



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.go	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-25-60
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- Electrical.

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: \$65,000.01 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 11:34:22 -04'00'	Date: 9/25/25
Department Director Signature:	Osdel Fernandez-Larrea	Digitally signed by Osdel Fernandez-Larrea Date: 2025.09.25 12:10:20 -04'00'	Date: 9/25/25
Procurement Signature:	Jenna Albers	Digitally signed by Jenna Albers Date: 2026.02.18 17:14:41 -05'00'	Date: 2/18/26
Town Attorney Signature:	Philip Sherwin	Digitally signed by Philip Sherwin Date: 2026.02.23 16:28:57 -05'00'	Date: 2/23/26
Procurement Manager Signature:	Brian O'Connor	Digitally signed by Brian O'Connor Date: 2026.02.25 16:37:40 -05'00'	Date: 2/25/26
Town Administrator Signature:	Phillip Holste	Digitally signed by Phillip Holste Date: 2026.03.02 13:18:15 -05'00'	Date: 3/2/26