



# LANDSCAPE WORKSHOP®

---

**For: Grand Panama Beach Resort – Panama City, FL**  
Our 2025-26 Landscape Maintenance Proposal

---

*September 4, 2025*



Proactive Management 🌿 Dedicated Professionals 🌿 Quality Service

September 4, 2025



**Grand Panama Beach Resort Condominium Association, Inc.**  
c/o FirstService Residential  
Ms. Lindsay Williams - CAM  
11800 Front Beach Road  
Panama City Beach, FL 32407

Dear Lindsay,

Thank you for allowing Landscape Workshop to prepare and present our proposal for landscape maintenance & grounds management services at **Grand Panama Beach Resort** condominiums.

Since 1984, "LW" has built its reputation as one of the leading commercial landscape services companies in the United States. With headquarters in Birmingham, AL and over 20 branch operations serving clients across the Southeast – *we bring out the best in every property!*

Landscape Workshop is a commercial properties focused, full-service company. In addition to scheduled turf, shrubbery, floral PLUS irrigation system maintenance - we also provide complete landscape design & installation services. There are numerous "**differentiators**" setting us apart from other companies in the industry. We've tried to highlight them here in our proposal.

Should our quoted services not totally meet your exact requirements, we would welcome the opportunity to have further dialogue to explore our proposed Schedule Of Services specifications. With the objective of creating a more customized package of services that will help you to best realize your landscaping goals, while meeting your budget requirements.

Thank you, again. We're eager to earn your business and look forward to *partnering* with you.



**GREG WHITACRE**  
Business Development Manager  
850-598-1740 cell  
[gwhitacre@landscapeworkshop.com](mailto:gwhitacre@landscapeworkshop.com)



**AUSTIN MCCLURE**  
Branch General Manager  
205-306-4927 cell  
[amccclure@landscapeworkshop.com](mailto:amccclure@landscapeworkshop.com)



**BAILEY BRANHOF**  
Your Dedicated Account Manager  
850-533-4725 cell  
[bbranhof@landscapeworkshop.com](mailto:bbranhof@landscapeworkshop.com)

**PROUD MEMBERS OF:**



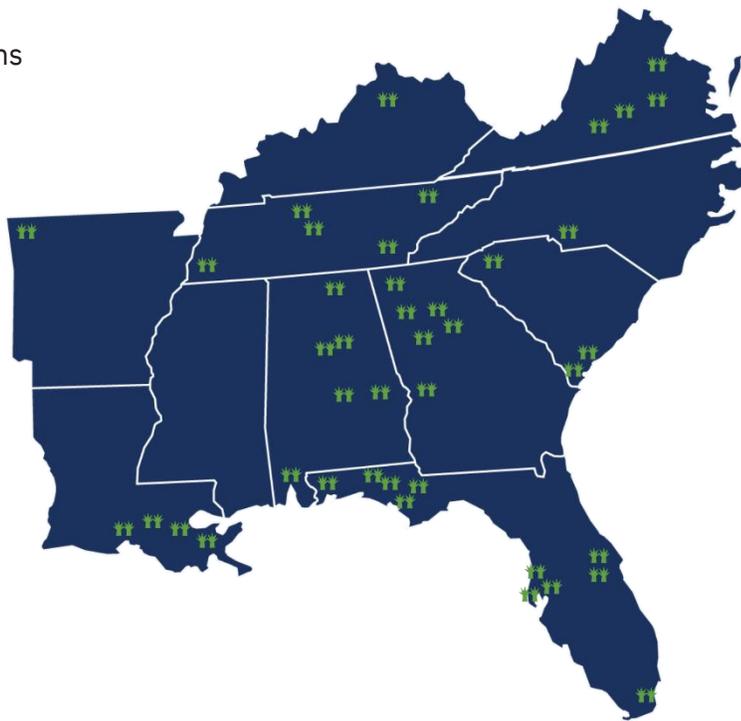
# ABOUT "LW"...

Landscape Workshop is a full-service grounds maintenance provider for commercial properties and managed residential communities all across the Southeast. Our reputation for excellence is driven by our carefully-cultivated team of professionals, which includes degreed horticulturalists, career landscape industry leaders, irrigation technician specialists and hundreds of full-time W-2, highly trained crew members.

