



CITY OF NAPLES

Purchasing Division

Bid Opening Sheet
20-047 Naples Water Quality Sampling Analysis Project - RFP
 Opening Date: 7/20/2020 at 2:00 P.M. Local Time

Vendor	Signed Original		All Addendum		Copies / CD		Check List		References		Bid Tab		Acknowledgment of Business Type		W-9		Bond If Needed			
	Yes	No	Yes	No	Original	5 Copy	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
1 Cardno, Inc.	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>			N/A	<input type="checkbox"/>			N/A	<input checked="" type="checkbox"/>
2 Environmental Engineering Consultants, Inc.	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>			N/A	<input type="checkbox"/>			N/A	<input checked="" type="checkbox"/>
3 Flatwoods Consulting Group	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>			N/A	<input type="checkbox"/>			N/A	<input checked="" type="checkbox"/>
4 GHD Services Inc.	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>			N/A	<input type="checkbox"/>			N/A	<input checked="" type="checkbox"/>
5 Greenman-Pedersen, Inc.	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>			N/A	<input type="checkbox"/>			N/A	<input checked="" type="checkbox"/>
6 Johnson Engineering	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
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Buyer: *Helf atony*

Witness: *Smallberry*

Date: *07/20/20*

Date: *7/20/2020*



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	Yes	No	Yes	No	Original	5 Copy	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
7 South Florida Engineering and Consulting, LLC	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
8 Wood Environment & Infrastructure Solutions, Inc.	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Original	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input checked="" type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
9	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>
10	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>
11	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>
12	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Original	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>	No	<input type="checkbox"/>	5 Copy	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	Electronic	<input type="checkbox"/>					N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>	N/A	<input type="checkbox"/>

Buyer: *Jeff R. Long*

Witness: *Donald Seaman*

Date: *07/20/20*

Date: *7/20/2020*