



## TABLE OF CONTENTS

NAME: Power Washing And More

BID BOND: N/A

PRICE BID SHEET: Online Submission Tab -filled out

ADDENDUMS – Both acknowledges and attached with notes on each.

IFB 2025-037 document – attached

Attachment A Ref. Form – attached

Attachment B Bidder Affidavit – attached

Attachment C Employers e-Verification - attached

Attachment D Lobbyist Registration Form - attached

Attachment E Agreement – attached

Statement of No Response – N/A returned document with note that we are bidding

Addendum No. 1 – signed and attached with notations that we've read the document

Addendum No. 2 – signed and attached with notations that we've read the document

Notary items – all signed/stamped and attached as an individual forms

### **Additional items about Power Washing And More – attached**

- Safety
- Chlorine and green chemical details
- Fleet of truck details
- Recommendations

- Liability & Insurance
- SunBiz LLC & FEI number
- Power Washing And More – brochure
- Business Tax Receipt
- LC Addendum – Corporation Doc
- Coral Gables Parking - Pricing
- Power Washing And More Table of Contents – provided as requested.



## About Us

Power Washing & More delivers comprehensive commercial and residential exterior cleaning and repair services across Florida. We expertly handle power washing, pressure washing, and soft washing for buildings, sidewalks, parking garages, and more. Beyond cleaning, we provide essential repairs ensuring your commercial or residential property looks its best and functions flawlessly.



## Contact Us



Call Scott at  
**844-FLA-WASH**  
**844-352-9274**



[Scott@PowerWashingAndMore.com](mailto:Scott@PowerWashingAndMore.com)



*Your problems...Our Solutions*

COMMERCIAL/RETAIL  
INDUSTRIAL  
GOVERNMENT  
HOA/CONDO  
MULTI-FAMILY  
HEALTHCARE FACILITIES  
AND RESIDENTIAL

**844-FLA-WASH**  
[PowerWashingAndMore.com](http://PowerWashingAndMore.com)

**FREE ESTIMATES**  
Servicing all of Florida  
Available 24/7/365

## WE CLEAN:

- HOA/Multi-Family Communities
- Specializing in Larger Properties
- Commercial Buildings
- Campuses & Schools
- Government Buildings
- Cities & Town Contracts
- Airports
- Stadiums
- Shopping Plazas
- Parking Lots & Garages
- Healthcare Facilities
- Financial Institutions
- Residential
- Hotels & Resorts and more!

[www.PowerWashingAndMore.com](http://www.PowerWashingAndMore.com)

**FREE ESTIMATES**  
Available 24/7 - White Glove Service  
Servicing all of Florida  
**844-352-9274**

## WHAT WE CLEAN: POWER WASHING, SOFT WASHING, HARD STAIN REMOVAL

- Roofs: Tile and Flat
- Building Exteriors
- Walkways/Concrete/Pavers/Streets
- Driveways
- Catwalks/Breezeways
- Dumpster/Trash Areas
- Awnings
- Pool Decks
- Basketball, Tennis, Pickleball Courts
- Playgrounds
- Pavers Cleaned, Repaired & Sealed
- Gutters/Curbs and more!

## STATE OF THE ART TRUCKS:

- 1,200 Gallon Water Tank
- 200 Gallon Cleaning Solution Tank
- 40 Gallon Auxiliary Tank
- 100 Gallon 'Secret Sauce' Solution Tank
- 200 Degree Hot Water Heaters (2)
- 16' Flatbed Truck with DOT/MOT lights
- Soft Wash, Pressure Wash and Power Washing
- Trained & Experienced Technicians
- Uniformed Technicians
- Available 24/7 - 365 Days A Year!



## Residential Cleaning

Power Washing and More has expanded our services to include residential cleaning:

- Window Cleaning (Exterior/Interior)
- Roof Power Washing
- Paver Sealing
- Gutter Cleaning
- Light Fixture Cleaning
- House Wash & Cobweb Removal
- Skylight Cleaning and much more!

**844-FLA-WASH**



## WHO WE SERVICE

We proudly serve (but are not limited to):

- **Home/Condo Owners Associations**
- **Apartment/Condo Management Companies**
- **Retail/Commercial/Industrial Property Management Organizations**
- **Federal Agencies**
- **Local, County, and State Governments**
- **Shopping Centers/Malls**
- **Medical and Hospital Facilities/Assisted Living Centers**
- **Entertainment Centers/Sports Venues**
- **Banks/Financial Institutions**
- **Hotels and Motels**
- **Churches/Synagogues**
- **Residential Homes & Communities**

One of our experienced project managers will meet with you to identify your specific needs and educate you on your cleaning options.

Also, included in that discussion will be the planning and scheduling of the project so that everything runs smoothly and on time. If your project requires night/week end work those requests will be met. Power Washing And More is available 24/7/365 to work with your schedule.

Our exceptional service and workmanship begin with our first meeting and continues throughout the project until completed with 100% customer satisfaction.

Our goal is to develop a long-standing, and supportive relationship for years to come.

**NOTE: All employees are background checked before employment and drug/alcohol tested on an ongoing basis.**



# VEHICLES AND EQUIPMENT

Power Washing And More's trucks are the best equipped in the industry. Our state-of-the-art equipment is manufactured to our exact standards. Few power washing companies have the quality, amount, and size of our surface cleaners. All of our trucks are manufactured for our specific end-users.

Our 48-, 60-, and 72-inch surface cleaners are made so that specific walkways/surfaces are cleaned in one pass (instead of several passes). This process does not leave distasteful "stripes" on the surface. Our 36-, 30-, 24- and 20-inch surface cleaners are manufactured for the same specific purpose. Our unique gutter swale cleaners can clean (with superior results) miles of swales/curbing per day.

Our hoses can reach more than 1,000 feet from our trucks so that no area is inaccessible to clean.

Hot water (200+ degrees) is our "secret" to achieving quality results. Hot water will remove dirt and grime and will kill mold/mildew/algae at its root. Cold water alone washes away the surface material leaving their root dirt in the spores. The spores will immediately start to regrow after the cold-water cleaning. Hot water will remove all spores and offer a long-lasting result for all services.

## **Power Washing And More's typical process includes...**

- Applying a cleaning solvent as a pre-wash to loosen the surface dirt/grime/spores
- Hot Water power wash and soft wash
- Rinse surfaces with clean water
- Apply an algaecide to prevent the mold/mildew/algae from immediately growing back

## **Each truck is equipped with the following:**

- 2-custom 24 HP hot water pumps, each producing 200+ degree hot water, 9 gallons per minute @3,500 PSI
- 1-24 HP cold water power washer unit producing 8 gallons per minute at 3,500 PSI
- 72, 60, 48-, 30-, 24-, and 20-inch-wide surface cleaners which disperse the high pressure so that there is no damage to the surface that is being cleaned
- 3-operator work stations with up to 1,000 feet of high-pressure hose
- 1-1,035-gallon water tank filled out to fill from water hydrants in 10-15 minutes
- 1-400-gallon tank of cleaning solution
- 1-30-gallon tank of de-greasing solution
- DOT flashing lights and high intensity flood lights
- Our trucks are pristine and serviced regularly to optimize all functions 24/7/365



# REFERENCES

## **Lincoln Property Company**

Projects: *Cleaning of roofs, sidewalks and breezeways for their multi-family communities throughout South Florida.*

Tammy McFarlane, Business Manager

Email: [miramarparkmgr@lincolnapts.com](mailto:miramarparkmgr@lincolnapts.com)

Phone: 954-239-2755

## **Cardinal Newman High School**

Projects: *Pressure clean the school campus including buildings, sidewalks, and sports stadium.*

Bob Savage, Director of Facilities/Systems Administrator

Email: [bob.savage@cardinalnewman.com](mailto:bob.savage@cardinalnewman.com)

Phone: 561-644-1642

## **City of Pembroke Pines**

Projects: *Power washing over 6.6 million sq. ft. of Sidewalks, Curbs, Exteriors of Buildings, Medians, and Roofs.*

Anthony Buckland

Email: [abuckland@ppines.com](mailto:abuckland@ppines.com)

Phone: 954- 651-2725

## **City of Tamarac**

Projects: *Power washing over 500,000 sq. ft. of power washing Sidewalks, Curbs, Medians*

Mike Cain

Email: [Mike.Cain@tamarac.org](mailto:Mike.Cain@tamarac.org) Phone:

954-278-1788

## **Broward County School Board**

Projects: *Cleaning of school running tracks*

Thomas Iannarone

Email: [thomas.iannarone@browardschools.com](mailto:thomas.iannarone@browardschools.com)

Phone 954-309-5842

**Light House Point**

Projects: *Services Provided power washing over 200,000 sq. ft. of power washing Sidewalks, Curbs, Medians, Exteriors*

James Finley

Email: [jfinley@lighthousepoint.com](mailto:jfinley@lighthousepoint.com)

Phone: 954-868-4153

**Lee County**

Projects: *Provided power washing exteriors of Libraries, Sidewalks, Curbs*

Richard Wolters

Email: [RWolters@leegov.com](mailto:RWolters@leegov.com)

Phone: 239-839- 4707

**City of Miami Beach**

Santiago Sellan

[santiagosellan@miamibeachfl.gov](mailto:santiagosellan@miamibeachfl.gov)

**City of North Lauderdale**

Cyrus Quinn

[cquinn@nlauderdale.org](mailto:cquinn@nlauderdale.org)

**City of Pembroke Pines**

Anthony Buckland

[abuckland@ppines.com](mailto:abuckland@ppines.com)

**City of Tamarac**

Mike Morrison 954-597-3745

**Lee County**

Dick Wolters

[rwlter@leegov.com](mailto:rwlter@leegov.com)

**Village of Royal Palm Beach**

Kurt Riggott

[kriggott@royalpalmbeach.com](mailto:kriggott@royalpalmbeach.com)

**UNIVERSITIES**

Florida Atlantic University

Hillsboro Community College

University of Florida



# WHAT IS POWER WASHING AND MORE?

Power Washing And More is Florida's premier "white glove" exterior cleaning and maintenance company, serving commercial, residential, and government properties 24/7/365. With years of unparalleled expertise, we are dedicated to delivering professional work and the highest quality workmanship on every job.

We consistently prove ourselves as a power washing leader by:

- Being the preferred vendor for numerous local and national management companies. Securing multi-year contracts with over ten Broward County city governments. Operating
- state-of-the-art trucks equipped with self-contained water supplies and hot water capabilities
- (200+ degrees) to effectively clean virtually any surface. Providing comprehensive repair and support for surfaces we manage, including cracked pavers and roofing tiles.
- Offering extensive residential services, including meticulous cleaning and repair of windows, screens, tracks, lighting fixtures, and pavers (with sealant options). Maintaining long-term
- relationships built on trust with property managers, maintenance and facility managers, and owners.
- Being fully licensed and insured, and strictly adhering to OSHA guidelines and safety regulations.
- Utilizing high-performance, customized equipment designed for optimal results and speed on walkways, driveways, roofs, curbs, and more. Committing to environmentally friendly
- products and practices.
- Our unwavering priority is to provide only the best service and highest quality workmanship with each and every job, ensuring your property always looks its absolute best.

# CITY OF CORAL GABLES, FL

2800 SW 72<sup>nd</sup> Avenue, Miami, FL 33155  
Finance Department / Procurement Division  
Tel: 305-460-5102/ Fax: 305-261-1601

## BIDDER ACKNOWLEDGEMENT

<b>IFB No. 2025-037</b>  <b>IFB Title: Pressure Washing Services</b>	<p><b>Electronic Bid response must be received prior to 2:00 p.m., on November 12, 2025, via INFOR and may not be withdrawn for 90 calendar days. Submittals received after the specified date and time will not be accepted.</b></p> <p>Contact: Neivy Garcia Title: Procurement Specialist Telephone: 305-460-5121 Facsimile: 305-261-1601 Email: <a href="mailto:ngarcia2@coaralgables.com">ngarcia2@coaralgables.com</a>/ <a href="mailto:contracts@coralgables.com">contracts@coralgables.com</a></p>
Bidder Name: Power Washing And More	FEIN or SS Number: 86-1254799
Complete Mailing Address: 49 N. Federal Hwy, 410, Pompano Beach, FL 33062	Telephone No. 844-352-9274 Cellular No. 561-222-4743
Indicate type of organization below: Corporation: <input type="checkbox"/> Partnership: <input type="checkbox"/> Individual: <input checked="" type="checkbox"/> Other: <input type="checkbox"/>	Fax No.: 833-550-1651
Bid Bond / Security Bond - N/A	Email: Scott Peskin

**ATTENTION: THIS FORM ALONG WITH ALL REQUIRED IFB FORMS MUST BE COMPLETED, SIGNED (PREFERABLY IN BLUE INK), AND SUBMITTED WITH THE BID PRIOR TO THE SUBMITTAL DEADLINE. FAILURE TO DO SO MAY RENDER YOUR BID NON-RESPONSIVE.**

THE BIDDER CERTIFIES THAT THIS SUBMITTAL IS BASED UPON ALL CONDITIONS AS LISTED IN THE IFB DOCUMENTS AND THAT THE BIDDER HAS MADE NO CHANGES IN THE IFB DOCUMENT AS RECEIVED. THE BIDDER FURTHER AGREES, IF THE BID IS ACCEPTED, THE BIDDER WILL EXECUTE AN APPROPRIATE AGREEMENT FOR THE PURPOSE OF ESTABLISHING A FORMAL CONTRACTUAL RELATIONSHIP BETWEEN THE BIDDER AND THE CITY OF CORAL GABLES, FOR THE PERFORMANCE OF ALL REQUIREMENTS TO WHICH THIS IFB PERTAINS. FURTHER, BY SIGNING BELOW PREFERABLY IN **BLUE INK** ALL IFB PAGES ARE ACKNOWLEDGED AND ACCEPTED, AS WELL AS, ANY SPECIAL INSTRUCTION SHEET(S), IF APPLICABLE. THE UNDERSIGNED HEREBY DECLARES (OR CERTIFIES) ACKNOWLEDGEMENT OF THESE REQUIREMENTS AND THAT HE/SHE IS AUTHORIZED TO BIND THE PERFORMANCE OF THIS IFB FOR THE ABOVE BIDDER.

---

*Scott Peskin*  
Authorized Name and Signature

CEO  
Title

11/10/2025  
Date

X Coral Gables and Miami-Dade County Local Preference Acknowledgement. (Check the box if you are asserting you qualify. A valid Coral Gables and or Miami-Dade County business tax receipt must be submitted as proof of qualification.) Please refer to Ordinance 2009-53, § 2, 11-17-2009/Procurement Code Sec. 2-696.

