



Town of Davie Contract Summary & Routing Form

Requesting Department Information	Vendor Information
Department: Public Works	Vendor: Dan Enterprises Team, LLC
Primary Contact Name: Osdel F. Larrea	Contact Name: Fabio Vargas // Heidi Perez
Primary Contact E-Mail: Olarrea@davie-fl.gov	Vendor Address: 19081 NW 78th Ave Hialeah, Florida 33015-1900
Secondary Contact Name: Jasmine Carter	Vendor Phone: 954-536-5429 // 305-343-5755
Secondary Contact E-Mail: Jcarter@davie-fl.gov	Vendor E-Mail: sales1@danenterprisesteam.com // ha@danenterprisesteam.com
Department Phone: 954.797.1240	Vendor #: 10927

Required Information
1.) Type of Agreement: Piggyback If Other, please specify:
2.) What method of procurement is this agreement related to? Method of Procurement: Piggyback Town Contract #: PB-JA-25-59
3.) Is this a Town initiated agreement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Vendor must sign and return Town's Addendum to Contract (found on PowerDMS)
4.) Does this agreement replace an existing contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, which Contract?
5.) Briefly Explain the purpose or description of the scope of service of this contract and provide background information: The Town is in need of indefinite delivery-indefinite quantity construction.

6.) Is Insurance Required? Yes No

Submit General Liability, Workers Compensation, and Auto Liability (if Vendor coming on Town property) with Town listed as additional insured and Contract # written in description of operations box. If insurance requirements are waived, please submit written approval from Jose Lugo.

7.) Term of agreement: 2 Years Months Days Other:
Are there extensions? Yes No If Yes, How Many? 3

8.) Can this agreement be terminated for convenience? Yes No

9.) Total estimated annual value of contract: \$65000.01 Paid to: Town Vendor

10.) Is this a Budget Item? Yes No

If Yes, Enter G/L Account: various operating accounts

11.) Do Late fees apply? Yes No If Yes, How Much?

12.) Does this solicitation work in conjunction with or will impact any other department/division?
For example: Is this request IT, GIS, or Fleet related? Yes No
If Yes, please have other department/division review documentation and sign below.

Additional Information

Certain forms/steps are required in order for this contract summary & routing form to be processed. These items are listed below.

- Certificate of Insurance (see Question #6)**
- Vendor Invited and Connected on PaymentWorks**
- Addendum to Contract (see Question #3 if applicable)**
- Agreement/Contract containing terms and conditions**

Please complete these steps and submit these forms for processing.

Form Prepared By Signature:	Jasmine Carter	Digitally signed by Jasmine Carter Date: 2025.09.25 11:33:27 -04'00'	Date: 9/25/25
Department Director Signature:	Osdel Fernandez-Larrea	Digitally signed by Osdel Fernandez-Larrea Date: 2025.09.25 12:09:51 -04'00'	Date: 9/25/25
Procurement Signature:	Jenna Albers	Digitally signed by Jenna Albers Date: 2026.02.18 17:14:01 -05'00'	Date: 2/18/26
Town Attorney Signature:	Philip Sherwin	Digitally signed by Philip Sherwin Date: 2026.02.23 16:27:44 -05'00'	Date: 2/23/26
Procurement Manager Signature:	Brian O'Connor	Digitally signed by Brian O'Connor Date: 2026.02.25 16:19:15 -05'00'	Date: 2/25/26
Town Administrator Signature:	Phillip Holste	Digitally signed by Phillip Holste Date: 2026.03.02 13:18:47 -05'00'	Date: 3/2/26