As one of the Top-50 ranked landscape companies in the U.S., our LW footprint includes all of Alabama and Tennessee and expands into parts of Georgia, Kentucky, Mississippi, Louisiana, South Carolina, Arkansas and the Florida Panhandle. We continue to expand our operational reach every day.

As a trusted industry leader since 1984, we have been maintaining commercial landscapes and providing superior customer service for decades. Our comprehensive lines of service offering includes landscape maintenance & design, award-winning seasonal color programs, irrigation system installation & maintenance, facility services, as well as landscape "design & build" services.

With multiple locations throughout the Southeast, LW has the resources to consistently deliver superior landscape services across our footprint. Our clients with multiple properties in the Southeast have the benefit of contracting with one landscape partner.



## WE'RE PROUD TO SERVE THESE REGIONAL CLIENTS:



# THE "LW" WAY...



## PROACTIVE MANAGEMENT

*PERCEPTIVE & PROMPT*

LW proactively informs customers about their properties' needs with focused attention and frequent communication. Clients are able to leave the worry to us.



## DEDICATED PROFESSIONALS

*PASSIONATE ABOUT LANDSCAPING*

LW's team of highly trained professionals is the foundation of our success. We empower team members to address all landscaping needs quickly and efficiently.



## QUALITY SERVICE

*COMMITTED TO EXCELLENCE*

LW is consistently recognized for providing comprehensive commercial landscape services and solutions that exceed our clients' expectations.

Landscape Workshop employees are held to the highest standards. From our crews in the field to our corporate culture, **we pride ourselves on our professionalism**. We enforce strict conduct measures to ensure a first-class experience at every property and to keep our employees and clients safe at all times.

Professional Crews  
Dedicated Point of Contact  
E-verified, Full-time Employees  
Background Checks

Consistent Safety Training  
Property Quality Audits  
Uniformed Employees

No Smoking or Headphones  
Neat & Clean Vehicles  
State-of-the-Art Technology  
Insured & Compliant



# COMMERCIAL PORTFOLIO *representative clients*

## ALABAMA

### BIRMINGHAM

Children's Hospital of Alabama  
Cahaba Grand Office Park  
The Summit\*  
UAB Midwest Emergency Room

### GULF COAST

City of Foley (*floriculture*)  
So. Baldwin Regional Med Center  
OWA  
Tanger Outlets

### HUNTSVILLE

Magnolia Trace  
Redstone Gateway\*

### MONTGOMERY/AUBURN

Alfa Alabama Headquarters  
Hampstead  
The National Memorial for Peace  
and Justice\*  
The Waters HOA

## KENTUCKY

### LEXINGTON

Blue Bell Creameries  
Island HOA  
Rabbit Run Apartments



## GEORGIA

### ATLANTA

Atlanta Gas Light  
In Town Suites

## TENNESSEE

### KNOXVILLE

American Honda Motor Corp. Plant  
Shannondale of Maryville  
Siemens  
The Pinnacle at Turkey Creek\*

### MEMPHIS

Baptist Memorial Hospital  
Memphis University School  
SW Tennessee Community College

### NASHVILLE

Airpark Business Center  
Bass Pro Shops Opry Mills  
Brookside Apartments  
Tennessee Society of CPAs

## FLORIDA

### EMERALD COAST

Bluewater Bay – Niceville (*select communities*)  
Edgewater Beach Resort - Miramar Beach  
Emerald Shores - Miramar Beach  
High Pointe Resort – 30A  
Kelly Plantation – Destin  
One Water Place - Destin  
Rosemary Beach – 30A  
Seaside - 30A  
Silver Shells - Destin  
Swift Creek - Niceville  
The Sanctuary 331 - Santa Rosa Beach  
Watersound – 30A

## REGIONAL CLIENTS

Baumhower's Victory Grilles  
Blue Cross/Blue Shield of Alabama  
Cadence Bank  
Centennial - Retail Real Estate Mgmt.  
Cracker Barrel Restaurants  
QuikTrip Convenience Stores

\* *Recipients of the National Association of Landscape Professionals Award of Excellence*  
*Be sure to visit [LandscapeWorkshop.com](http://LandscapeWorkshop.com) to see more of our award-winning work.*