## BIDDER'S AFFIDAVIT

### SOLICITATION: IFB 205-037 Pressure Washing Services

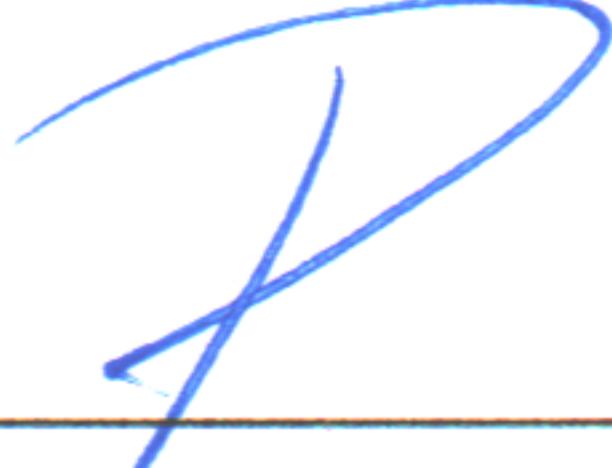
**SUBMITTED TO:** City of Coral Gables  
Procurement Division  
2800 SW 72 Avenue  
Miami, Florida 33155

The undersigned acknowledges and understands the information contained in response to this solicitation and the referenced Schedules A through H shall be relied upon by Owner awarding the contract and such information is warranted by the Bidder to be true and correct. The discovery of any omission or misstatements that materially affects the Bidder's ability to perform under the contract shall be cause for the City to reject the solicitation submittal, and if necessary, terminate the award and/or contract. I further certify that the undersigned name(s) and official signatures of those persons are authorized as (Owner, Partner, Officer, Representative or Agent of the bidder that has submitted the attached response). Schedules A through H are subject to Local, State and Federal laws (as applicable); both criminal and civil.

- SCHEDULE A – STATEMENT OF CERTIFICATION
- SCHEDULE B – NON-COLLUSION AND CONTINGENT FEE AFFIDAVIT
- SCHEDULE C – DRUG-FREE STATEMENT
- SCHEDULE D – BIDDER'S QUALIFICATION STATEMENT
- SCHEDULE E – CODE OF ETHICS, CONFLICT OF INTEREST, AND CONE OF SILENCE
- SCHEDULE F – AMERICANS WITH DISABILITIES ACT (ADA)
- SCHEDULE G – PUBLIC ENTITY CRIMES
- SCHEDULE H – ACKNOWLEDGEMENT OF ADDENDA

This affidavit is to be furnished to the City of Coral Gables with its solicitation response. It is to be filled in, executed by the bidder and notarized. If the response is made by a Corporation, then it should be executed by its Chief Officer. This document MUST be submitted with the solicitation response.

---

  
Scott Peskin  
Authorized Name and Signature

CEO  
Title

11/10/2025  
Date

STATE OF FLORIDA\_\_\_\_\_

COUNTY OF BROWARD\_\_\_\_\_

On this 10<sup>th</sup> day of November, 2025, before me the undersigned Notary Public of the State of Florida, personally appeared

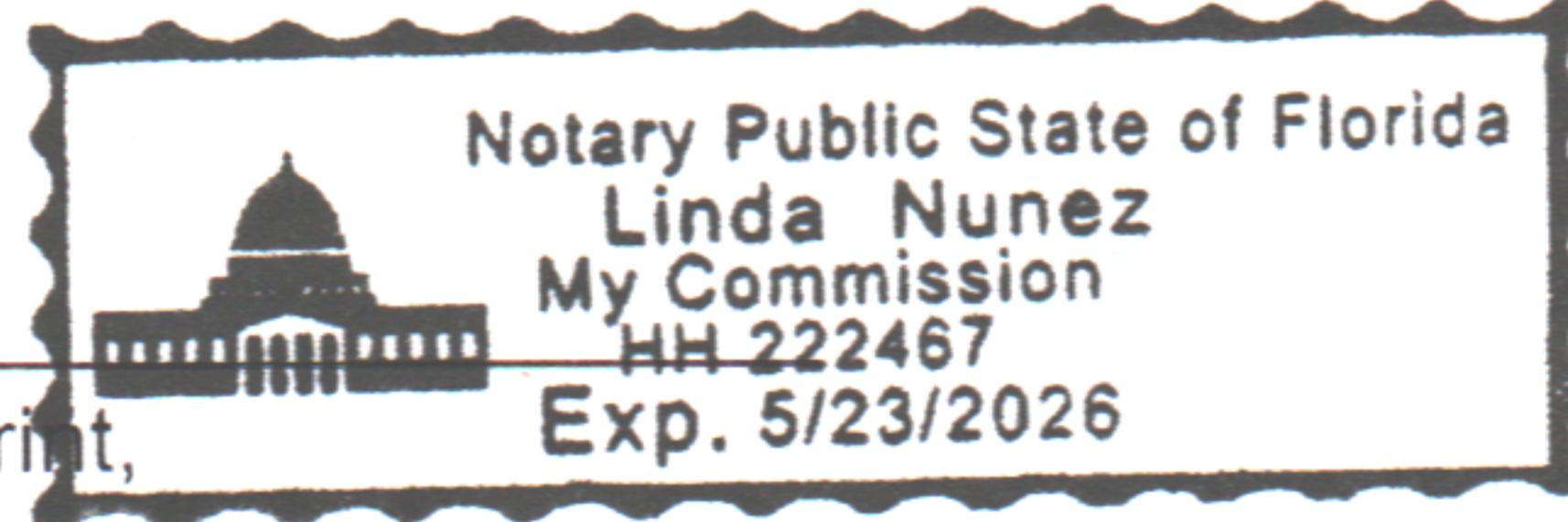
\_\_\_\_\_  
Scott Peskin

(Name(s) of individual(s) who appeared before

Notary And whose name(s) is/are subscribes to within the instrument(s), and  
acknowledges it's execution.



NOTARY PUBLIC, STATE OF FLORIDA\_\_\_\_\_



(Name of notary Public; Print,  
Stamp or Type as  
Commissioned.)

NOTARY PUBLIC  
SEAL OF OFFICE:

Personally know to me, or Produced  
Identification:

\_\_\_\_\_  
(Type of Identification Produced)

## **SCHEDULE "A" - CITY OF CORAL GABLES – STATEMENT OF CERTIFICATION**

Neither I, nor the company, hereby represented has:

- a. employed or retained for a commission, percentage brokerage, contingent fee, or other consideration, any company or person (other than a bona fide employee working solely for me or the company) to solicit or secure this contract.
- b. agreed, as an express or implied condition for obtaining this contract, to employ or retain the services of any company or person in connection with carrying out the contract, or
- c. paid, or agreed to pay, to any company, organization or person (other than a bona fide employee working solely for me or the company) any fee, contribution, donation or consideration of any kind for, or in connection with, procuring or carrying out the contract except as here expressly stated (if any):

## **SCHEDULE "B" - CITY OF CORAL GABLES - NON-COLLUSION AND CONTINGENT FEE AFFIDAVIT**

**Scott Peskin**

1. He is the Owner \_\_\_\_\_  
(*Owner, Partner, Officer, Representative or Agent*)

of the bidder that has submitted the attached bid response.

2. He is fully informed with respect to the preparation and contents of the attached bid response and of all pertinent circumstances respecting such response;
3. Said response is made without any connection or common interest in the profits with any other persons making any response to this solicitation. Said response is on our part in all respects fair and without collusion or fraud. No head of any department, any employee or any officer of the City of Coral Gables is directly or indirectly interested therein. If any relatives of bidder's officers or employees are employed by the City, indicate name and relationship below.

Name: N/A \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: N/A \_\_\_\_\_

Relationship: \_\_\_\_\_

4. No lobbyist or other bidder is to be paid on a contingent or percentage fee basis in connection with the award of this Contract.

## **SCHEDULE "C" CITY OF CORAL GABLES – VENDOR DRUG-FREE STATEMENT**

Preference may be given to bidders submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under solicitation a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under solicitation, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section. As the person authorized to sign the statement, I certify that this form complies fully with the above requirements.

The company submitting this solicitation has established a Drug Free work place program in accordance with State Statute 287.087

## **SCHEDULE "D" CITY OF CORAL GABLES – BIDDER'S QUALIFICATION STATEMENT**

The undersigned declares the truth and correctness of all statements and all answers to questions made hereinafter:

### **GENERAL COMPANY INFORMATION:**

Company Name: Power Washing And More\_\_\_\_\_

Address: 1172 S. Dixie Hwy., Coral Gables, FL 33146\_\_\_\_\_

Telephone No: (844) 352-9274\_\_\_\_\_ Fax No: (833) 550-1651\_\_\_\_\_ Email:  
s c o t t @ p o w e r w a s h i n g a n d m o r e . c o m \_\_\_\_\_

How many years has your company been in business under its present name? 4 years/10 months

If company is operating under Fictitious Name, submit evidence of compliance with Florida Fictitious Name Statute:

No \_\_\_\_\_

Under what former names has your company operated? : N/A\_\_\_\_\_

At what address was that company located? 49 N. Federal Hwy., 410, Pompano Beach, FL 33062\_\_\_\_

Is your Company Certified? Yes \_\_\_\_\_ No X \_\_\_\_\_ If Yes, **ATTACH COPY** of Certification.

Is your Company Licensed? Yes (County) \_\_\_\_\_ No \_\_\_\_\_ If Yes, **ATTACH COPY** of License

Has your company or its senior officers ever declared bankruptcy?

Yes \_\_\_\_\_ No X \_\_\_\_\_ If yes, explain: \_\_\_\_\_

### **LEGAL INFORMATION:**

Please identify each incident ***within the last five (5) years*** where a civil, criminal, administrative, other similar proceeding was filed or is pending, if such proceeding arises from or is a dispute concerning the bidder's rights, remedies or duties under a contract for the same or similar type services to be provided under this solicitation (***A response is required. If applicable please indicate "none" or list specific information related to this question. Please be mindful that responses provided for this question will be independently verified***):

N/A \_\_\_\_\_

Has your company ever been debarred or suspended from doing business with any government entity?

Yes \_\_\_\_\_ No X \_\_\_\_\_ If Yes, explain \_\_\_\_\_

**SCHEDULE "E" CITY OF CORAL GABLES – CODE OF ETHICS, CONFLICT OF INTEREST, AND CONE OF SILENCE**

THESE SECTIONS OF THE CITY CODE CAN BE FOUND ON THE CITY'S WEBSITE, UNDER GOVERNMENT, CITY DEPARTMENT, PROCUREMENT, PROCUREMENT CODE (CITY CODE CHAPTER 2 ARTICLE VIII); SEC 2-1023; SEC 2-606; AND SEC 2-1027, RESPECTIVELY.

IT IS HEREBY ACKNOWLEDGED THAT THE ABOVE NOTED SECTIONS OF THE CITY OF CORAL GABLES CITY CODE ARE TO BE ADHERED TO PURSUANT TO THIS SOLICITATION.

**SCHEDULE "F" CITY OF CORAL GABLES - AMERICANS WITH DISABILITIES ACT (ADA)**  
**DISABILITY NONDISCRIMINATION STATEMENT**

I understand that the above named firm, corporation or organization is in compliance with and agreed to continue to comply with, and assure that any sub-contractor, or third party contractor under this project complies with all applicable requirements of the laws listed below including, but not limited to, those provisions pertaining to employment, provision of programs and service, transportation, communications, access to facilities, renovations, and new construction.

The American with Disabilities Act of 1990 (ADA), Pub. L. 101-336, 104 Stat 327, 42 U.S.C. 12101,12213 and 47 U.S.C. Sections 225 and 661 including Title I, Employment; Title II, Public Services; Title III, Public Accommodations and Services Operated by Private Entities; Title IV, Telecommunications; and Title V, Miscellaneous Provisions.

The Florida Americans with Disabilities Accessibility Implementation Act of 1993, Sections 5553.501-553.513, Florida Statutes

The Rehabilitation Act of 1973, 229 U.S.C. Section 794

The Federal Transit Act, as amended, 49 U.S.C. Section 1612

The Fair Housing Act as amended, 42 U.S.C. Section 3601-3631

**SCHEDULE "G" CITY OF CORAL GABLES - STATEMENT PURSUANT TO SECTION 287.133 (3) (a),**  
**FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

1. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), **Florida Statutes**, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any proposal or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
2. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), **Florida Statutes**, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.

3. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), **Florida Statutes**, means:

1. A predecessor or successor of a person convicted of a public entity crime; or 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a *prima facie* case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

4. I understand that a "person" as defined in Paragraph 287.133(1)(e), **Florida Statutes**, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which Proposals or applies to Proposal on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

5. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **[Must indicate which statement below applies.]**

Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list.

**[Attach a copy of the final order]**

**I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, **FLORIDA STATUTES** FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.**

**SCHEDULE "H" CITY OF CORAL GABLES - ACKNOWLEDGEMENT OF ADDENDA**

1. The undersigned agrees, if this bid response is accepted, to enter in a Contract with the CITY to perform and furnish all work as specified or indicated in the solicitation, any associated addendum and Contract Documents within the contract time indicated in the solicitation and in accordance with the other terms and conditions of the solicitation and contract documents.
2. Acknowledgement is hereby made of the following Addenda, if any (identified by number) received since issuance of the applicable solicitation.

Addendum No. 1 \_\_\_\_\_ Date 10/29/2025 \_\_\_\_\_ Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

Addendum No. 2 \_\_\_\_\_ Date 11/7/2025 \_\_\_\_\_ Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date \_\_\_\_\_ Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

**Failure to adhere to changes communicated via any addendum may render your response non-responsive.**

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000011235

**Entity Name:** POWER WASHING AND MORE LLC**Current Principal Place of Business:**1246 HAMMONDVILLE RD  
POMPANO BEACH, FL 33069**Current Mailing Address:**49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US**FEI Number:** 86-1254799**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PESKIN, SCOTT F  
49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	PESKIN, SCOTT F
Address	160 SE 12 COURT
City-State-Zip:	POMPANO BEACH FL 33060

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SCOTT PESKIN

PRESIDENT

02/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date



The City of Coral Gables  
Procurement Division  
2800 S.W. 72ND AVENUE  
MIAMI, FLORIDA 33155

## CITY OF CORAL GABLES REFERENCE FORM

### IFB No. 2023-037 Pressure Washing Services

Complete the form as indicated below, to provide the required information as outlined in Section 3 of the solicitation. The City shall contact the companies listed below to verify the work performed on behalf of your company. All fields must be completed.

