300 units		

Maley Apartments includes 150 efficiency units whose residents will have to be relocated from one floor to another floor. Maley Apartments includes 61 efficiencies, 76 one-bedrooms, and 13 two-bedrooms.



The renovation of these developments is expected to start in November 2020 and will last for 18-24 months. Each unit is anticipated to take 4-6 weeks rehab/renovate. The relocation of the resident will be dependent on the rehab schedule and will require that the vendor has capability to move as many as six units at one time.

The proposal should include the following:

- Development of a moving schedule in conjunction with the construction rehab schedule of the apartments.
- Perform a physical pre-move survey of each apartment prior to the move to determine the amount of packing material required and any special services. Provide a **sample copy** of the pre-move survey which will be sent to the management contact and tenant that is signed by the tenant.
- Contact tenant prior to the packing and move date so that the tenant is aware of the dates, the packing process, and to discuss any special concerns or unique requirements. **The physical pre-move survey can be performed at the same time.**
- Provide a detailed inventory of contents for each room and take photographs of each apartment. The inventory should identify items that are already broken or damaged prior to packing and moving and any potential high value items that are discovered. Will notify tenants that hazardous materials will not be packed and will notify management when this occurs.
- Have the capability to move several units per day and list the capability on the proposal schedule.
- The breakdown of pricing should be as follows and include packing material and packing labor; moving labor; all vehicles necessary for moving; any special 3rd party services for crates, appliances owned by resident; and full value and replacement coverage.
- The pricing should include all project management and staffing expenses for this project, including a specific point of contact (**liaison**) for the tenants and the management agent.



In addition, for your proposal to be considered, you must be able to provide the following with your proposal.

- **General Liability Insurance** – We require that you carry minimum \$2,000,000 of General Liability insurance coverage.
- **Workers' Compensation Insurance** – We require that you carry \$100,000 of Workers' Compensation insurance coverage or a Certificate of Election to be Exempt.

ACORD **CERTIFICATE OF LIABILITY INSURANCE** DATE ISSUED YYYY

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 NAME: PHONE: E-MAIL: ADDRESS:	TAX ID NO. (FED.): TAX ID NO. (STATE): INSURER(S) AFFORDING COVERAGE: NAME #: INSURER A: INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
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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.

TYPE	TYPE OF INSURANCE	ADDITIONAL	POLICY NUMBER	POLICY PERIOD	POLICY LIMIT	REVISION	LIMITS
GENERAL LIABILITY	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE \$
	CLAIMS ADOPTED						ACCIDENT PREVENTION \$
	CLAIMS ADOPTED						AGGREGATE (Per occurrence) \$
	CLAIMS ADOPTED						PERSONAL & ADV. INJURY \$
GENERAL AGGREGATE	GENERAL AGGREGATE						\$
	PRODUCTS, COMPLETED OPERATIONS						\$
AUTOMOBILE LIABILITY	ANY AUTO						COMBINED SINGLE LIMIT \$
	ALL OWNED AUTOS						COLLISION \$
	SCHEDULED AUTOS						BODILY INJURY (Per person) \$
	NON-SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
UMBRELLA LIABILITY	UMBRELLA LIABILITY						PROPERTY DAMAGE \$
	UMBRELLA LIABILITY						AGGREGATE \$
WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WORKERS COMPENSATION AND EMPLOYERS LIABILITY						E.L. EACH ACCIDENT \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY						E.L. DISEASE - EMPLOYEES \$
							E.L. DISEASE - POLICY LIMIT \$

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

- Three Previous Customer References (form provided and must be returned with proposal)



BGCADVANTAGE
INSPIRED DEVELOPMENT

Please send all of your proposal responses to Todae' Charles @ tcharles@bgcadvantage.com by Monday, July 6, 2020 at 3:00 p.m. (CST). If you have any questions, please feel free to contact Todae' Charles via email or by telephone at 318-245-4666

Sincerely,

Todae' Charles –
Asset Manager
Operations
BGC Advantage



REFERENCES

CONTACT NAME:	
COMPANY NAME:	
ADDRESS:	
CITY, STATE, ZIP CODE	
PHONE #	
EMAIL ADDRESS	

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