



**SIGN-IN
SHEET
NOVEMBER 17,
2011**



**MIAMI VA HEALTHCARE
SYSTEM, MIAMI, FL
MIAMI UTILITY PLANT
CORRECTIONS**

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

DIANE L. CAMPBELL
Diane.campbell@va.gov

PROJECT MANAGER

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of Specialties
First: <u>SCOTT</u> Last: <u>WERSZNEK</u> Position: <u>PROJECT MANAGER</u>	Name: <u>GREENLAND ENTERPRISES</u> Street: <u>47 W QUEENS WAY</u> City: <u>HAMPTON</u> State: <u>VA</u> Zip: <u>23669</u>	Phone: <u>757 864 0640 x201</u> " <u>771 0307</u> Fax: <u>757 864 0876</u> Email: <u>SWERSZNEK@GREENLANDENTERPRISES.COM</u>	Prime Sub	1) <u>MECHANICAL</u> 2) <u>CONTROLS</u> 3) <u>ENERGY</u>
First: <u>STEVE</u> Last: <u>SECKLER</u> Position: <u>PROJECT MANAGER</u>	Name: <u>GREENLAND ENTERPRISES</u> Street: <u>47 W. QUEENS WAY</u> City: <u>HAMPTON</u> State: <u>VA</u> Zip: <u>23669</u>	Phone: <u>919.815.6878</u> Fax: <u>757.864.0876</u> Email: <u>SSECKLER@GREENLANDENTERPRISES.COM</u>	Prime Sub	1) <u>MECHANICAL</u> 2) <u>CONTROLS</u> 3) <u>ENERGY</u>
First: <u>John Drake</u> Last: <u>Drake</u> Position: <u>UP</u>	Name: <u>Lanier Contracting Service</u> Street: <u>3355 Annadale Lane Suite 1</u> City: <u>SWANEE</u> State: <u>GA</u> Zip: <u>30029</u>	Phone: <u>678-714-0720</u> Fax: <u>678-714-0760</u> Email: <u>JohnDrake@LanierContractingService.com</u>	Prime Sub	1) _____ 2) _____ 3) _____
First: <u>Pat</u> Last: <u>Centimole</u> Position: _____	Name: <u>Hill York</u> Street: <u>2225 S. ANDREWS AVE</u> City: <u>Ft. Lauderdale</u> State: <u>FL</u> Zip: <u>33316</u>	Phone: <u>954 525 2971</u> Fax: <u>954 525 2973</u> Email: <u>patc@hillYork.com</u>	Prime Sub	1) <u>Mechanical</u> 2) <u>Energy</u> 3) <u>Controls</u>

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

PROJECT MANAGER

DIANE L. CAMPBELL
Diane.campbell@va.gov

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of Specialties
First: JAMES Last: WANSLEY Position: PRINCIPAL	Name: TLC ENGINEERING & ARCHITECTURE Street: 874 DIXON BLVD City: COCOA State: FL Zip: 32922	Phone: 321.636.0274 Fax: 321.639.8986 Email: james.wansley@tlc-eng.com	Prime Sub	1) Mechanical 2) 3)
First: STUART Last: SHAFFER Position: ENGR	Name: HAYS CLEVELAND Street: WOODBRIGHT RD City: BOYNTON BEACH State: FL Zip:	Phone: 561-734-9400 Fax: 734-8060 Email: sshafter@unimetrofla.com	Prime Sub	1) SYSTEM D 2) 3)
First: Casey Neumann Last: Industria - PASCHEN Position: PM	Name: CH PASCHEN - Industria Street: 290 NW 165ST City: Miami State: FL Zip:	Phone: 854 543 0300 Fax: Email: DROY@CHPASCHEN.com	Prime Sub	1) 2) 3)
First: RALPH Last: LADD Position: PM	Name: RALPH LADD - T.L. Services Street: 4735 KIBLER RD. City: VAN BUREN State: AR Zip: 72956	Phone: 813 453-3621 Fax: Email: RALPH.LADD@TLservices.com	Prime Sub	1) Mech + 2) 3) Systems
First: MARTIN KARCH Last: KARCH Position:	Name: AL KARCH ENERGY SERVICES Street: 3041 SW 25th ST City: WEST PALM STATE: FL Zip: 33023	Phone: 561 961-5062 Fax: 561 964-8877 Email: martin.karch@energy.com	Prime Sub	1) VENTILATION 2) 3)
First: JOE Last: RAFFEL Position: SUPERINTENDENT	Name: VALOR CONSTRUCTION Street: 137 E MAIN ST City: PANAMA CITY State: FL Zip: 33476	Phone: 904 924 2559 Fax: Email: JRAFFEL@VALORMAN.com	Prime Sub	1) 2) 3)