**Reference # 1 must cover the minimum three (3) year period from the issuance date of this solicitation.**

1. Project Name/Location I k e a P a r k i n g G a r a g e

Owner Name IKEA

Contact Person Pavlin Dimitrov

Contact Telephone No. 609-214-5237

Email Address: pdimitrov@ingka.ikea.com

Yearly Budget/Cost \$60,000-\$80,000.00

Dates of Contract From: 2 0 2 1 To: 2025

Project Description Remove oil stains, bubble gum, grease from floor of garage. Clean pipes, ramps, stairways, car stops, walls, pillars, ceiling, etc. Interior and Exterior of building.

---

**Additional References must cover similar engagements satisfactorily performed in the last three (3) years.**

2. Project Name/Location C i t y o f P e m b r o k e P i n e s

Owner Name Anthony Buckland

Contact Person Anthony Buckland

Contact Telephone No. 954-651-2725

Email Address: abuckland@ppines.com

Yearly Budget/Cost \$450,000

Dates of Contract From: 2 0 2 1 To: 2026

Project Description Power washing over 6.6 million square feet of sidewalks, curbs, parking, exterior of buildings, medians, and roofs.

---



The City of Coral Gables  
Procurement Division  
2800 S.W. 72ND AVENUE  
MIAMI, FLORIDA 33155

3. Project Name/Location City of Tamarac \_\_\_\_\_

Owner Name Mike Cain \_\_\_\_\_

Contact Person Mike Cain \_\_\_\_\_

Contact Telephone No. 954-278-1788 \_\_\_\_\_

Email Address: Mike.Cain@tamarac.org \_\_\_\_\_

Yearly Budget/Cost \$150,000 \_\_\_\_\_

Dates of Contract From: 2022 \_\_\_\_\_ To: 2025 \_\_\_\_\_

Project Description Power washing over 500,000 sq. ft. of power washing Sidewalks, Curbs, Medians  
\_\_\_\_\_  
\_\_\_\_\_

4. Project Name/Location Lee County Public Works \_\_\_\_\_

Owner Name Richard Wolters \_\_\_\_\_

Contact Person Richard Wolters \_\_\_\_\_

Contact Telephone No. 239-839-4707 \_\_\_\_\_

Email Address: RWolters@leegov.com \_\_\_\_\_

Yearly Budget/Cost \$250,000 \_\_\_\_\_

Dates of Contract From: 2022 \_\_\_\_\_ To: 2025 \_\_\_\_\_

Project Description Provided power washing exteriors of Libraries, Sidewalks, Curbs  
\_\_\_\_\_  
\_\_\_\_\_

5. Project Name/Location City of Lighthouse Point \_\_\_\_\_

Owner Name James Finley \_\_\_\_\_

Contact Person James Finley \_\_\_\_\_

Contact Telephone No 954-868-4153 \_\_\_\_\_

Email Address: jfinley@lighthousepoint.com \_\_\_\_\_



The City of Coral Gables  
Procurement Division  
2800 S.W. 72ND AVENUE  
MIAMI, FLORIDA 33155

Yearly Budget/Cost \$75,000 \_\_\_\_\_

Dates of Contract From: 2023 \_\_\_\_\_ And: 2025 \_\_\_\_\_

Project Description Flat, sidewalk, walls, exteriors. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Project Name/Location Broward County Schools\_\_\_\_\_

Owner Name Thomas Iannarone\_\_\_\_\_

Contact Person Thomas Iannarone\_\_\_\_\_

Contact Telephone No. 954-309-5842\_\_\_\_\_

Email Address: Thomas.iannarone@browardschools.com\_\_\_\_\_

Yearly Budget/Cost \$200,000\_\_\_\_\_

Dates of Contract From: 1/2022-12/2023 \_\_\_\_\_ And: 2025-2029 \_\_\_\_\_

Project Description Cleaning school running tracks at all Broward County schools. Sidewalk and building exterior. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

#### **BIDDER INFORMATION:**

Company Name: Power Washing And More\_\_\_\_\_

Representative: Scott Peskin\_\_\_\_\_

Address: 1172 S. Dixie Way, 410, Coral Gables, FL 33146\_\_\_\_\_

Telephone No.: 844-352-9274\_\_\_\_\_

Fax No.: 833-550-1651\_\_\_\_\_

Email Address: scott@powerwashingandmore.com\_\_\_\_\_

CITY OF CORAL GABLES

FINANCE DEPARTMENT/PROCUREMENT DIVISION

LOBBYIST REGISTRATION FORM

SOLICITATION NAME/NUMBER: IFB 2025-037 Pressure Cleaning Services \_\_\_\_\_

The Bidder/Proposer certifies that it understands if it has retained a lobbyist(s) to lobby in connection with this specific competitive solicitation that each lobbyist retained has timely filed the registration or amended registration required under the City of Coral Gables Lobbyist Registration requirement pursuant to Ordinance 2021-24 as outlined below:

*Lobbyist* means an individual, firm, corporation, partnership, or other legal entity employed or retained, whether paid or not, by a principal, or that contracts with a third-party for economic consideration to perform lobbying activities on behalf of a principal.

*Lobbying activity* means any attempt to influence or encourage the passage or defeat of, or modification to, governmental actions, including, but not limited to, ordinances, resolutions, rules, regulations, executive orders, and procurement actions or decisions of the city commission, the mayor, any city board or committee, or any city personnel. The term "lobbying activity" encompasses all forms of communication, whether oral, written, or electronic, during the entire decision-making process on actions, decisions, or recommendations which foreseeably will be heard or reviewed by city personnel. This definition shall be subject to the exceptions stated below.

*Procurement matter* means the city's processes for the purchase of goods and services, including, but not limited to, processes related to the acquisition of: technology; public works; design services; construction, professional architecture, engineering, landscape architecture, land surveying, and mapping services; the purchase, lease or sale of real property; and the acquisition, granting, or other interest in real property.

*City personnel* means those city officials, officers and employees who are entrusted with the day-to-day policy setting, operation, and management of certain defined city functions or areas of responsibility, even though ultimate responsibility for such functions or areas rests with the city commission, with the exception of the City Attorney, Deputy City Attorney, and Assistant City Attorneys, advisory personnel (members of city advisory boards and agencies whose sole or primary responsibility is to recommend legislation or give advice to the city commission); and any employee of a city department or division with the authority to participate in procurement matters, when the communication involves such procurement.

Affidavit requirement. The following provisions shall apply to certain individuals who, in procurement matters participate in oral presentations or recorded negotiation meetings and sessions:

- a. The principal shall list on an affidavit form, provided by the City, all technical experts or employees of the principal whose normal scope of employment does not include lobbying activities and whose sole participation in the city procurement matter involves an appearance and participation in a city procurement matter involves an appearance and participation in an oral presentation before a city certification, evaluation, selection, technical review or similar committee, or recorded negotiation meetings or sessions.
- b. No person shall appear before any procurement committee or at any procurement negotiation meeting or session on behalf of a principal unless he/she has been listed as part of the principal's presentation or negotiation team or has registered as a lobbyist. For purposes of this subsection only, the listed members of the oral presentation or negotiation team shall not be required to separately register as lobbyists or pay any registration fees. The affidavit will be filed by the city procurement staff with the city clerk at the after the proposal is submitted or prior to the recorded negotiation meeting or session. Notwithstanding the foregoing, any person who engages in lobbying activities in addition to appearing before a procurement committee to make an oral presentation, or at a recorded procurement negotiation meeting or session, shall comply with all lobbyist registration requirements.

The Bidder/Proposer hereby certifies that: (select one)

It has not retained a lobbyist(s) to lobby in connection with this competitive solicitation; however, if one is retained anytime during the competitive process and prior to contract execution for this project, the lobbyist will properly register with the City Clerk's Office within two (2) business days of being retained with copy to the city procurement staff.

It has retained a lobbyist(s) to lobby in connection with this competitive solicitation and certified that each lobbyist retained has timely filed the registration or amended registration required under the City of Coral Gables

CITY OF CORAL GABLES  
FINANCE DEPARTMENT/PROCUREMENT DIVISION  
LOBBYIST REGISTRATION FORM

Lobbyist Registration requirement pursuant to Ordinance 2021-24 Section and that the required affidavit has been properly filed

It is a requirement of this solicitation that the following information be provided for all lobbyists retained to lobby in connection with this solicitation be listed below:

Name of Lobbyist: \_\_\_\_\_  
Lobbyist's Firm (if applicable): \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Name of Lobbyist: \_\_\_\_\_  
Lobbyist's Firm (if applicable): \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Name of Lobbyist: \_\_\_\_\_  
Lobbyist's Firm (if applicable): \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Name of Lobbyist: \_\_\_\_\_  
Lobbyist's Firm (if applicable): \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Authorized Signature:** Scott Peskin \_\_\_\_\_  
**Printed Name:** Scott Peskin \_\_\_\_\_  
**Date:** 11/10/2025 \_\_\_\_\_  
**Title:** CEO \_\_\_\_\_  
**Bidder/Proposer Name:** Scott Peskin \_\_\_\_\_

Exhibit E - Agreement # IFB 2025-037  
Pressure Washing Services

IN WITNESS WHEREOF, the parties have executed this Agreement as of the Effective

Date above written.

AS TO CITY:

Approved as to Insurance:

Risk Manager  
Risk Management Division

Approved by Department Head  
or head of negotiations team as to  
the negotiated business terms:

Peter J. Iglesias, P.E.  
City Manager

José L. Gomez, P.E.  
Deputy City Manager

Monica Beltran  
Parking and Mobility Services Director

Approved as to compliance with applicable  
Procurement Requirements:

ATTEST:

Celeste S. Walker-Harmon  
Chief Procurement Officer

Approved as to Funds Appropriation:

Billy Y. Urquia  
City Clerk

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY:

Diana M. Gomez  
Finance Director

AS TO CONTRACTOR:  
Scott Peskin

CEO  
Title:

Cristina M. Suárez  
City Attorney

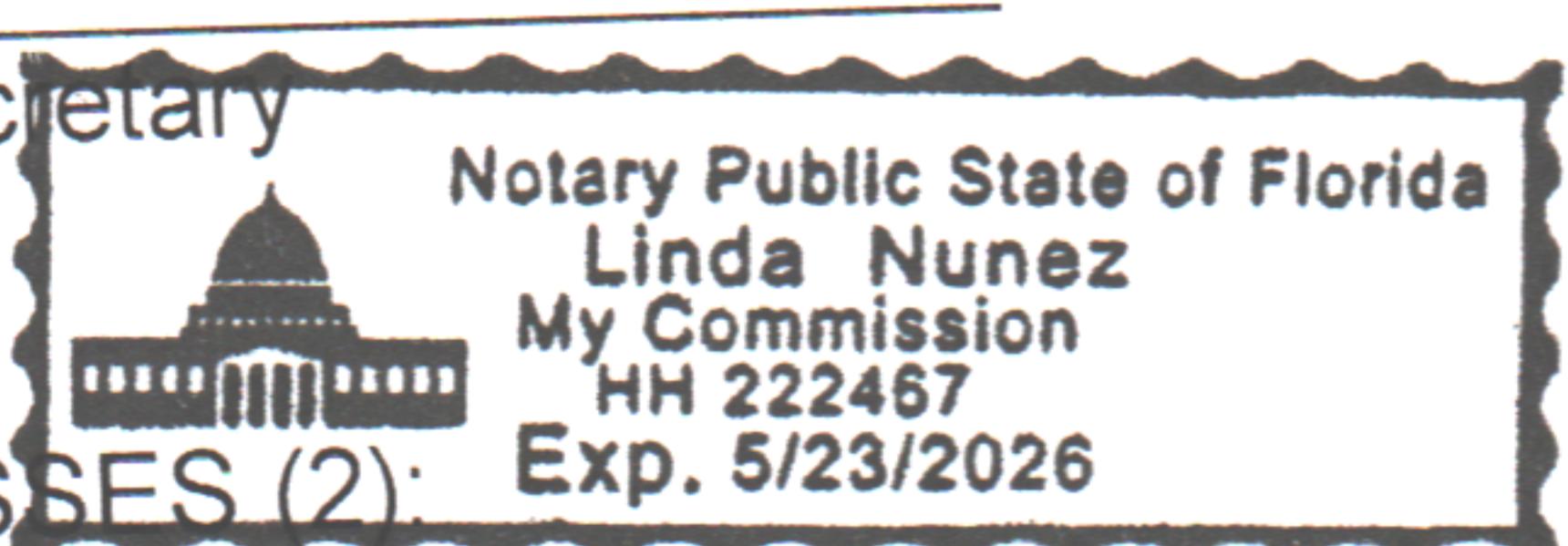
ATTEST:

Name

Corporate Secretary

(SEAL)

(OR) WITNESSES (2):



Print Name: Linda Nunez

Print Name: \_\_\_\_\_

**CITY OF CORAL GABLES - STATEMENT OF NO-RESPONSE**

**SOLICITATION: IFB 2025-037 PRESSURE WASHING SERVICES**

NOTE: If you do not intend to bid on this project, please return this form. Your assistance with providing feedback is greatly appreciated and will assist our agency in the development of future projects.

MAIL TO: CITY OF CORAL GABLES  
2800 S.W. 72nd AVENUE  
MIAMI, FL 33155  
ATTN: PROCUREMENT DIVISION  
OR EMAIL TO: [contracts@coralgables.com](mailto:contracts@coralgables.com)

We have declined to respond to the above referenced solicitation for the following reason(s):

- Insufficient time to respond to the Invitation for Bid
- We do not offer these services or an equivalent
- Our schedule would not permit us to perform
- Unable to meet specifications
- Unable to meet Bond requirements
- Specifications unclear (explain below).
- Unable to meet insurance requirements
- Other (specify below)

REMARKS:

N/A

---

COMPANY NAME: \_\_\_\_\_

Power Washing And \_\_\_\_\_

More \_\_\_\_\_

REPRESENTATIVE: \_\_\_\_\_

Scott Peskin \_\_\_\_\_

ADDRESS: 49 N \_\_\_\_\_

Federal Hwy, 410, \_\_\_\_\_

Pompano Beach, FL \_\_\_\_\_

33062 \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

954-777-6977

FAX NO.