## EMERALD COAST BRANCH REFERENCES *our clients say it best*



### **EMERALD SHORES HOA**

Ms. Amanda Taylor  
850-855-3347 office  
[amanda.taylor@vacasa.com](mailto:amanda.taylor@vacasa.com)

*The work quality is outstanding and they communicate well with their clients.*

• **CB RICHARD ELLIS** •



### **KELLY PLANTATION POA**

Mr. David Bell  
850-654-5478 office  
[david@virtuousmg.com](mailto:david@virtuousmg.com)

*Their industry knowledge, commitment to providing the best service available, and ability to handle any project in a timely manner is always on point.*

• **COLONIAL COMMERCIAL REALTY** •



### **THE SANCTUARY 331**

Ms. Lisa Smith  
850-374-5250 office  
[thesanctuarymgr@cushwake.com](mailto:thesanctuarymgr@cushwake.com)

*Going forward there is no doubt in my mind, as we acquire more properties, who our landscape company will be.*

• **CORPORATE REALTY** •

# SCHEDULE OF SERVICES for: *Grand Panama Beach Resort - PCB*

*This schedule is an approximation. Actual number of visits could be impacted by weather and/or plant growth.*

| <b>41 Property Visit Plan</b>   | <b>JAN</b> | <b>FEB</b> | <b>MAR</b> | <b>APR</b> | <b>MAY</b> | <b>JUN</b> | <b>JUL</b> | <b>AUG</b> | <b>SEP</b> | <b>OCT</b> | <b>NOV</b> | <b>DEC</b> | <b>TOTAL</b> |
|---|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|--------------|
| Total Base Property Visits  | 2          | 2          | 2          | 5          | 4          | 5          | 4          | 4          | 5          | 4          | 2          | 2          | 41           |
| <b>ANNUAL SERVICES</b>  |            |            |            |            |            |            |            |            |            |            |            |            |              |
| Mowing of Turf Areas  | 2          | 2          | 2          | 5          | 4          | 5          | 4          | 4          | 5          | 4          | 2          | 2          | 41           |
| Edging ( <i>both hard &amp; soft lines</i> )  | 2          | 2          | 2          | 5          | 4          | 5          | 4          | 4          | 5          | 4          | 2          | 2          | 41           |
| Weeding of Beds & Grounds Policing  | 2          | 2          | 2          | 5          | 4          | 5          | 4          | 4          | 5          | 4          | 2          | 2          | 41           |
| Debris Removal & Blowing  | 2          | 2          | 2          | 5          | 4          | 5          | 4          | 4          | 5          | 4          | 2          | 2          | 41           |
| <b>SHRUB &amp; TREE SERVICE</b>   |            |            |            |            |            |            |            |            |            |            |            |            |              |
| General Pruning ( <i>up to 10 ft. as needed</i> )   | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 12           |
| <b>INCLUDED TURF &amp; PLANT HEALTHCARE PROGRAM</b>   |            |            |            |            |            |            |            |            |            |            |            |            |              |
| Turf, Shrub, Floral Chemical Applications<br>( <i>scheduled turf fertilization plus pre/post emergent weed control with insecticide, pesticide, fungicide treatment as needed</i> ) |            |            | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          |            |            | 8            |
| <b>INCLUDED IRRIGATION SYSTEM MANAGEMENT</b>  |            |            |            |            |            |            |            |            |            |            |            |            |              |
| Complete Irrigation System Inspection(s)  |            | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          | 1          |            | 10           |
| <b>OPTIONAL SEASONAL SERVICES (* actual month TBD)</b>  |            |            |            |            |            |            |            |            |            |            |            |            |              |
| 2x Pine Straw Installation(s)   |            |            | *          |            |            |            |            |            |            | *          |            |            | 2            |
| 1x Hardwood Mulch Installation  |            |            |            | *          |            |            |            |            |            |            |            |            | 1            |
| 2x Seasonal Color Installation ( <i>including maintenance</i> )   |            |            | *          |            |            |            |            |            |            | *          |            |            | 2            |
| 1x Palm Tree Pruning ( <i>including debris removal</i> )  |            |            |            |            |            | *          |            |            |            |            |            |            | 1            |

# LANDSCAPE MANAGEMENT INVESTMENT for: *Grand Panama Beach Resort*

Below is our proposal for your customized annual maintenance program per the scope outlined.