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

PROJECT MANAGER

DIANE L. CAMPBELL
Diane.campbell@va.gov

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of Specialties
First: <u>RIK</u> Last: <u>SORRELLS</u> Position: <u>VP</u>	Name: <u>TRI-CITY ELECTRIC CO. INC</u> Street: <u>625 NW 16th Ave</u> City: <u>MIAMI</u> State: <u>FL</u> Zip: <u>33125</u>	Phone: <u>305 642 7322</u> Fax: <u>305 642 6789</u> Email: <u>RSORRELLS@TCEINC.COM</u>	<u>Prime</u>	1) <u>ELECT.</u> 2) _____ 3) _____
First: <u>MARIC</u> Last: <u>VONEL</u> Position: <u>PRESIDENT</u>	Name: <u>VETERANS Development Corp</u> Street: <u>100 GRANDVIEW ROAD Suite 410</u> City: <u>BRAintree</u> State: <u>MA</u> Zip: _____	Phone: <u>781-659-4050</u> Fax: <u>781-659-0505</u> Email: <u>MVONEL@VETDEV.CORP.</u>	<u>Prime</u> <u>Sub</u>	1) <u>GENERAL</u> 2) <u>MECHANICAL</u> 3) _____
First: <u>Jim</u> Last: <u>MIENSKIEWICZ</u> Position: <u>CH. ESTIMATOR</u>	Name: <u>VETERANS DEVELOPMENT</u> Street: <u>100 GRANDVIEW RD</u> City: <u>BRAintree</u> State: <u>MA</u> Zip: _____	Phone: <u>781-659-4050</u> Fax: _____ Email: <u>Jamesm@VETDEV.CORP.COM</u>	<u>Prime</u> <u>Sub</u>	1) <u>PRIM.</u> 2) _____ 3) _____
First: <u>HOWARD</u> Last: <u>JONES</u> Position: _____	Name: <u>FLAME LOGIC</u> Street: _____ City: <u>LAKELAND</u> State: <u>TN</u> Zip: _____	Phone: <u>901-351-3119</u> Fax: _____ Email: <u>FLAMELOGIC@MAX.COM</u>	<u>Prime</u> <u>Sub</u>	1) _____ 2) _____ 3) _____
First: <u>DAVID</u> Last: <u>Pittinen</u> Position: <u>SUPV</u>	Name: <u>SHEET METAL EXPERTS</u> Street: _____ City: <u>MEOLING</u> State: <u>FL</u> Zip: <u>33178</u>	Phone: <u>305-805-2099</u> Fax: <u>305-805-2038</u> Email: _____	<u>Prime</u> <u>Sub</u>	1) <u>SHEET</u> 2) _____ 3) _____