833-550-1651

EMAIL ADDRESS: [scott@powerwashingandmore.com](mailto:scott@powerwashingandmore.com)

---

Services are divided into the following groups:

- **Group 1 – Interior Pressure Washing Services (priced per building)**
- **Group 2 – Exterior Pressure Washing Services (priced per building)**
- **Group 3 – Additional Pressure Washing Services (priced per square foot for facilities not specifically listed)**

### **Service Locations (Groups 1 & 2)**

- Garage 1 – 245 Andalusia Avenue – approx. 103,500 sq. ft., 3 levels – @0.05 per sq. ft - \$5,175.00
- Garage 2 – 220 Aragon Avenue – approx. 274,264 sq. ft., 9 levels @0.05 per sq. ft.- \$13,713.20
- Garage 3 – 204 Minorca Avenue – approx. 188,630 sq. ft., 7 levels @0.05 per sq. ft. - \$9,431.50
- Garage 4 – 385 Andalusia Avenue – approx. 149,800 sq. ft., 3 levels @0.05 per sq. ft. - \$7,490.00
- Garage 6 – 51 Aragon Avenue – approx. 199,010 sq. ft., 8 levels @0.05 per sq. ft - \$9,950.50

### **Additional Pressure Washing Services (priced per square foot for facilities not listed)**

- Pricing per sq. ft for additional projects - \$0.05.

#### **2.1 Additional requirements for Group 3 - Additional Pressure Washing Services - \$0.05/sq. ft**

Group 3 shall include pressure washing services at additional City facilities not specifically listed herein. Compensation shall be based on the Contractor's bid unit price per square foot. All requirements outlined in Section 2.3 (General Requirements) shall apply.

- 2.1.1 The Contractor shall conduct a pre-service site assessment with City staff to identify sensitive areas, access points, and operational considerations prior to commencing work.
- 2.1.2 Contractor shall provide proposals as requested by the City.
- 2.1.3 Work shall be scheduled to minimize disruption to City operations, tenants, and the public.

All wastewater generated must be contained, reclaimed, and disposed of in compliance with federal, state, and local laws. Under no circumstances shall wastewater be discharged into storm drains, sanitary systems, or landscaped areas.

121000011235

\_\_\_\_\_ (Requestor's Name)

\_\_\_\_\_ (Address)

\_\_\_\_\_ (Address)

\_\_\_\_\_ (City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

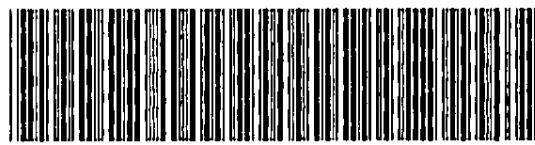
\_\_\_\_\_ (Business Entity Name)

\_\_\_\_\_ (Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100369182401

2021 JUL 06 PM 5:12

RECEIVED

JUL 06 2021

2021 JUL -6 PM 5:12  
TALLAHASSEE, FL

BRUCE  
JUL 25 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**POWER WASHING AND MORE LLC**  
**SUBJECT:** \_\_\_\_\_

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SCOTT PESKIN

\_\_\_\_\_  
Name of Person

POWER WASHING AND MORE LLC

\_\_\_\_\_  
Firm/Company

1900 NW 44TH STREET, SUITE 1-B

\_\_\_\_\_  
Address

DEERFIELD BEACH, FL 33064

\_\_\_\_\_  
City/State and Zip Code

INFO@POWERWASHINGANDMORE.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT PESKIN

954 777-6977

at (\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

2021 JUL -5 PM 5:12

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$25.00 Filing Fee	<input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
--	---	---	--

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

POWER WASHING AND MORE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/4/2021 and assigned Florida document number L21000011235.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

1900 NW 44TH STREET

SUITE 1-B

DEERFIELD BEACH, FL 33064

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1900 NW 44TH STREET

SUITE 1-B

DEERFIELD BEACH, FL 33064

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

SCOTT PESKIN

New Registered Office Address:

1900 NW 44TH STREET, SUITE 1-B

*Enter Florida street address*

DEERFIELD BEACH

, Florida 33064

City

Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

2021 JUL -6 PH 5:12  
ALL RHT FIL

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed

Dated JUNE 29 2021

Signature of a member or authorized representative of a member

SCOTT PESKIN

Typed or printed name of signer

# BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

**VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026**

**Business Name:** GREEN EARTH POWERWASHING

**Receipt #:** 325-315952  
**Business Type:** CLEANING/JANITORIAL  
(POWERWASHING)

**Owner Name:** SCOTT F PESKIN

**Business Location:** 1246 HAMMONDVILLE RD  
POMPANO BEACH

**Business Phone:** 9547776977

**Business Opened:** 01/01/2021

**State/County/Cert/Reg:**

**Exemption Code:**

Rooms	Seats	Employees	Machines	Professionals
		3		

Number of Machines:	For Vending Business Only					Vending Type:
	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	
33.00	0.00	0.00	3.30	0.00	0.00	36.30
Receipt Fee			33.00			

**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS**

**THIS BECOMES A TAX RECEIPT**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

**Mailing Address:**

POWER WASHING AND MORE LLC C/O: GR:  
49 N FEDERAL HWY STE 410  
POMPANO BEACH, FL  
33062-4304

**Receipt #:** WWW-25-00001873  
**Paid:** 10/08/2025 36.30

**2025 - 2026**

# BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

**VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026**

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POMPANO BEACH

**Business Phone:** 9547776977

**Business Opened:** 01/01/2021

**State/County/Cert/Reg:**

**Exemption Code:**

Rooms	Seats	Employees	Machines	Professionals
		3		

Signature	For Vending Business Only					
	Number of Machines:		Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	3.30	0.00	0.00	36.30

**Receipt #:** WWW-25-00001873  
**Paid:** 10/08/2025 36.30

# SAFETY DATA SHEET

Chlorine

## Section 1. Identification

<b>GHS product identifier</b>	:	Chlorine
<b>Chemical name</b>	:	chlorine
<b>Other means of identification</b>	:	Molecular chlorine; CHLORINE GAS; active chlorine released from chlorine; Dichlorine; Dichlor; Diatomic chlorine; Chlorine molecule; Chlorine mol.; Chlor mol.; Chlorine, liquefied; Liquid chlorine
<b>Product type</b>	:	Gas.
<b>Product use</b>	:	Synthetic/Analytical chemistry.
<b>Synonym</b>	:	Molecular chlorine; CHLORINE GAS; active chlorine released from chlorine; Dichlorine; Dichlor; Diatomic chlorine; Chlorine molecule; Chlorine mol.; Chlor mol.; Chlorine, liquefied; Liquid chlorine
<b>SDS #</b>	:	001015

## Section 2. Hazards identification

<b>OSHA/HCS status</b>	:	This material is considered hazardous by the OSHA Hazard Communication Standard (29 CFR 1910.1200).
<b>Classification of the substance or mixture</b>	:	<b>OXIDIZING GASES - Category 1</b> <b>GASES UNDER PRESSURE - Compressed gas</b> <b>ACUTE TOXICITY (inhalation) - Category 2</b> <b>SKIN CORROSION - Category 1</b> <b>SERIOUS EYE DAMAGE - Category 1</b> <b>AQUATIC HAZARD (ACUTE) - Category 1</b>

### GHS label elements

#### Hazard pictograms



#### Signal word

#### Hazard statements

- Danger
- H270 - May cause or intensify fire; oxidizer.
- H280 - Contains gas under pressure; may explode if heated.
- H314 - Causes severe skin burns and eye damage.
- H330 - Fatal if inhaled.
- H400 - Very toxic to aquatic life.

### Precautionary statements

#### General

- Read and follow all Safety Data Sheets (SDS'S) before use. Read label before use. Keep out of reach of children. If medical advice is needed, have product container or label at hand. Close valve after each use and when empty. Use equipment rated for cylinder pressure. Do not open valve until connected to equipment prepared for use. Use a back flow preventative device in the piping. Use only equipment of compatible materials of construction. Open valve slowly. Use only with equipment cleaned for Oxygen service.

## Section 2. Hazards identification

**Prevention**

- : P280 - Wear protective gloves, protective clothing and eye or face protection.
- P284 - In case of inadequate ventilation wear respiratory protection.
- P220 - Keep away from clothing and other combustible materials.
- P244 - Keep reduction valves, valves and fittings free from oil and grease.
- P271 - Use only outdoors or in a well-ventilated area.
- P273 - Avoid release to the environment.
- P260 - Do not breathe gas.
- P264 - Wash thoroughly after handling.

**Response**

- : P391 - Collect spillage.
- P370 + P376 - In case of fire: Stop leak if safe to do so.
- P304 + P340, P310 - IF INHALED: Remove person to fresh air and keep comfortable for breathing. Immediately call a POISON CENTER or doctor.
- P301 + P310, P330, P331 - IF SWALLOWED: Immediately call a POISON CENTER or doctor. Rinse mouth. Do NOT induce vomiting.
- P303 + P361 + P353, P310 - IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water. Immediately call a POISON CENTER or doctor.
- P363 - Wash contaminated clothing before reuse.
- P305 + P351 + P338, P310 - IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER or doctor.

**Storage**

- : P405 - Store locked up.
- P410 + P403 - Protect from sunlight. Store in a well-ventilated place.

**Disposal**

- : P501 - Dispose of contents and container in accordance with all local, regional, national and international regulations.

**Hazards not otherwise classified**

- : None known.

## Section 3. Composition/information on ingredients

**Substance/mixture**

- : Substance

**Chemical name**

- : chlorine

**Other means of identification**

- : Molecular chlorine; CHLORINE GAS; active chlorine released from chlorine; Dichlorine; Dichlor; Diatomic chlorine; Chlorine molecule; Chlorine mol.; Chlor mol.; Chlorine, liquefied; Liquid chlorine

**Product code**

- : 001015

Ingredient name	%	CAS number
Chlorine	100	7782-50-5

Any concentration shown as a range is to protect confidentiality or is due to batch variation.

**There are no additional ingredients present which, within the current knowledge of the supplier and in the concentrations applicable, are classified as hazardous to health or the environment and hence require reporting in this section.**

Occupational exposure limits, if available, are listed in Section 8.

## Section 4. First aid measures

### Description of necessary first aid measures

**Eye contact**

- : Get medical attention immediately. Call a poison center or physician. Immediately flush eyes with plenty of water, occasionally lifting the upper and lower eyelids. Check for and remove any contact lenses. Continue to rinse for at least 10 minutes. Chemical burns must be treated promptly by a physician.

## Section 4. First aid measures

### Inhalation

: Get medical attention immediately. Call a poison center or physician. Remove victim to fresh air and keep at rest in a position comfortable for breathing. If it is suspected that fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. If not breathing, if breathing is irregular or if respiratory arrest occurs, provide artificial respiration or oxygen by trained personnel. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband.

### Skin contact

: Get medical attention immediately. Call a poison center or physician. Wash contaminated skin with soap and water. Remove contaminated clothing and shoes. Wash contaminated clothing thoroughly with water before removing it, or wear gloves. Continue to rinse for at least 10 minutes. Chemical burns must be treated promptly by a physician. Wash clothing before reuse. Clean shoes thoroughly before reuse.

### Ingestion

: As this product is a gas, refer to the inhalation section.

## Most important symptoms/effects, acute and delayed

### Potential acute health effects

#### Eye contact

: Causes serious eye damage. Contact with rapidly expanding gas may cause burns or frostbite.

#### Inhalation

: Fatal if inhaled.

#### Skin contact

: Causes severe burns. Contact with rapidly expanding gas may cause burns or frostbite.

#### Frostbite

: Try to warm up the frozen tissues and seek medical attention.

#### Ingestion

: As this product is a gas, refer to the inhalation section.

### Over-exposure signs/symptoms

#### Eye contact

: Adverse symptoms may include the following:  
pain  
watering  
redness

#### Inhalation

: No specific data.

#### Skin contact

: Adverse symptoms may include the following:  
pain or irritation  
redness  
blistering may occur

#### Ingestion

: Adverse symptoms may include the following:  
stomach pains

## Indication of immediate medical attention and special treatment needed, if necessary

### Notes to physician

: Treat symptomatically. Contact poison treatment specialist immediately if large quantities have been ingested or inhaled.

### Specific treatments

: No specific treatment.

### Protection of first-aiders

: No action shall be taken involving any personal risk or without suitable training. If it is suspected that fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. Wash contaminated clothing thoroughly with water before removing it, or wear gloves.

See toxicological information (Section 11)

## Section 5. Fire-fighting measures

### Extinguishing media

#### Suitable extinguishing media

: Use an extinguishing agent suitable for the surrounding fire.

#### Unsuitable extinguishing media

: None known.

## Section 5. Fire-fighting measures

<b>Specific hazards arising from the chemical</b>	: Contains gas under pressure. Oxidizing material. This material increases the risk of fire and may aid combustion. Contact with combustible material may cause fire. In a fire or if heated, a pressure increase will occur and the container may burst or explode. This material is very toxic to aquatic life. Fire water contaminated with this material must be contained and prevented from being discharged to any waterway, sewer or drain.
<b>Hazardous thermal decomposition products</b>	: Decomposition products may include the following materials: halogenated compounds
<b>Special protective actions for fire-fighters</b>	: Promptly isolate the scene by removing all persons from the vicinity of the incident if there is a fire. No action shall be taken involving any personal risk or without suitable training. Contact supplier immediately for specialist advice. Move containers from fire area if this can be done without risk. Use water spray to keep fire-exposed containers cool. If involved in fire, shut off flow immediately if it can be done without risk.
<b>Special protective equipment for fire-fighters</b>	: Fire-fighters should wear appropriate protective equipment and self-contained breathing apparatus (SCBA) with a full face-piece operated in positive pressure mode.

## Section 6. Accidental release measures

### Personal precautions, protective equipment and emergency procedures

<b>For non-emergency personnel</b>	: No action shall be taken involving any personal risk or without suitable training. Evacuate surrounding areas. Keep unnecessary and unprotected personnel from entering. Shut off all ignition sources. No flares, smoking or flames in hazard area. Do not breathe gas. Provide adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Put on appropriate personal protective equipment.
<b>For emergency responders</b>	: If specialized clothing is required to deal with the spillage, take note of any information in Section 8 on suitable and unsuitable materials. See also the information in "For non-emergency personnel".
<b>Environmental precautions</b>	: Ensure emergency procedures to deal with accidental gas releases are in place to avoid contamination of the environment. Inform the relevant authorities if the product has caused environmental pollution (sewers, waterways, soil or air). Water polluting material. May be harmful to the environment if released in large quantities. Collect spillage.

### Methods and materials for containment and cleaning up

<b>Small spill</b>	: Immediately contact emergency personnel. Stop leak if without risk. Use spark-proof tools and explosion-proof equipment.
<b>Large spill</b>	: Immediately contact emergency personnel. Stop leak if without risk. Use spark-proof tools and explosion-proof equipment.