| LANDSCAPE MAINTENANCE INVESTMENT - 41 Property Visit Plan  |                    |                    |
|--|--------------------|--------------------|
| SERVICE  | MONTHLY INVESTMENT | ANNUAL INVESTMENT  |
| Landscape Maintenance ( <i>including Turf &amp; Plant Healthcare Program plus Irrigation System Management</i> ) | \$1,876.00         | \$22,512.00        |
| <b>TOTAL</b>   | <b>\$1,876.00</b>  | <b>\$22,512.00</b> |

| <b>OPTIONAL SEASONAL SERVICES</b> ( <i>billed separately or can be estimated &amp; added to monthly amount above</i> ) |                       |
|--|-----------------------|
| SERVICE  | PER OCCURRENCE        |
| 2x Pine Straw Installation   | \$9.65/bale installed |
| 1x Hardwood Mulch Installation   | \$9.95/bag installed  |
| 2x Seasonal Color Installation ( <i>including maintenance</i> )  | \$7.50/bed sqf        |
| 1x Palm Tree Pruning ( <i>including debris removal &amp; dump fees</i> )   | \$43.00/tree          |

# CONTRACT

## Annual Landscape Maintenance Service

### *term of agreement, cancellation, even monthly payments, and equalization fee*

The Term of the contract for Annual Landscape Maintenance Services shall be for a period of twelve (12) months. This Landscape Maintenance Services contract may be canceled by either party effective sixty (60) days from receipt of written notice from the other party. Although the payment schedule for these services is pro-rated into twelve (12) equal monthly installments for Customer's convenience, the actual cost of the Landscape Maintenance Services are substantially higher during the growing season months. Therefore, if during the twelve-month contract period this contract is canceled by the Customer for any reason, the Customer agrees to pay the Contractor any amount (the "equalization fee") above and beyond the amounts already paid for the actual work performed. The chart below illustrates the percent of the contract's value performed in each month. Enhancement services included in monthly installments, such as seasonal color and mulch, are not included in the chart and will be added to the value performed for purposes of calculating the equalization fee if the work has been completed. For example, if a contract without enhancement services begins on January 1 and is canceled after its tenth month, 89% of the annual work will have been performed but only 83.3% of the annual contract value will have been billed. The equalization fee charged to the Customer will be 5.7% of the annual contract value.

| JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC | TOTAL |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| 4%  | 7%  | 8%  | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 6%  | 5%  | 100%  |

## Annual Facility (Sweeping, Portering, And Outdoor Janitorial) Services

### *term of agreement and cancellations*

The Term of the contract for Annual Facility Services shall be for a period of twelve (12) months. The Facility Services contract may be canceled by either party effective sixty (60) days from receipt of written notice from the other party. Because the cost structure of Facility Services is not seasonal, there is no equalization fee for cancellation of Facility Services at any time.

## Automatic Renewal

In the event the Customer does not provide Contractor with 60-days written notice of their intent to discontinue services on the annual expiration date, this contract will automatically renew itself year-to-year under the same terms and conditions herein until canceled by either party upon 60-days written notice. After one full calendar year of service the next and subsequent renewal prices will be increased by the same percent as the increase in the US Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) for the previous year, which can be found on a monthly basis at [bls.gov/cpi/latest-numbers.htm](http://bls.gov/cpi/latest-numbers.htm). Landscape Workshop will provide at least 60 days written notice of the Annual Increase to the Customer.

## Payments

All payments for Services provided under this contract are due and payable on the first day of each month. Terms are NET THIRTY (30) DAYS. Balance Due not paid by the thirtieth (30th) day of the month will be charged a late fee of 1.5% per month beginning forty (40) days after the invoice date. In the event that it is necessary for Contractor to employ an attorney or collection agency to collect any monies owed by Customer under the terms of this contract, or if Contractor incurs any expense in the exercise of any rights hereunder, Customer agrees to pay all reasonable attorney fees, charges made by the collection agency, or any expense of Contractor incurred as a result of the Customer default. Amounts outstanding at the time of termination shall become immediately due and payable. Customer must pay all invoices in full by the due date to avoid any interruption in services. Contractor may suspend services as a result of any amounts that are past due. If the Customer is not current with all payments and services are interrupted, this contract will remain in place and once payments are current, services will resume as normal.