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

PROJECT MANAGER

DIANE L. CAMPBELL
Diane.campbell@va.gov

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax – E-Mail	Circle Prime/Sub Contractor	List Area of Sp Mech
First: <u>RICHARD</u> Last: <u>HAMMONDS</u> Position: <u>ESTIMATOR</u>	Name: <u>DAB CONTRACTING</u> Street: <u>4800 N. DOAN STE F-5</u> City: <u>AUBURN</u> State: <u>AL</u> Zip: <u>36830</u>	Phone: <u>(334) 230-9770</u> Fax: <u>(334) 230-9769</u> Email: <u>estimating@dab-hc.com</u>	<u>Prime</u> Sub	1) <u>GC</u> 2) _____ 3) _____
First: <u>Charles</u> Last: <u>Harbin</u> Position: <u>Mech. Engr.</u>	Name: <u>O'Brien & Gere</u> Street: <u>2170 Ashley Phosphate Rd.</u> City: <u>Charleston</u> State: <u>SC</u> Zip: <u>29405</u>	Phone: <u>843-553-6670</u> Fax: _____ Email: <u>Charles.harbin@obg.com</u>	<u>Prime</u> <u>Sub</u>	1) <u>MEP</u> 2) _____ 3) _____
First: <u>Mark</u> Last: <u>Lazo</u> Position: <u>Tech Director</u>	Name: <u>O'Brien & Gere</u> Street: <u>2170 Ashley Phosphate Rd. Suite 504</u> City: <u>Charleston</u> State: <u>SC</u> Zip: <u>29406</u>	Phone: <u>843-553-6670</u> Fax: <u>843-553-0755</u> Email: <u>mark.lazo@obg.com</u>	<u>Prime</u> <u>Sub</u>	1) <u>MEP/FP</u> 2) _____ 3) _____
First: <u>PANDY</u> Last: <u>MAZZESON</u> Position: <u>V.P.</u>	Name: <u>DuBois Const. Svcs.</u> Street: <u>13111 Newport Center Dr.</u> City: <u>Deerfield Bch</u> State: <u>FL</u> Zip: <u>33442</u>	Phone: _____ Fax: _____ Email: <u>ddubois@duboisconstruction.com</u>	<u>Prime</u> Sub	1) <u>GC</u> 2) _____ 3) _____
First: <u>A.J.</u> Last: <u>FLORES</u> Position: <u>V.P.</u>	Name: <u>Boilers Burners & Controls</u> Street: <u>2155 Mc Mullen Bath Rd.</u> City: <u>Clearwater</u> State: <u>FL</u> Zip: <u>33759</u>	Phone: <u>770-932-0254</u> Fax: <u>404-592-4644</u> Email: <u>AJ.BBCLL@bellsouth.net</u>	<u>Prime</u> Sub	1) _____ 2) _____ 3) <u>Suppl</u>
First: <u>Scott</u> Last: <u>Robinson</u> Position: <u>Estimator</u>	Name: <u>Vick Construction</u> Street: <u>137 E Main St</u> City: <u>Pahokee</u> State: <u>FL</u> Zip: <u>33476</u>	Phone: <u>561-935-2555</u> Fax: <u>561-935-2569</u> Email: <u>Srobinson@vickconstruction.com</u>	<u>Prime</u> Sub	1) _____ 2) _____ 3) _____

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

DIANE L. CAMPBELL
Diane.campbell@va.gov

PROJECT MANAGER

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax – E-Mail	Circle Prime/Sub Contractor	List Area of Sp Mech
First: VINCE Last: REA Position: ENGINEER	Name: TCC Street: 255 S. ORANGE AVE City: ORLANDO State: FL Zip: 34772	Phone: 407-702-8458 Fax: Email: VINCE.REA@TCC-ENG.COM	Prime Sub	1) ELECTRIC 2) MECHANICAL 3) PLUMBING
First: LAYNE Last: CRABTREE Position: PM	Name: CHAMBER MOUNTAIN CONSTRUCTION Street: 273 JILLY DRIVE City: CLYDE State: NC Zip: 28721	Phone: 828-627-2605 Fax: SAME # Email: Layne@chambermountain.com	Prime Sub	1) GC/PM 2) 3)
First: GEORGE Last: LEO Position: VICE PRES. ENGINEER	Name: MOSES & ASSOC Street: 2209 NW 40 TERR City: GAINESVILLE State: FL Zip: 32611	Phone: 352-372-1911 Fax: 352-372-0186 Email: glcbo@moses-eng.com	Prime Sub	1) MEAF 2) 3)
First: AL Last: SILVA Position: PM	Name: CHAMBER MOUNTAIN CONST. Street: 273 JILLY DRIVE City: CLYDE State: NC Zip: 28721	Phone: Fax: Email:	Prime Sub	1) GC/PM 2) 3)
First: THOMAS Last: GRAY Position: SUPT.	Name: DOUGLAS ORR PLUMBING Street: 301 FLAGLER DR. City: MIAMI SPRINGS State: FL Zip: 33166	Phone: 305-885-9188 Fax: 305-888-0618 Email: JOM@ORR-PLUMBING.COM	Prime Sub	1) 2) 3)
First: NICK Last: LEJEUNE Position: PRESIDENT	Name: BUILDERS BURNERS AND CONTROLS Street: 2155 MC MULLEN BOOTH RD City: CLEARWATER State: FL Zip: 33759	Phone: 727-669-7036 Fax: 727-669-7039 Email: BRILL@BELLSOUTH.NET	Prime Sub	1) CONTROLS 2) 3)