## Section 7. Handling and storage

### Precautions for safe handling

<b>Protective measures</b>	: Put on appropriate personal protective equipment (see Section 8). Contains gas under pressure. Do not get in eyes or on skin or clothing. Use only with adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Do not puncture or incinerate container. Use equipment rated for cylinder pressure. Close valve after each use and when empty. Protect cylinders from physical damage; do not drag, roll, slide, or drop. Use a suitable hand truck for cylinder movement.  Avoid release to the environment. Empty containers retain product residue and can be hazardous. Keep away from clothing, incompatible materials and combustible materials. Do not breathe gas. Keep reduction valves free from grease and oil.
<b>Advice on general occupational hygiene</b>	: Eating, drinking and smoking should be prohibited in areas where this material is handled, stored and processed. Workers should wash hands and face before eating, drinking and smoking. Remove contaminated clothing and protective equipment before entering eating areas. See also Section 8 for additional information on hygiene measures.

## Section 7. Handling and storage

**Conditions for safe storage, including any incompatibilities** : Store in accordance with local regulations. Store in a segregated and approved area. Store away from direct sunlight in a dry, cool and well-ventilated area, away from incompatible materials (see Section 10). Store locked up. Separate from reducing agents and combustible materials. Store away from grease and oil. Keep container tightly closed and sealed until ready for use. See Section 10 for incompatible materials before handling or use. Cylinders should be stored upright, with valve protection cap in place, and firmly secured to prevent falling or being knocked over. Cylinder temperatures should not exceed 52 °C (125 °F).

## Section 8. Exposure controls/personal protection

### Control parameters

#### Occupational exposure limits

Ingredient name	Exposure limits
chlorine	<b>California PEL for Chemical Contaminants (Table AC-1) (United States)</b> PEL 8 hours: 0.5 ppm. STEL 15 minutes: 1 ppm.

#### Biological exposure indices

No exposure indices known.

### Appropriate engineering controls

: Use only with adequate ventilation. Use process enclosures, local exhaust ventilation or other engineering controls to keep worker exposure to airborne contaminants below any recommended or statutory limits.

### Environmental exposure controls

: Emissions from ventilation or work process equipment should be checked to ensure they comply with the requirements of environmental protection legislation. In some cases, fume scrubbers, filters or engineering modifications to the process equipment will be necessary to reduce emissions to acceptable levels.

### Individual protection measures

#### Hygiene measures

: Wash hands, forearms and face thoroughly after handling chemical products, before eating, smoking and using the lavatory and at the end of the working period. Appropriate techniques should be used to remove potentially contaminated clothing. Wash contaminated clothing before reusing. Ensure that eyewash stations and safety showers are close to the workstation location.

#### Eye/face protection

: Safety eyewear complying with an approved standard should be used when a risk assessment indicates this is necessary to avoid exposure to liquid splashes, mists, gases or dusts. If contact is possible, the following protection should be worn, unless the assessment indicates a higher degree of protection: chemical splash goggles and/or face shield. If inhalation hazards exist, a full-face respirator may be required instead.

#### Skin protection

##### Hand protection

: Chemical-resistant, impervious gloves complying with an approved standard should be worn at all times when handling chemical products if a risk assessment indicates this is necessary. Considering the parameters specified by the glove manufacturer, check during use that the gloves are still retaining their protective properties. It should be noted that the time to breakthrough for any glove material may be different for different glove manufacturers. In the case of mixtures, consisting of several substances, the protection time of the gloves cannot be accurately estimated.

##### Body protection

: Personal protective equipment for the body should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.

##### Other skin protection

: Appropriate footwear and any additional skin protection measures should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.

## Section 8. Exposure controls/personal protection

**Respiratory protection** : Based on the hazard and potential for exposure, select a respirator that meets the appropriate standard or certification. Respirators must be used according to a respiratory protection program to ensure proper fitting, training, and other important aspects of use. Respirator selection must be based on known or anticipated exposure levels, the hazards of the product and the safe working limits of the selected respirator.

## Section 9. Physical and chemical properties

### Appearance

<b>Physical state</b>	: Gas. [GREENISH-YELLOW GAS WITH SUFFOCATING ODOR]
<b>Color</b>	: Colorless. Green. Yellow.
<b>Odor</b>	: Pungent.
<b>Odor threshold</b>	: Not available.
<b>pH</b>	: Not applicable.
<b>Melting point/freezing point</b>	: -101°C (-149.8°F)
<b>Boiling point or initial boiling point and boiling range</b>	: -34°C (-29.2°F)
<b>Flash point</b>	: [Product does not sustain combustion.]
<b>Evaporation rate</b>	: Not available.
<b>Flammability (solid, gas)</b>	: Extremely flammable in the presence of the following materials or conditions: reducing materials, combustible materials, organic materials and alkalis.
<b>Lower and upper explosive (flammable) limits</b>	: Not available.
<b>Vapor pressure</b>	: 85.3 (psig)
<b>Relative vapor density</b>	: 2.5 [Air = 1]
<b>Specific Volume (ft<sup>3</sup>/lb)</b>	: 5.4054
<b>Gas Density (lb/ft<sup>3</sup>)</b>	: 0.185
<b>Relative density</b>	: Not applicable.
<b>Solubility(ies)</b>	:

Media	Result
cold water	Very slightly soluble

<b>Solubility in water</b>	: 7.41 g/l
<b>Partition coefficient: n-octanol/water</b>	: Not available.
<b>Auto-ignition temperature</b>	: Not available.
<b>Decomposition temperature</b>	: Not available.
<b>Flow time (ISO 2431)</b>	: Not available.
<b>Molecular weight</b>	: 70.9 g/mole

## Section 10. Stability and reactivity

<b>Reactivity</b>	: No specific test data related to reactivity available for this product or its ingredients.
<b>Chemical stability</b>	: The product is stable.
<b>Possibility of hazardous reactions</b>	: Hazardous reactions or instability may occur under certain conditions of storage or use. Conditions may include the following: contact with combustible materials Reactions may include the following: risk of causing fire
<b>Conditions to avoid</b>	: No specific data.

## Section 10. Stability and reactivity

**Incompatible materials** : Highly reactive or incompatible with the following materials:  
combustible materials  
reducing materials  
grease  
oil

**Hazardous decomposition products** : Under normal conditions of storage and use, hazardous decomposition products should not be produced.

**Hazardous polymerization** : Under normal conditions of storage and use, hazardous polymerization will not occur.

## Section 11. Toxicological information

### Information on toxicological effects

#### Acute toxicity

##### **Product/ingredient name**

chlorine

##### **Result**

**Rat - Inhalation - LC50 Gas.**  
293 ppm [1 hours]

**Conclusion/Summary [Product]** : Not available.

#### Skin corrosion/irritation

Not available.

**Conclusion/Summary [Product]** : Not available.

#### Serious eye damage/eye irritation

Not available.

**Conclusion/Summary [Product]** : Not available.

#### Respiratory corrosion/irritation

Not available.

**Conclusion/Summary [Product]** : Not available.

#### Respiratory or skin sensitization

Not available.

#### Skin

**Conclusion/Summary [Product]** : Not available.

#### Respiratory

**Conclusion/Summary [Product]** : Not available.

#### Germ cell mutagenicity

Not available.

**Conclusion/Summary [Product]** : Not available.

## Section 11. Toxicological information

### Carcinogenicity

Not available.

**Conclusion/Summary [Product]** : Not available.

### Reproductive toxicity

Not available.

**Conclusion/Summary [Product]** : Not available.

### Specific target organ toxicity (single exposure)

Not available.

### Specific target organ toxicity (repeated exposure)

Not available.

### Aspiration hazard

Not available.

### Information on the likely routes of exposure

Not available.

### Potential acute health effects

**Eye contact** : Causes serious eye damage. Contact with rapidly expanding gas may cause burns or frostbite.

**Inhalation** : Fatal if inhaled.

**Skin contact** : Causes severe burns. Contact with rapidly expanding gas may cause burns or frostbite.

**Ingestion** : As this product is a gas, refer to the inhalation section.

### Symptoms related to the physical, chemical and toxicological characteristics

**Eye contact** : Adverse symptoms may include the following:  
pain  
watering  
redness

**Inhalation** : No specific data.

**Skin contact** : Adverse symptoms may include the following:  
pain or irritation  
redness  
blistering may occur

**Ingestion** : Adverse symptoms may include the following:  
stomach pains

### Delayed and immediate effects and also chronic effects from short and long term exposure

#### **Short term exposure**

**Potential immediate effects** : Not available.

**Potential delayed effects** : Not available.

#### **Long term exposure**

## Section 11. Toxicological information

**Potential immediate effects** : Not available.

**Potential delayed effects** : Not available.

### Potential chronic health effects

Not available.

**Conclusion/Summary [Product]** : Not available.

**General** : No known significant effects or critical hazards.

**Carcinogenicity** : No known significant effects or critical hazards.

**Mutagenicity** : No known significant effects or critical hazards.

**Reproductive toxicity** : No known significant effects or critical hazards.

### Numerical measures of toxicity

#### Acute toxicity estimates

Product/ingredient name	Oral (mg/kg)	Dermal (mg/kg)	Inhalation (gases) (ppm)	Inhalation (vapors) (mg/l)	Inhalation (dusts and mists) (mg/l)
chlorine	N/A	N/A	146.5	N/A	N/A

## Section 12. Ecological information

### Toxicity

#### Product/ingredient name

chlorine

#### Result

##### **Acute - LC50 - Fresh water**

Fish - Rainbow trout,donaldson trout - *Oncorhynchus mykiss*

Size: 10.16 to 12.7 cm

14 µg/l [96 hours]

Effect: Mortality

##### **Acute - LC50 - Fresh water**

Crustaceans - Aquatic sowbug - *Asellus racovitzai*

2.03 µg/l [2 days]

Effect: Mortality

##### **Acute - EC50 - Marine water**

Algae - Giant kelp - *Macrocystis pyrifera* - Young

5.1 ppm [4 days]

Effect: Physiology

**Conclusion/Summary [Product]** : Not available.

### Persistence and degradability

Not available.

**Conclusion/Summary [Product]** : Not available.

### Bioaccumulative potential

Not available.

### Mobility in soil

## Section 12. Ecological information

**Soil/Water partition coefficient** : Not available.

### Other adverse effects

No known significant effects or critical hazards.

## Section 13. Disposal considerations

### Disposal methods

: The generation of waste should be avoided or minimized wherever possible. Disposal of this product, solutions and any by-products should at all times comply with the requirements of environmental protection and waste disposal legislation and any regional local authority requirements. Dispose of surplus and non-recyclable products via a licensed waste disposal contractor. Waste should not be disposed of untreated to the sewer unless fully compliant with the requirements of all authorities with jurisdiction. Empty pressure vessels should be returned to the supplier. Waste packaging should be recycled. Incineration or landfill should only be considered when recycling is not feasible. This material and its container must be disposed of in a safe way. Empty containers or liners may retain some product residues. Do not puncture or incinerate container.

## Section 14. Transport information

	DOT	TDG	Mexico	IMDG	IATA
UN number	UN1017	UN1017	UN1017	UN1017	UN1017
UN proper shipping name	CHLORINE	CHLORINE	CHLORINE	CHLORINE	CHLORINE
Transport hazard class(es)	2.3 (5.1, 8)     	2.3 (5.1, 8)     	2.3 (5.1, 8)     	2.3 (8)     	2.3 (8)     
Packing group	-	-	-	-	-
Environmental hazards	Yes.	Yes.	Yes. The environmentally hazardous substance mark is not required.	Yes.	Yes. The environmentally hazardous substance mark is not required.

“Refer to CFR 49 (or authority having jurisdiction) to determine the information required for shipment of the product.”

### Additional information

#### DOT Classification

: Toxic - Inhalation hazard Zone B  
This product is not regulated as a marine pollutant when transported on inland waterways in sizes of  $\leq 5$  L or  $\leq 5$  kg or by road, rail, or inland air in non-bulk sizes, provided the packagings meet the general provisions of §§ 173.24 and 173.24a.

**Reportable quantity** 10 lbs / 4.54 kg. Package sizes shipped in quantities less than the product reportable quantity are not subject to the RQ (reportable quantity) transportation requirements.

**Limited quantity** Yes.

**Quantity limitation** Passenger aircraft/rail: Forbidden. Cargo aircraft: Forbidden.

**Special provisions** 2, B9, B14, T50, TP19

## Section 14. Transport information

**TDG Classification** : Product classified as per the following sections of the Transportation of Dangerous Goods Regulations: 2.13-2.17 (Class 2), 2.23-2.25 (Class 5), 2.40-2.42 (Class 8), 2.7 (Marine pollutant mark).  
The marine pollutant mark is not required when transported by road or rail.

**Explosive Limit and Limited Quantity Index 0**

**ERAP Index** 500

**Passenger Carrying Vessel Index** Forbidden

**Passenger Carrying Road or Rail Index** Forbidden

**IMDG** : The marine pollutant mark is not required when transported in sizes of  $\leq 5$  L or  $\leq 5$  kg.

**ATA** : The environmentally hazardous substance mark may appear if required by other transportation regulations.

**Quantity limitation** Passenger and Cargo Aircraft: Forbidden. Cargo Aircraft Only: Forbidden.

**Special precautions for user** : **Transport within user's premises:** always transport in closed containers that are upright and secure. Ensure that persons transporting the product know what to do in the event of an accident or spillage.

**Transport in bulk according to IMO instruments** : Not available.

## Section 15. Regulatory information

**U.S. Federal regulations** :

**TSCA 8(a) CDR Exempt/Partial exemption:** Not determined

**Clean Water Act (CWA) 311:** chlorine

**Clean Air Act (CAA) 112 regulated toxic substances:** chlorine

### TSCA 12(b) - Chemical export notification

Not applicable.

**Clean Air Act Section 112** : Listed

**(b) Hazardous Air Pollutants (HAPs)**

**Clean Air Act Section 602** : Not listed

**Class I Substances**

**Clean Air Act Section 602** : Not listed

**Class II Substances**

**DEA List I Chemicals (Precursor Chemicals)** : Not listed

**DEA List II Chemicals (Essential Chemicals)** : Not listed

### SARA 302/304

#### Composition/information on ingredients

Name	%	EHS	SARA 302 TPQ		SARA 304 RQ	
			(lbs)	(gallons)	(lbs)	(gallons)
chlorine	100	Yes.	100	-	10	-

**SARA 304 RQ** : 10 lbs / 4.5 kg

### SARA 311/312

**Classification** : Refer to Section 2: Hazards Identification of this SDS for classification of substance.

### SARA 313

## Section 15. Regulatory information

	Product name	CAS number	%
Form R - Reporting requirements	chlorine	7782-50-5	100
Supplier notification	chlorine	7782-50-5	100

SARA 313 notifications must not be detached from the SDS and any copying and redistribution of the SDS shall include copying and redistribution of the notice attached to copies of the SDS subsequently redistributed.