# CONTRACT

## Workmanship And Customer's Duty To Inspect Work

Work shall be performed in a workmanlike manner according to standard practices. Contractor reserves the right to assign or subcontract any part of this work. Customer has a duty to inspect the property or properties described herein within three (3) days after any services performed. If the Customer has reasonable cause for dissatisfaction with the work performed, written notice of such dissatisfaction shall be provided to Contractor within five (5) days from the completion of services. Contractor shall then have ten (10) days to repair or correct such work at no additional cost to Customer. Customer's failure to properly notify Contractor of any dissatisfaction of any work called for under this Agreement shall constitute a waiver of any claim or offset. Customer may have in regards to the services rendered by Contractor under this contract.

## Liability, Insurance, Choice Of Law, Pricing, Scope of Services, and Other Provisions

Contractor will carry worker's compensation, automobile liability, and comprehensive general liability insurances for the duration of this contract and upon request will provide a certificate of insurance. Contractor is an independent contractor and Customer assumes no liability for injury to the Contractor or the Contractor's agents, servants, or employees. Contractor is not responsible for additional services required as a result of storms, freezes, hurricanes, tornadoes, special events and gatherings, vandalism, theft, fire, Acts of God, etc. The Customer specifically agrees not to employ any employees of Contractor while they are under the employment of Contractor or for a six (6) month period after they leave the employment of Contractor. The "Investment" page accompanying this contract lays out the agreed upon pricing for the contracted services and is incorporated into this contract, as is the attached Schedule of Services. It shall be understood that any liability of the Contractor shall in all circumstances be limited to the one year value of this agreement. This agreement shall be governed by the laws of the state in which the property being serviced is located. Note that all landscaping services provided in Kentucky are subject to a 6% sales tax and certain landscape installation services provided in Mississippi are subject to a 7% sales tax. All sales taxes will be added to the customer's invoice. *(If service starts prior - billing prorated) (+ Optional Seasonal Services - as proposed)*

Contract Start Date: 10 / 01 / 2025

Total Annual Investment: \$ 22,512.00  
(\$ 1,876.00/mo.)

Customer Authorized Signature

Landscape Workshop Authorized Signature

Print Name

Austin McClure

Print Name

Title

GM - Emerald Coast Branch

Title

Grand Panama Beach Resort Condo  
Customer Company Name  
Association, Inc.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If there are contacts other than listed above, please let us know who they are

Property Contact Name: Ms. Lindsay Williams - CAM Phone #: 850-585-7015 cell

Email: Lindsay.Williams@fsresidential.com

AP Contact Name: same Phone #: same

Email: same

Do you prefer invoices mailed or emailed? emailed



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/18/2025

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).

| <b>PRODUCER</b><br>Edgewood Partners Insurance Center<br>1140 Avenue of the Americas, 8th Floor<br>New York NY 10036<br><br>License#: 0B29370 | <b>CONTACT</b> Certificate Unit<br><b>NAME:</b><br><b>PHONE (A/C, No, Ext):</b> 404-781-1700 <b>FAX (A/C, No):</b><br><b>E-MAIL:</b> certificate@epicbrokers.com<br><b>ADDRESS:</b>  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
|---|--|--|-------------------------------|--------|--|-------|--|-------|--|-------|--------------------|--|--------------------|--|--------------------|
|   | <table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td><b>INSURER A :</b> Pennsylvania Manufacturers Assoc Ins Co</td> <td>12262</td> </tr> <tr> <td><b>INSURER B :</b> StarStone Specialty Insurance Company</td> <td>44776</td> </tr> <tr> <td><b>INSURER c :</b> Travelers Excess and Surplus Lines Co</td> <td>29696</td> </tr> <tr> <td><b>INSURER D :</b></td> <td></td> </tr> <tr> <td><b>INSURER E :</b></td> <td></td> </tr> <tr> <td><b>INSURER F :</b></td> <td></td> </tr> </tbody> </table> |  | INSURER(S) AFFORDING COVERAGE | NAIC # | <b>INSURER A :</b> Pennsylvania Manufacturers Assoc Ins Co | 12262 | <b>INSURER B :</b> StarStone Specialty Insurance Company | 44776 | <b>INSURER c :</b> Travelers Excess and Surplus Lines Co | 29696 | <b>INSURER D :</b> |  | <b>INSURER E :</b> |  | <b>INSURER F :</b> |
| INSURER(S) AFFORDING COVERAGE   | NAIC #   |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER A :</b> Pennsylvania Manufacturers Assoc Ins Co  | 12262  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER B :</b> StarStone Specialty Insurance Company  | 44776  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER c :</b> Travelers Excess and Surplus Lines Co  | 29696  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER D :</b>  |  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER E :</b>  |  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURER F :</b>  |  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |
| <b>INSURED</b><br>Landscape Workshop, LLC<br>550 Montgomery Hwy, Suite 300<br>Vestavia Hills AL 35216-1844<br><br>LANDWOR                     |  |  |                               |        |  |       |  |       |  |       |                    |  |                    |  |                    |

