



## AMPS, Inc

### New Vendor Registration

**Report Date:** March 2, 2026, 5:35 p.m.

**New Vendor Request Submitted:** Nov. 27, 2023, 9:32 a.m.

**Legal Name:** Aquifer Maintenance & Performance Systems, Inc.

**Corporate Address:**

7146 N Haverhill Rd West Palm Beach, FL 33407-1029 United States of America  
Address Validated

**Corporate Email:** ampsjlp@gmail.com

**Main Telephone Number:** +15614942844

**URL:**

**D&B D-U-N-S Number:**

**Unique Entity Identifier:**

**Tax Country:** US

**Tax Classification:** C Corporation

**Tax ID:**

**Employer Identification Number (EIN):** 650071672

**TIN/Name IRS Validation:** VALID

**W8/W9:** <https://www.paymentworks.com/api/files/ampsinc/private/w8-w9-ampsinc.pdf>

**Sanction List Report:** No Alerts Found

**Description of Goods and Services:**

well services

**Initiator Name (first and last):**

Rose Schmidt

**Initiator Email:**

rschmidt@davie-fl.gov

**Initiator Department:**

Utilities

**Initiator Phone Number:**

954 327 3742

**Reason for inviting this supplier:**

Service

**Supplier Category:**

US Entity

**Is your company being paid for any of the following?:**

None of these statements are true

**Do you accept Purchase Orders?:**

Yes

**Please review the Town's purchase order terms and conditions.:**

True

**Please provide your email address for purchase order delivery:**

ampsjlp@gmail.com

**Please provide your Commercial General Liability Insurance:**

[https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17\\_davie\\_coi\\_20250417073349.pdf](https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17_davie_coi_20250417073349.pdf)

**Commercial General Liability Insurance Expiration Date:**

2025-10-28

**Please provide your Workers Compensation and Employers Liability Insurance:**

[https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17\\_davie\\_coi\\_20250417073\\_yiYOr1b.pdf](https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17_davie_coi_20250417073_yiYOr1b.pdf)

**Workers Compensation and Employers Liability Insurance Expiration Date:**

2025-05-01

**Are you coming inside the boundaries of the Town of Davie to provide services or to provide product delivery (excluding personal transportation)?:**

Yes

**Please provide your Commercial Automotive Insurance:**

[https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17\\_davie\\_coi\\_20250417073\\_ZWmNmxE.pdf](https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/4-17_davie_coi_20250417073_ZWmNmxE.pdf)

**Commercial Automotive Insurance Expiration Date:**

2025-08-02

**Accounts Receivable Contact Name:**

Jayne L Prindible

**Accounts Receivable Contact Phone Number:**

+15614942844

**Accounts Receivable Contact Email:**

ampsjlp@gmail.com

**Sales Contact Name:**

Jayne L Prindible

**Sales Contact Phone Number:**

+15614942844

**Sales Contact Email:**

ampsjlp@gmail.com

**Are you a Federally certified diverse business?:**

No

**Are you a State of Florida certified disadvantaged business?:**

No

**Please read and acknowledge The Town of Davie Conflict of interest Disclosure:**

True

**Are you or are you aware of anyone at your company who is a current Town employee?:**

No

**Are you or are you aware of anyone at your company who is a former Town employee?:**

No

**Are you or are you aware of anyone at your company who is related to a Town employee?:**

No

**Town of Davie Debarment Certification:**

True

**Florida Statute 287.135:**

True

**Town of Davie E-Verify Form:**

True

**Town of Davie Vendor Requirements Guide:**

True

**Please Upload Your State of FL Sunbiz OR Registration with your own Department of State (screenshot of website is acceptable).:**

[https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/sunbiz\\_20231127102954.pdf](https://www.paymentworks.com/api/files/a1b04105-10e2-457a-b0d3-79f958f6141f/private/save-draft-files/sunbiz_20231127102954.pdf)

**Bank Location:**

US Bank Account

**Payment Method for Payees with a US Bank Account:**

ACH

**Remittance Address:**

7146 N Haverhill Rd West Palm Beach, FL 33407-1029 United States of America  
Address Validated

**Bank Account:**

**Name on Account:** Aquifer Maintenance & Performance Systems Inc

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