### State regulations

**Massachusetts** : This material is listed.  
**New York** : This material is listed.  
**New Jersey** : This material is listed.  
**Pennsylvania** : This material is listed.

### California Prop. 65

This product does not require a Safe Harbor warning under California Prop. 65.

### International regulations

#### Chemical Weapon Convention List Schedules I, II & III Chemicals

Not listed.

#### Montreal Protocol

Not listed.

#### Stockholm Convention on Persistent Organic Pollutants

Not listed.

#### Rotterdam Convention on Prior Informed Consent (PIC)

Not listed.

#### UNECE Aarhus Protocol on POPs and Heavy Metals

Not listed.

### Inventory list

**Australia** : This material is listed or exempted.  
**Canada** : This material is listed or exempted.  
**China** : This material is listed or exempted.  
**Eurasian Economic Union** : **Russian Federation inventory**: Not determined.  
**Japan** : **Japan inventory (CSCL)**: Not determined.  
**Japan inventory (ISHL)**: Not determined.  
**New Zealand** : This material is listed or exempted.  
**Philippines** : This material is listed or exempted.  
**Republic of Korea** : This material is listed or exempted.  
**Taiwan** : This material is listed or exempted.  
**Thailand** : This material is listed or exempted.  
**Turkey** : This material is listed or exempted.  
**United States** : This material is active or exempted.  
**Viet Nam** : This material is listed or exempted.

## Section 16. Other information

### Hazardous Material Information System (U.S.A.)

Health	/	3
Flammability		0
Physical hazards		3

## Section 16. Other information

**Caution:** HMIS® ratings are based on a 0-4 rating scale, with 0 representing minimal hazards or risks, and 4 representing significant hazards or risks. Although HMIS® ratings and the associated label are not required on SDSs or products leaving a facility under 29 CFR 1910.1200, the preparer may choose to provide them. HMIS® ratings are to be used with a fully implemented HMIS® program. HMIS® is a registered trademark and service mark of the American Coatings Association, Inc.

The customer is responsible for determining the PPE code for this material. For more information on HMIS® Personal Protective Equipment (PPE) codes, consult the HMIS® Implementation Manual.

### National Fire Protection Association (U.S.A.)



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Copyright ©2001, National Fire Protection Association, Quincy, MA 02269. This warning system is intended to be interpreted and applied only by properly trained individuals to identify fire, health and reactivity hazards of chemicals. The user is referred to certain limited number of chemicals with recommended classifications in NFPA 49 and NFPA 325, which would be used as a guideline only. Whether the chemicals are classified by NFPA or not, anyone using the 704 systems to classify chemicals does so at their own risk.

### Procedure used to derive the classification

Classification	Justification
OXIDIZING GASES - Category 1	Expert judgment
GASES UNDER PRESSURE - Compressed gas	According to package
ACUTE TOXICITY (inhalation) - Category 2	On basis of test data
SKIN CORROSION - Category 1	Expert judgment
SERIOUS EYE DAMAGE - Category 1	Expert judgment
AQUATIC HAZARD (ACUTE) - Category 1	Expert judgment

### History

**Date of printing** : 5/7/2025

**Date of issue/Date of revision** : 5/7/2025

**Date of previous issue** : 2/23/2022

**Version** : 2.02

**Key to abbreviations** : ATE = Acute Toxicity Estimate  
BCF = Bioconcentration Factor  
GHS = Globally Harmonized System of Classification and Labelling of Chemicals  
IATA = International Air Transport Association  
IBC = Intermediate Bulk Container  
IMDG = International Maritime Dangerous Goods  
LogPow = logarithm of the octanol/water partition coefficient  
MARPOL = International Convention for the Prevention of Pollution From Ships, 1973 as modified by the Protocol of 1978. ("Marpol" = marine pollution)  
UN = United Nations

**References** : Not available.

### Notice to reader

To the best of our knowledge, the information contained herein is accurate. However, neither the above-named supplier, nor any of its subsidiaries, assumes any liability whatsoever for the accuracy or completeness of the information contained herein.

Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although certain hazards are described herein, we cannot guarantee that these are the only hazards that exist.

# SAFETY DATA SHEET

## ZEP PROFESSIONAL HEAVY-DUTY DEGREASER 1GL 4CT

Version 1.1

Revision Date 10/01/2023

Print Date 07/14/2025

### SECTION 1. PRODUCT AND COMPANY IDENTIFICATION

Material name : ZEP PROFESSIONAL HEAVY-DUTY DEGREASER 1GL  
4CT

Material number : 000000000001041483

#### Manufacturer or supplier's details

Company : Zep Inc.

Address : 350 Joe Frank Harris Parkway, SE  
Emerson, GA 30137

Telephone : Compliance Services - 877-428-9937

#### Emergency telephone numbers

For SDS Information : Compliance Services - 877-428-9937

For a Medical Emergency : 877-541-2016 Toll Free - All Calls Recorded

For a Transportation Emergency : CHEMTREC: 800-424-9300 - All Calls Recorded.  
In the District of Columbia 202-483-7616

#### Recommended use of the chemical and restrictions on use

### SECTION 2. HAZARDS IDENTIFICATION

#### Emergency Overview

Appearance	liquid
Colour	blue
Odour	mild

#### GHS Classification

Skin corrosion : Category 1  
Serious eye damage : Category 1

#### GHS label elements

Hazard pictograms :



Corrosion

Signal word : Danger

Hazard statements : H314 Causes severe skin burns and eye damage.

Precautionary statements : **Prevention:**  
P264 Wash skin thoroughly after handling.  
P280 Wear protective gloves/ protective clothing/ eye protection/ face protection.

#### Response:

P301 + P330 + P331 IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

# SAFETY DATA SHEET

## ZEP PROFESSIONAL HEAVY-DUTY DEGREASER 1GL 4CT

Version 1.1

Revision Date 10/01/2023

Print Date 07/14/2025

P303 + P361 + P353 IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.

P304 + P340 + P310 IF INHALED: Remove person to fresh air and keep comfortable for breathing. Immediately call a POISON CENTER/doctor.

P305 + P351 + P338 + P310 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER/doctor.

P363 Wash contaminated clothing before reuse.

### Disposal:

P501 Dispose of contents/container in accordance with local regulation.

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### SECTION 3. COMPOSITION/INFORMATION ON INGREDIENTS

Substance / Mixture : Mixture

#### Hazardous components

Chemical name	CAS-No.	Concentration [%]
2-(2-butoxyethoxy)ethanol	112-34-5	>= 5 - < 10
Alcohols, C9-11, ethoxylated	68439-46-3	>= 1 - < 3
Sodium metasilicate (disodium salt)	6834-92-0	>= 1 - < 3

The exact percentages of disclosed substances are withheld as trade secrets.

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### SECTION 4. FIRST AID MEASURES

General advice : Move out of dangerous area.  
Consult a physician.  
Show this safety data sheet to the doctor in attendance.  
Do not leave the victim unattended.

If inhaled : If unconscious, place in recovery position and seek medical advice.  
If symptoms persist, call a physician.

In case of skin contact : Immediate medical treatment is necessary as untreated wounds from corrosion of the skin heal slowly and with difficulty.  
If on skin, rinse well with water.  
If on clothes, remove clothes.

In case of eye contact : Small amounts splashed into eyes can cause irreversible tissue damage and blindness.  
In the case of contact with eyes, rinse immediately with plenty of water and seek medical advice.  
Continue rinsing eyes during transport to hospital.  
Remove contact lenses.  
Protect unharmed eye.

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	<p>Keep eye wide open while rinsing. If eye irritation persists, consult a specialist.</p>
If swallowed	<p>: Clean mouth with water and drink afterwards plenty of water. Keep respiratory tract clear. Do NOT induce vomiting. Do not give milk or alcoholic beverages. Never give anything by mouth to an unconscious person. If symptoms persist, call a physician. Take victim immediately to hospital.</p>
Most important symptoms and effects, both acute and delayed	<p>: Effects are immediate and delayed. Effects are dependent on exposure (dose, concentration, contact time). Causes severe skin burns and eye damage. Review section 2 of SDS to see all potential hazards.</p>
Notes to physician	<p>: Treat symptomatically. Symptoms may be delayed.</p>

---

## SECTION 5. FIREFIGHTING MEASURES

Suitable extinguishing media	<p>: Use water spray, alcohol-resistant foam, dry chemical or carbon dioxide.</p>
Unsuitable extinguishing media	<p>: High volume water jet</p>
Specific hazards during firefighting	<p>: Do not allow run-off from fire fighting to enter drains or water courses.</p>
Hazardous combustion products	<p>: Carbon dioxide (CO<sub>2</sub>) Carbon monoxide Smoke</p>
Specific extinguishing methods	<p>: Use extinguishing measures that are appropriate to local circumstances and the surrounding environment.</p>
Further information	<p>: Collect contaminated fire extinguishing water separately. This must not be discharged into drains. Fire residues and contaminated fire extinguishing water must be disposed of in accordance with local regulations.</p>
Special protective equipment for firefighters	<p>: Wear self-contained breathing apparatus for firefighting if necessary.</p>

---

## SECTION 6. ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures	<p>: Use personal protective equipment.</p>
Environmental precautions	<p>: Prevent product from entering drains. Prevent further leakage or spillage if safe to do so. If the product contaminates rivers and lakes or drains, inform respective authorities.</p>

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Methods and materials for containment and cleaning up : Soak up with inert absorbent material (e.g. sand, silica gel, acid binder, universal binder, sawdust). Keep in suitable, closed containers for disposal.

### SECTION 7. HANDLING AND STORAGE

Advice on safe handling : Do not breathe vapours/dust. Avoid contact with skin and eyes. For personal protection see section 8. Smoking, eating and drinking should be prohibited in the application area. Dispose of rinse water in accordance with local and national regulations.

Conditions for safe storage : Keep container tightly closed in a dry and well-ventilated place. Observe label precautions. Electrical installations / working materials must comply with the technological safety standards.

Materials to avoid : Do not store near acids. Oxidizing agents

### SECTION 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

#### Components with workplace control parameters

Components	CAS-No.	Value type (Form of exposure)	Control parameters / Permissible concentration	Basis
2-(2-butoxyethoxy)ethanol	112-34-5	TWA (Inhalable fraction and vapor)	10 ppm	ACGIH

**Engineering measures** : effective ventilation in all processing areas

#### Personal protective equipment

Respiratory protection : Use respiratory protection unless adequate local exhaust ventilation is provided or exposure assessment demonstrates that exposures are within recommended exposure guidelines.

Hand protection

Material

Remarks

: Protective gloves

: The suitability for a specific workplace should be discussed with the producers of the protective gloves.

Eye protection

: Access to clean water to rinse eyes must be available, options include: eye wash stations or showers, or eye wash bottles

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with pure water.  
Tightly fitting safety goggles  
Wear face-shield and protective suit for abnormal processing problems.

Skin and body protection : Impervious clothing  
Choose body protection according to the amount and concentration of the dangerous substance at the work place.

Hygiene measures : When using do not eat or drink.  
When using do not smoke.  
Wash hands before breaks and at the end of workday.

---

### SECTION 9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance	: liquid
Colour	: blue
Odour	: mild
Odour Threshold	: No data available
pH	: 12 - 13
Melting point/freezing point	: No data available
Boiling point	: 104 °C
Flash point	: > 93.4 °C
Upper explosion limit	: No data available
Lower explosion limit	: No data available
Vapour pressure	: No data available
Density	: 1.05 g/cm3
Solubility(ies)	
Water solubility	: completely soluble
Partition coefficient: n-octanol/water	: No data available
Viscosity	
Viscosity, kinematic	: No data available

---

### SECTION 10. STABILITY AND REACTIVITY

Reactivity	: Stable
Chemical stability	: Stable under normal conditions.

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Possibility of hazardous reactions	: No decomposition if stored and applied as directed.
Conditions to avoid	: No data available
Incompatible materials	: Acids Oxidizing agents
Hazardous decomposition products	: Carbon monoxide, carbon dioxide and unburned hydrocarbons (smoke).

---

## SECTION 11. TOXICOLOGICAL INFORMATION

### Potential Health Effects

Aggravated Medical Condition	: None known.
Symptoms of Overexposure	: Effects are immediate and delayed. Effects are dependent on exposure (dose, concentration, contact time). Causes severe skin burns and eye damage. Review section 2 of SDS to see all potential hazards. Treat symptomatically. Symptoms may be delayed.

### Carcinogenicity:

IARC	No component of this product present at levels greater than or equal to 0.1% is identified as probable, possible or confirmed human carcinogen by IARC.
ACGIH	No component of this product present at levels greater than or equal to 0.1% is identified as a carcinogen or potential carcinogen by ACGIH.
OSHA	No component of this product present at levels greater than or equal to 0.1% is on OSHA's list of regulated carcinogens.
NTP	No component of this product present at levels greater than or equal to 0.1% is identified as a known or anticipated carcinogen by NTP.

### Acute toxicity

#### Product:

Acute oral toxicity	: Acute toxicity estimate : > 5,000 mg/kg Method: Calculation method
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#### Components:

##### **Alcohols, C9-11, ethoxylated:**

Acute oral toxicity	: LD50 Oral Rat: 1,400 mg/kg
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##### **Sodium metasilicate (disodium salt):**

Acute oral toxicity	: LD50 Rat: 1,153 mg/kg
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### Skin corrosion/irritation

#### Product:

Remarks: Extremely corrosive and destructive to tissue.

### Serious eye damage/eye irritation

#### Product:

Remarks: May cause irreversible eye damage.

### Respiratory or skin sensitisation

No data available

### Germ cell mutagenicity

No data available

### Carcinogenicity

No data available

### Reproductive toxicity

No data available

### STOT - single exposure

No data available

### STOT - repeated exposure

No data available

### Aspiration toxicity

No data available

### Further information

#### Product:

Remarks: No data available

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## SECTION 12. ECOLOGICAL INFORMATION

### Ecotoxicity

No data available

### Persistence and degradability

No data available

### Bioaccumulative potential

#### Product:

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Partition coefficient: n-octanol/water : Remarks: No data available

### Components:

#### 2-(2-butoxyethoxy)ethanol :

Partition coefficient: n-octanol/water : Pow: 1

### **Mobility in soil**

No data available

### **Other adverse effects**

No data available

### Product:

Regulation 40 CFR Protection of Environment; Part 82 Protection of Stratospheric Ozone - CAA Section 602 Class I Substances

Remarks This product neither contains, nor was manufactured with a Class I or Class II ODS as defined by the U.S. Clean Air Act Section 602 (40 CFR 82, Subpt. A, App.A + B).