**COVERAGES**

CERTIFICATE NUMBER: 713275147

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        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |          | 3024751482280  | 8/15/2024               | 8/15/2025               | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 4,000,000<br>PRODUCTS - COMP/OP AGG \$ 4,000,000<br>\$ |
| A        | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY  |           |          | 1524751482280  | 8/15/2024               | 8/15/2025               | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
| B        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED RETENTION \$  |           |          | 81642V241ALI   | 8/15/2024               | 8/15/2025               | EACH OCCURRENCE \$ 2,000,000<br>AGGREGATE \$ 2,000,000<br>\$  |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   |           |          | 2024751482280  | 8/15/2024               | 8/15/2025               | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000  |
| C        | Excess Liability  |           |          | EX1X50358924NF | 8/15/2024               | 8/15/2025               | Each Occurrence 7,000,000<br>Aggregate 7,000,000  |

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

**CERTIFICATE HOLDER****CANCELLATION**

|   |   |
|---|---|
| Landscape Workshop LLC<br>550 Montgomery Hwy., Suite 200<br>Vestavia Hills AL 35216 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|---|---|

© 1988-2015 ACORD CORPORATION. All rights reserved.

## 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.

|  |  |   |
|--|--|---|
| Print or type.<br>See Specific Instructions on page 3. | <p><b>1</b> 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.)</p> <p>Landscape Workshop Parent, LLC</p>  |   |
|  | <p><b>2</b> Business name/disregarded entity name, if different from above.</p> <p>Landscape Workshop, LLC</p>   |   |
|  | <p><b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor    <input type="checkbox"/> C corporation    <input type="checkbox"/> S corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input checked="" type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <u>P</u></p> <p><b>Note:</b> 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.</p> <p><input type="checkbox"/> Other (see instructions)</p> | <p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p> |
|  | <p><b>3b</b> 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 . . . . . <input type="checkbox"/></p>   |   |
|  | <p><b>5</b> Address (number, street, and apt. or suite no.). See instructions.</p> <p>550 Montgomery Highway, Ste 200</p>  | Requester's name and address (optional)   |
|  | <p><b>6</b> City, state, and ZIP code</p> <p>Vestavia Hills, AL 35216</p>  |   |
|  | <p><b>7</b> List account number(s) here (optional)</p>   |   |

### 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.

|                                       |   |   |   |   |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|
| <b>Social security number</b>         |   |   |   |   |   |   |   |   |   |
|                                       |   |   |   |   |   |   |   |   |   |
| <b>or</b>                             |   |   |   |   |   |   |   |   |   |
| <b>Employer identification number</b> |   |   |   |   |   |   |   |   |   |
| 8                                     | 5 | - | 2 | 8 | 6 | 7 | 8 | 9 | 0 |

**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.

### 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.

|                  |                          |                       |
|------------------|--------------------------|-----------------------|
| <b>Sign Here</b> | Signature of U.S. person | Date <u>4/30/2024</u> |
|------------------|--------------------------|-----------------------|

## 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



*a leader in the*  
**GREEN  
INDUSTRY**  
• SINCE 1984 •



**Landscape Workshop - Emerald Coast Branch**  
**489 Valparaiso Parkway Valparaiso, FL 32580**  
**8030 FL Hwy 77 Southport, FL 32409**