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

PROJECT MANAGER

DIANE L. CAMPBELL
Diane.campbell@va.gov

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of S Mech
First: <u>Tom</u> Last: <u>Waddell</u> Position: <u>APM</u>	Name: <u>Miller Electric Company</u> Street: <u>1881 W. State Rd 84, St 104</u> City: <u>Ft Lauderdale</u> State: <u>FL</u> Zip: <u>33315</u>	Phone: <u>954-761-2110</u> Fax: <u>954-761-2109</u> Email: <u>Twaddell@MECO</u>	Prime Sub	1) _____ 2) _____ 3) <u>Electric</u>
First: <u>Bob</u> Last: <u>Farnan</u> Position: <u>Superintendent</u>	Name: <u>Miller Electric Company</u> Street: <u>1881 W. State Rd 84, St 104</u> City: <u>Ft Lauderdale</u> State: <u>FL</u> Zip: <u>33315</u>	Phone: <u>305-970-8261</u> Fax: <u>954-761-2109</u> Email: _____	Prime Sub	1) _____ 2) _____ 3) <u>Electric</u>
First: <u>Lisa</u> Last: <u>Brenner</u> Position: _____	Name: <u>Megawattage DBA Zuto</u> Street: <u>1745 West 37th Street Ste 7</u> City: <u>Hialeah</u> State: <u>FL</u> Zip: <u>33012</u>	Phone: <u>954-744-9313</u> Fax: <u>954-404-6357</u> Email: <u>Anthony@megag.us</u>	Prime Sub	1) <u>GC</u> 2) _____ 3) _____
First: <u>JEFF</u> Last: <u>Ward</u> Position: _____	Name: <u>Southern Mechanical Systems Inc</u> Street: <u>1347 S. H. Road</u> City: <u>Sunrise</u> State: <u>FL</u> Zip: <u>33326</u>	Phone: <u>954-475-2220</u> Fax: <u>954-475-2131</u> Email: <u>smson@bell.com</u>	Prime Sub	1) _____ 2) _____ 3) <u>Mechanical</u>
First: <u>GEORGE</u> Last: <u>CAEKURI</u> Position: <u>ESTIMATOR</u>	Name: <u>HERNANDEZ/GULF</u> Street: <u>633 S. FED. HWY, 500</u> City: <u>FORT LAUDERDALE</u> State: <u>FL</u> Zip: <u>33301</u>	Phone: <u>954-492-9191</u> Fax: <u>954-492-9192</u> Email: <u>George@zulfbulldog.com</u>	Prime Sub	1) _____ 2) _____ 3) _____
First: <u>Allen</u> Last: <u>Brenner</u> Position: _____	Name: <u>Megawattage DBA Zuto</u> Street: <u>1745 West 37th Street Ste 7</u> City: <u>Hialeah</u> State: <u>FL</u> Zip: <u>33012</u>	Phone: <u>954-744-9313</u> Fax: <u>954-404-6357</u> Email: <u>Anthony@megag.us</u>	Prime Sub	1) <u>GC</u> 2) _____ 3) _____

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

DIANE L. CAMPBELL
Diane.campbell@va.gov

PROJECT MANAGER

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of Specialties
First: <u>GUSTAVO</u> Last: <u>GARCIA BURU</u> Position: <u>PROJECT DESIGNER</u>	Name: <u>ALPHA BOILERS</u> Street: <u>3090 W FLAGLER ST</u> City: <u>MIAMI</u> State: <u>FL</u> Zip: <u>33134</u>	Phone: <u>305 442-2233</u> Fax: <u>305-445-9125</u> Email: <u>E</u>	Prime Sub	1) <u>BOILER</u> 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____

Department of Veterans Affairs Office of Construction and Facilities Management
Pre- Proposal Conference – Miami VA Healthcare System

CONTRACTING OFFICER

DIANE L. CAMPBELL
Diane.campbell@va.gov

PROJECT MANAGER

TROY WALLER
Troy.Waller@va.gov

Your Name and Position	Firm Name and Address	Phone – Fax - E-Mail	Circle Prime/Sub Contractor	List Area of S Mech
First: <u>OMAR</u> Last: <u>PAREJA</u> Position: <u>PM/Estimator</u>	Name: <u>Artis-Builders</u> Street: <u>876 N Broadway - Suite B</u> City: <u>Escondido</u> State: <u>CA</u> Zip: <u>92025</u>	Phone: <u>305 562 5587</u> Fax: <u>760-888-1944</u> Email: <u>opareja@artis-builders.com</u>	<u>Prime</u> Sub	1) <u>GC</u> 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____
First: _____ Last: _____ Position: _____	Name: _____ Street: _____ City: _____ State: _____ Zip: _____	Phone: _____ Fax: _____ Email: _____	Prime Sub	1) _____ 2) _____ 3) _____