Additional ecological information : No data available

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## SECTION 13. DISPOSAL CONSIDERATIONS

### **Disposal methods**

Waste from residues : Do not dispose of waste into sewer.  
Do not contaminate ponds, waterways or ditches with chemical or used container.  
Dispose of in accordance with local regulations.

Contaminated packaging : Empty remaining contents.  
Dispose of as unused product.  
Do not re-use empty containers.

---

## SECTION 14. TRANSPORT INFORMATION

Transportation Regulation: 49 CFR (USA):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: IMDG (Vessel):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: IATA (Cargo Air):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

# SAFETY DATA SHEET

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Transportation Regulation: IATA (Passenger Air):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: TDG (Canada):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

The product as delivered to the customer conforms to packaging requirements for shipment by road under US Department of Transportation (DOT) regulations. Additional transportation classifications noted above are for reference only, and not a certification or warranty of the suitability of the packaging for shipment under these alternative transport regulations.

### SECTION 15. REGULATORY INFORMATION

**TSCA list** : No substances are subject to a Significant New Use Rule.

No substances are subject to TSCA 12(b) export notification requirements.

#### EPCRA - Emergency Planning and Community Right-to-Know Act

##### CERCLA Reportable Quantity

This material does not contain any components with a CERCLA RQ.

##### SARA 304 Extremely Hazardous Substances Reportable Quantity

This material does not contain any components with a section 304 EHS RQ.

<b>SARA 311/312 Hazards</b>	: Skin corrosion or irritation Serious eye damage or eye irritation
<b>SARA 302</b>	: No chemicals in this material are subject to the reporting requirements of SARA Title III, Section 302.
<b>SARA 313</b>	: The following components are subject to reporting levels established by SARA Title III, Section 313: 2-(2-butoxyethoxy)ethanol 112-34-5 6.9993 %

##### California Prop. 65

This product does not contain any chemicals known to State of California to cause cancer, birth defects, or any other reproductive harm.

##### The components of this product are reported in the following inventories:

**DSL** All components of this product are on the Canadian DSL  
**TSCA** On TSCA Inventory

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For information on the country notification status for other regions please contact the manufacturer's regulatory group.

### Inventory Acronym and Validity Area Legend:

TSCA (USA), DSL (Canada), NDSL (Canada)

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## SECTION 16. OTHER INFORMATION

### Further information

### NFPA:

HEALTH	3
FLAMMABILITY	1
INSTABILITY	0
SPECIAL HAZARD.	

0 = not significant, 1 =Slight,

2 = Moderate, 3 = High

4 = Extreme

### HMIS III:

HEALTH	3
FLAMMABILITY	1
PHYSICAL HAZARD	0

0 = not significant, 1 =Slight,

2 = Moderate, 3 = High

4 = Extreme, \* = Chronic

---

## OSHA - GHS Label Information:

Hazard pictograms



Corrosion

Signal word

: **Danger:**

Hazard statements

: Causes severe skin burns and eye damage.

Precautionary statements

:

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**Prevention:** Wash skin thoroughly after handling. Wear protective gloves/ protective clothing/ eye protection/ face protection.

**Response:** IF SWALLOWED: Rinse mouth. Do NOT induce vomiting. IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower. IF INHALED: Remove person to fresh air and keep comfortable for breathing. Immediately call a POISON CENTER/doctor. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER/doctor. Wash contaminated clothing before reuse.

**Disposal:** Dispose of contents/container in accordance with local regulation.

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We believe the statements, technical information and recommendations contained herein are reliable, but they are given without warranty or guarantee of any kind. The information in this document applies to this specific material as supplied. It may not be valid for this material if it is used in combination with any other materials. Users should make their own investigations to determine the suitability and applicability of the information for their particular purposes. This SDS has been prepared by the Compliance Services organization supporting this manufacturer, supplier or distributor.

### ADDITIONAL ITEMS USED FOR CLEANING BY POWER WASHING AND MORE:

Chlorine – 7782-50-5

Water – 7732-18-5

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### SECTION 1. PRODUCT AND COMPANY IDENTIFICATION

Material name : ZEP PROFESSIONAL HEAVY-DUTY DEGREASER 1GL  
4CT

Material number : 000000000001041483

#### Manufacturer or supplier's details

Company : Zep Inc.

Address : 350 Joe Frank Harris Parkway, SE  
Emerson, GA 30137

Telephone : Compliance Services - 877-428-9937

#### Emergency telephone numbers

For SDS Information : Compliance Services - 877-428-9937

For a Medical Emergency : 877-541-2016 Toll Free - All Calls Recorded

For a Transportation Emergency : CHEMTREC: 800-424-9300 - All Calls Recorded.  
In the District of Columbia 202-483-7616

#### Recommended use of the chemical and restrictions on use

### SECTION 2. HAZARDS IDENTIFICATION

#### Emergency Overview

Appearance	liquid
Colour	blue
Odour	mild

#### GHS Classification

Skin corrosion : Category 1  
Serious eye damage : Category 1

#### GHS label elements

Hazard pictograms :



Corrosion

Signal word : Danger

Hazard statements : H314 Causes severe skin burns and eye damage.

Precautionary statements : **Prevention:**  
P264 Wash skin thoroughly after handling.  
P280 Wear protective gloves/ protective clothing/ eye protection/ face protection.

#### Response:

P301 + P330 + P331 IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

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P303 + P361 + P353 IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.

P304 + P340 + P310 IF INHALED: Remove person to fresh air and keep comfortable for breathing. Immediately call a POISON CENTER/doctor.

P305 + P351 + P338 + P310 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER/doctor.

P363 Wash contaminated clothing before reuse.

### Disposal:

P501 Dispose of contents/container in accordance with local regulation.

---

### SECTION 3. COMPOSITION/INFORMATION ON INGREDIENTS

Substance / Mixture : Mixture

#### Hazardous components

Chemical name	CAS-No.	Concentration [%]
2-(2-butoxyethoxy)ethanol	112-34-5	>= 5 - < 10
Alcohols, C9-11, ethoxylated	68439-46-3	>= 1 - < 3
Sodium metasilicate (disodium salt)	6834-92-0	>= 1 - < 3

The exact percentages of disclosed substances are withheld as trade secrets.

---

### SECTION 4. FIRST AID MEASURES

General advice : Move out of dangerous area.  
Consult a physician.  
Show this safety data sheet to the doctor in attendance.  
Do not leave the victim unattended.

If inhaled : If unconscious, place in recovery position and seek medical advice.  
If symptoms persist, call a physician.

In case of skin contact : Immediate medical treatment is necessary as untreated wounds from corrosion of the skin heal slowly and with difficulty.  
If on skin, rinse well with water.  
If on clothes, remove clothes.

In case of eye contact : Small amounts splashed into eyes can cause irreversible tissue damage and blindness.  
In the case of contact with eyes, rinse immediately with plenty of water and seek medical advice.  
Continue rinsing eyes during transport to hospital.  
Remove contact lenses.  
Protect unharmed eye.

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	<p>Keep eye wide open while rinsing. If eye irritation persists, consult a specialist.</p>
If swallowed	<p>: Clean mouth with water and drink afterwards plenty of water. Keep respiratory tract clear. Do NOT induce vomiting. Do not give milk or alcoholic beverages. Never give anything by mouth to an unconscious person. If symptoms persist, call a physician. Take victim immediately to hospital.</p>
Most important symptoms and effects, both acute and delayed	<p>: Effects are immediate and delayed. Effects are dependent on exposure (dose, concentration, contact time). Causes severe skin burns and eye damage. Review section 2 of SDS to see all potential hazards.</p>
Notes to physician	<p>: Treat symptomatically. Symptoms may be delayed.</p>

---

## SECTION 5. FIREFIGHTING MEASURES

Suitable extinguishing media	<p>: Use water spray, alcohol-resistant foam, dry chemical or carbon dioxide.</p>
Unsuitable extinguishing media	<p>: High volume water jet</p>
Specific hazards during firefighting	<p>: Do not allow run-off from fire fighting to enter drains or water courses.</p>
Hazardous combustion products	<p>: Carbon dioxide (CO<sub>2</sub>) Carbon monoxide Smoke</p>
Specific extinguishing methods	<p>: Use extinguishing measures that are appropriate to local circumstances and the surrounding environment.</p>
Further information	<p>: Collect contaminated fire extinguishing water separately. This must not be discharged into drains. Fire residues and contaminated fire extinguishing water must be disposed of in accordance with local regulations.</p>
Special protective equipment for firefighters	<p>: Wear self-contained breathing apparatus for firefighting if necessary.</p>

---

## SECTION 6. ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures	<p>: Use personal protective equipment.</p>
Environmental precautions	<p>: Prevent product from entering drains. Prevent further leakage or spillage if safe to do so. If the product contaminates rivers and lakes or drains, inform respective authorities.</p>

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Methods and materials for containment and cleaning up : Soak up with inert absorbent material (e.g. sand, silica gel, acid binder, universal binder, sawdust). Keep in suitable, closed containers for disposal.

### SECTION 7. HANDLING AND STORAGE

Advice on safe handling : Do not breathe vapours/dust. Avoid contact with skin and eyes. For personal protection see section 8. Smoking, eating and drinking should be prohibited in the application area. Dispose of rinse water in accordance with local and national regulations.

Conditions for safe storage : Keep container tightly closed in a dry and well-ventilated place. Observe label precautions. Electrical installations / working materials must comply with the technological safety standards.

Materials to avoid : Do not store near acids. Oxidizing agents

### SECTION 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

#### Components with workplace control parameters

Components	CAS-No.	Value type (Form of exposure)	Control parameters / Permissible concentration	Basis
2-(2-butoxyethoxy)ethanol	112-34-5	TWA (Inhalable fraction and vapor)	10 ppm	ACGIH

**Engineering measures** : effective ventilation in all processing areas

#### Personal protective equipment

Respiratory protection : Use respiratory protection unless adequate local exhaust ventilation is provided or exposure assessment demonstrates that exposures are within recommended exposure guidelines.

Hand protection

Material

Remarks

: Protective gloves

: The suitability for a specific workplace should be discussed with the producers of the protective gloves.

Eye protection

: Access to clean water to rinse eyes must be available, options include: eye wash stations or showers, or eye wash bottles

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with pure water.  
Tightly fitting safety goggles  
Wear face-shield and protective suit for abnormal processing problems.

Skin and body protection : Impervious clothing  
Choose body protection according to the amount and concentration of the dangerous substance at the work place.

Hygiene measures : When using do not eat or drink.  
When using do not smoke.  
Wash hands before breaks and at the end of workday.

---

### SECTION 9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance	: liquid
Colour	: blue
Odour	: mild
Odour Threshold	: No data available
pH	: 12 - 13
Melting point/freezing point	: No data available
Boiling point	: 104 °C
Flash point	: > 93.4 °C
Upper explosion limit	: No data available
Lower explosion limit	: No data available
Vapour pressure	: No data available
Density	: 1.05 g/cm3
Solubility(ies)	
Water solubility	: completely soluble
Partition coefficient: n-octanol/water	: No data available
Viscosity	
Viscosity, kinematic	: No data available

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### SECTION 10. STABILITY AND REACTIVITY

Reactivity	: Stable
Chemical stability	: Stable under normal conditions.

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Possibility of hazardous reactions	: No decomposition if stored and applied as directed.
Conditions to avoid	: No data available
Incompatible materials	: Acids Oxidizing agents
Hazardous decomposition products	: Carbon monoxide, carbon dioxide and unburned hydrocarbons (smoke).

---

## SECTION 11. TOXICOLOGICAL INFORMATION

### Potential Health Effects

Aggravated Medical Condition	: None known.
Symptoms of Overexposure	: Effects are immediate and delayed. Effects are dependent on exposure (dose, concentration, contact time). Causes severe skin burns and eye damage. Review section 2 of SDS to see all potential hazards. Treat symptomatically. Symptoms may be delayed.

### Carcinogenicity:

IARC	No component of this product present at levels greater than or equal to 0.1% is identified as probable, possible or confirmed human carcinogen by IARC.
ACGIH	No component of this product present at levels greater than or equal to 0.1% is identified as a carcinogen or potential carcinogen by ACGIH.
OSHA	No component of this product present at levels greater than or equal to 0.1% is on OSHA's list of regulated carcinogens.
NTP	No component of this product present at levels greater than or equal to 0.1% is identified as a known or anticipated carcinogen by NTP.

### Acute toxicity

#### Product:

Acute oral toxicity	: Acute toxicity estimate : > 5,000 mg/kg Method: Calculation method
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#### Components:

##### **Alcohols, C9-11, ethoxylated:**

Acute oral toxicity	: LD50 Oral Rat: 1,400 mg/kg
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##### **Sodium metasilicate (disodium salt):**

Acute oral toxicity	: LD50 Rat: 1,153 mg/kg
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### Skin corrosion/irritation

#### Product:

Remarks: Extremely corrosive and destructive to tissue.

### Serious eye damage/eye irritation

#### Product:

Remarks: May cause irreversible eye damage.

### Respiratory or skin sensitisation

No data available

### Germ cell mutagenicity

No data available

### Carcinogenicity

No data available

### Reproductive toxicity

No data available

### STOT - single exposure

No data available

### STOT - repeated exposure

No data available

### Aspiration toxicity

No data available

### Further information

#### Product:

Remarks: No data available

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## SECTION 12. ECOLOGICAL INFORMATION

### Ecotoxicity

No data available

### Persistence and degradability

No data available

### Bioaccumulative potential

#### Product:

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Partition coefficient: n-octanol/water : Remarks: No data available

### Components:

#### 2-(2-butoxyethoxy)ethanol :

Partition coefficient: n-octanol/water : Pow: 1

### **Mobility in soil**

No data available

### **Other adverse effects**

No data available

### Product:

Regulation 40 CFR Protection of Environment; Part 82 Protection of Stratospheric Ozone - CAA Section 602 Class I Substances

Remarks This product neither contains, nor was manufactured with a Class I or Class II ODS as defined by the U.S. Clean Air Act Section 602 (40 CFR 82, Subpt. A, App.A + B).

Additional ecological information : No data available

---

## SECTION 13. DISPOSAL CONSIDERATIONS

### **Disposal methods**

Waste from residues : Do not dispose of waste into sewer.  
Do not contaminate ponds, waterways or ditches with chemical or used container.  
Dispose of in accordance with local regulations.

Contaminated packaging : Empty remaining contents.  
Dispose of as unused product.  
Do not re-use empty containers.

---

## SECTION 14. TRANSPORT INFORMATION

Transportation Regulation: 49 CFR (USA):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: IMDG (Vessel):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: IATA (Cargo Air):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

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Transportation Regulation: IATA (Passenger Air):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

Transportation Regulation: TDG (Canada):  
NOT REGULATED AS DANGEROUS GOODS OR HAZARDOUS MATERIAL

The product as delivered to the customer conforms to packaging requirements for shipment by road under US Department of Transportation (DOT) regulations. Additional transportation classifications noted above are for reference only, and not a certification or warranty of the suitability of the packaging for shipment under these alternative transport regulations.

### SECTION 15. REGULATORY INFORMATION

**TSCA list** : No substances are subject to a Significant New Use Rule.

No substances are subject to TSCA 12(b) export notification requirements.

#### EPCRA - Emergency Planning and Community Right-to-Know Act

##### CERCLA Reportable Quantity

This material does not contain any components with a CERCLA RQ.

##### SARA 304 Extremely Hazardous Substances Reportable Quantity

This material does not contain any components with a section 304 EHS RQ.

<b>SARA 311/312 Hazards</b>	: Skin corrosion or irritation Serious eye damage or eye irritation
<b>SARA 302</b>	: No chemicals in this material are subject to the reporting requirements of SARA Title III, Section 302.
<b>SARA 313</b>	: The following components are subject to reporting levels established by SARA Title III, Section 313: 2-(2-butoxyethoxy)ethanol 112-34-5 6.9993 %

##### California Prop. 65

This product does not contain any chemicals known to State of California to cause cancer, birth defects, or any other reproductive harm.

##### The components of this product are reported in the following inventories:

**DSL** All components of this product are on the Canadian DSL  
**TSCA** On TSCA Inventory

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For information on the country notification status for other regions please contact the manufacturer's regulatory group.

### Inventory Acronym and Validity Area Legend:

TSCA (USA), DSL (Canada), NDSL (Canada)

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## SECTION 16. OTHER INFORMATION

### Further information

### NFPA:

HEALTH	3
FLAMMABILITY	1
INSTABILITY	0
SPECIAL HAZARD.	

0 = not significant, 1 =Slight,

2 = Moderate, 3 = High

4 = Extreme

### HMIS III:

HEALTH	3
FLAMMABILITY	1
PHYSICAL HAZARD	0

0 = not significant, 1 =Slight,

2 = Moderate, 3 = High

4 = Extreme, \* = Chronic

---

## OSHA - GHS Label Information:

Hazard pictograms



Corrosion

Signal word

: **Danger:**

Hazard statements

: Causes severe skin burns and eye damage.

Precautionary statements

:

# SAFETY DATA SHEET

## ZEP PROFESSIONAL HEAVY-DUTY DEGREASER 1GL 4CT

Version 1.1

Revision Date 10/01/2023

Print Date 07/14/2025

**Prevention:** Wash skin thoroughly after handling. Wear protective gloves/ protective clothing/ eye protection/ face protection.

**Response:** IF SWALLOWED: Rinse mouth. Do NOT induce vomiting. IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower. IF INHALED: Remove person to fresh air and keep comfortable for breathing. Immediately call a POISON CENTER/doctor. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER/doctor. Wash contaminated clothing before reuse.

**Disposal:** Dispose of contents/container in accordance with local regulation.

Version:	1.1
Revision Date:	10/01/2023
Print Date:	07/14/2025

We believe the statements, technical information and recommendations contained herein are reliable, but they are given without warranty or guarantee of any kind. The information in this document applies to this specific material as supplied. It may not be valid for this material if it is used in combination with any other materials. Users should make their own investigations to determine the suitability and applicability of the information for their particular purposes. This SDS has been prepared by the Compliance Services organization supporting this manufacturer, supplier or distributor.

### ADDITIONAL ITEMS USED FOR CLEANING BY POWER WASHING AND MORE:

Chlorine – 7782-50-5

Water – 7732-18-5



September 30, 2025

### **List of Pressure Washing Equipment - 9 trucks**

- **1,200 Gallon Water Tank**
- **200 Gallon Cleaning Solution Tank**
- **40 Gallon Auxiliary Tank**
- **100 Gallon 'Secret Sauce' Solution Tank**
- **200 Degree Hot Water Heaters (2)**
- **16' Flatbed Truck with DOT/MOT lights**
- **Soft Wash, Pressure Wash and Power Washing**
- **Proportion system to apply the correct amounts of cleaning solution and concentration.**
- **Trained & Experienced Technicians**
- **Uniformed Technicians – Field supervisor plus technicians with every job**
- **White glove service with all jobs.**
- **Available 24/7 - 365 Days A Year!**

### **Materials Used for Cleaning:**

**10% chlorine, 40% surfactant degreaser and water** (hot and cold). All water is brought on-site in our trucks. We do pressure, soft and power washing techniques as required by each job. No splash or spray. This is state of the art equipment, no splash or spray, zebra stripes are removed and this equipment saves time and money because of its industrial sized equipment.

## **Vehicles and Equipment DETAILS**

Power Washing And More's trucks are best equipped in the industry. Our state-of-the-art equipment is manufactured to our exact standards. Few power washing companies have the quality, amount, and size of our surface cleaners. All our trucks are manufactured for our specific end-users.

Our 48, 60, and 72 inch surface cleaners are made so that specific walkway/surfaces are cleaned in one pass (instead of several passes). This process does not leave distasteful "stripes" on the surface. Our 36, 30, 24 and 20 inch surface cleaners are manufactured for the same specific purpose. Our unique gutter swale cleaners can clean (with superior results) miles of swales/curbing per day.

Our hoses can reach more than 1,000 feet from our trucks so, that no area is inaccessible to clean.

Hot water (200+ degrees) is our "secret" to achieving quality results. Hot water will remove dirt and grime and will kill mold/mildew/algae at its root. Cold water alone washes away the surface material leaving the root of the spores. The spores will immediately start to regrow after the cold-water cleaning.

Power Washing And More's typical process includes...

- Applying a cleaning solvent as a pre-wash to loosen the surface dirt/grime/spores
- Hot Water power wash/soft wash
- Rinse surfaces with clean water
- Apply an algaecide to prevent the mold/mildew/algae from immediately growing back

Each truck is equipped with the following:

- 2-custom 24 HP hot water pumps, each producing 200+ degree hot water, 9 gallons per minute @3,500 PSI
- 1-24 HP cold water power washer unit producing 8 gallons per minute at 3,500 PSA
- 72, 60, 48, 30, 24, and 20 inch wide surface cleaners which disperse the high pressure so that there is no damage to the surface that is being cleaned
- 3-operator work stations with up to 1,000 feet of high-pressure hose
- 1-1,035-gallon water tank filled out to fill from water hydrants in 10-15 minutes
- 1-400-gallon tank of cleaning solution
- 1-30-gallon tank of de-greasing solution
- DOT flashing lights and high intensity flood lights

- Our trucks are pristine and serviced regularly to optimize all functions 24/7/365



**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000011235

**Entity Name:** POWER WASHING AND MORE LLC**Current Principal Place of Business:**1246 HAMMONDVILLE RD  
POMPANO BEACH, FL 33069**Current Mailing Address:**49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US**FEI Number:** 86-1254799**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PESKIN, SCOTT F  
49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	PESKIN, SCOTT F
Address	160 SE 12 COURT
City-State-Zip:	POMPANO BEACH FL 33060

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SCOTT PESKIN**PRESIDENT**

02/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date



**City of Coral Gables  
Finance Department/Procurement Division**

**Employer E-Verify Affidavit**

By executing this affidavit, the undersigned employer verifies its compliance with F.S. 448.095, stating affirmatively that the individual, firm or corporation has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in F.S. 448.095 which prohibits the employment, contracting or sub-contracting with an unauthorized alien. The undersigned employer further confirms that it has obtained all necessary affidavits from its subcontractors, if applicable, in compliance with F.S. 448.095, and that such affidavits shall be provided to the City upon request. Failure to comply with the requirements of F.S. 448.095 may result in termination of the employer's contract with the City of Coral Gables. Finally, the undersigned employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

86-1254799

Federal Work Authorization User Identification Number

01/04/2021

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on Nov. 10, 2025        in Pompano Beach        (city), FL        (state).

**ALL NOTARY ITEMS ARE SENT IN AN ATTACHMENT PDF**

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME  
ON THIS THE        DAY OF       , 20       .

NOTARY PUBLIC  
My Commission Expires:

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000011235

**Entity Name:** POWER WASHING AND MORE LLC**Current Principal Place of Business:**1246 HAMMONDVILLE RD  
POMPANO BEACH, FL 33069**Current Mailing Address:**49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US**FEI Number:** 86-1254799**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PESKIN, SCOTT F  
49 N. FEDERAL HWY  
SUITE 410  
POMPANO BEACH, FL 33062 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

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Name	PESKIN, SCOTT F
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City-State-Zip:	POMPANO BEACH FL 33060

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**SIGNATURE:** SCOTT PESKIN

PRESIDENT

02/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date



Power Washing And More has a total of 9 trucks.

CITY OF CORAL GABLES

CORAL GABLES PROJECTS

NAME: The Highmark Residential – The Palmer Dadeland I & II

SCOPE OF WORK: Exterior power washing of all buildings

AWARDED: Yes, Power Washing And More - \$80,000.00

EFFECTIVE DATE: January 2025+

PROJECT MANAGER NAME: Isis Andrade – [ThePalmerDadelandACD2@highmarks.com](mailto:ThePalmerDadelandACD2@highmarks.com) – 786-829-7876.

STATEMENT: Power Washing And More was the prime contractor.

RESULTS: Excellent work in revitalizing the exterior of these two complexes.

NAME: Gables Grand Plaza

SCOPE OF WORK: 8 story building to clean exterior, parking and window rise.

AWARDED: Yes, Power Washing And More - \$46,748.00

EFFECTIVE DATE: January 2025

PROJECT MANAGER NAME: Marla Diaz – 786-839-0323,  
[GablesGrandPlazaCD@HighmarkRes.com](mailto:GablesGrandPlazaCD@HighmarkRes.com)

STATEMENT: Power Washing And More was the prime contractor.

RESULTS: Excellent work in revitalizing the building and grounds.



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/30/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERs NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Silvester Insurance Advisors, Inc. 5100 PGA Blvd Ste 317 Palm Beach Gardens, FL 33418	CONTACT NAME: PHONE (A/C, No, Ext): (561) 202-6186	FAX (A/C, No): (561) 202-6187	
	E-MAIL ADDRESS: michelle@greatfl.net		
INSURED Power Washing And More, LLC DBA Green Earth Powerwashing WCF, LLC 1246 Hammonville Road Pompano Beach, FL 33069	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Geico County Mutual Insurance Company		29181
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

**COVERS** **CERTIFICATE NUMBER:** **REVISION NUMBER:**  
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR			9300113136	2/11/2025	2/11/2026	EACH OCCURRENCE	\$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
	OTHER:						MED EXP (Any one person)	\$
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						PERSONAL & ADV INJURY	\$
	X HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						GENERAL AGGREGATE	\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						PRODUCTS - COMP/OP AGG	\$
	DED <input type="checkbox"/> RETENTION \$						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A	BODILY INJURY (Per person)	\$				
			BODILY INJURY (Per accident)	\$				
			PROPERTY DAMAGE (Per accident)	\$				
				\$				
			EACH OCCURRENCE	\$				
			AGGREGATE	\$				
				\$				
			PER STATUTE	OTHE- R				
			E.L. EACH ACCIDENT	\$				
			E.L. DISEASE - EA EMPLOYEE	\$				
			E.L. DISEASE - POLICY LIMIT	\$				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	CANCELLATION
City of Coral Cables Insurance Compliance PO BOX 100085 CE Duluth, GA 30096	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/28/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERs NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER VioletBerri, LLC 1475 S Price Rd, Chandler, AZ 85286	CONTACT NAME: Colleen DeWitt	
	PHONE (A/C, No. Ext): (800) 409-8958	FAX (A/C, No.):
INSURED RMI Management III, LLC L/C/F Powerwashing And More LLC DBA: Green Earth Powerwashing 1475 S. Price Road Chandler AZ 85286	E-MAIL ADDRESS: certs@vensure.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Midwest Employers Casualty Company	23612
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

## COVERAGEs

CERTIFICATE NUMBER: 10292223

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR						EACH OCCURRENCE	\$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
	OTHER:						MED EXP (Any one person)	\$
	AUTOMOBILE LIABILITY ANY AUTO						PERSONAL & ADV INJURY	\$
	OWNED AUTOS ONLY HIRED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY					GENERAL AGGREGATE	\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					PRODUCTS - COMP/OP AGG	\$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					OTHER:	\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N	N/A	KEYPE00002502	09/09/2025	09/09/2026	COMBINED SINGLE LIMIT (Ea accident)	\$
	E.L. EACH ACCIDENT	\$ 1,000,000						
	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000						
	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000						

## DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Coverage provided for all leased employees but not subcontractors of: Powerwashing And More LLC DBA Green Earth Powerwashing.

Client Effective: 09/09/2023.

Waiver of Subrogation in favor of certificate holder, as per written contract, while work is performed at or in: FL - Florida.

## CERTIFICATE HOLDER

## CANCELLATION

FL - Florida

CITY OF CORAL GABLES INSURANCE COMPLIANCE  
PO BOX 100085 CE  
DULUTH GA 30096

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Daniel Opferman

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**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

**Schedule**

Any Party with whom the insured,  
agrees to waiver of subrogation in a written contract.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated. <sup>10292223</sup>

**(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)**

Endorsement Effective Date: 09/09/2025 Policy No. KEYPE000002502 Endorsement No.

Policy Effective Date: 09/09/2025 to 09/09/2026 Premium \$

Insured: Vensure HR Inc

DBA:

Carrier Name / Code: Midwest Employers Casualty Company

**WC 00 03 13**

Countersigned by \_\_\_\_\_

(Ed. 4-84)

## Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

### POWERWASHING AND MORE LLC

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor    C corporation    S corporation    Partnership    Trust/estate  
 LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) **S**

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

Other (see instructions)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions

5 Address (number, street, and apt. or suite no.). See instructions.

Requester's name and address (optional)

49 N. Federal Hwy Suite 410

6 City, state, and ZIP code

Pompano Beach FL 33062

7 List account number(s) here (optional)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the United States.)

Print or type.  
See Specific Instructions on page 3.

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>

or

Employer identification number								
8	6	-	1	2	5	4	7	9

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here      Signature of U.S. person

Date

10/8/25

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they