#### **BID PROPOSAL CHECKLIST:**

# Medina River Sewer Outfall - Segment 6 Project **SAWS Job No. 10-2502**

Solicitation No.: B-10-034-DD

## Mandatory items to be submitted with the Bid Packet for the above-referenced project:

Bid proposal

**Proposal Certification** 

Conflict of Interest Questionnaire (Form CIQ)
Letter of Insurance Verification and/or sample Certoricate of Insurance verifying insurance coverage
Bidder's Certifications (WRD-255)
Vendor Compliance

Financial Statement prepared with the last twelve (12) months by an

independent Certified Public Accountant (Instructions to Bidders, page B-7)

Company Information Packet (Instructions to Bidders, page B-7)

Statement Regarding Cability to Complete Project (Instructions to Bidders, page

B-7

Statement & Bidder's Experience (Attachment A)/Record of Performance on three

(3) sinct a projects in the last five (5) years (Instructions to Bidders, page B-7)

Attachment D – Geotechnical Data Report and Geotechnical

Baseline Report Acknowledgement Form

Attachment E – Escrow Bid Documents Acknowledgement Form

#### Items to be submitted with Awarded Contract:

- 1. Contractor's Act of Assurance (TWDB Form ED-103)
- 2. Contractor's Resolution (TWDB Form ED-104)

Job No. 10-2502 Medina River Sewer Outfall, Segment 6 Solicitation No. B-10-034-DD

Date:								

## **BID PROPOSAL**

PROPOSA	AL OF				
A cor	poration				
A par	tnership consisting of				
An in	dividual doing business as				
Pursuant materials San Antor	ANTONIO WATER SYSTEM to Instructions and Invitations to Bi as specified and perform the work renio Water System Job Number 10-25 prices to wit:	equired for the	e constructi	on of pipelines	and appurtenances.
ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY_&	ONIT PRICE (Figures)	TOTAL PRICE (Figures)
1.	Erosion & Sedimentation Controls  Dollars	c.	Pulbos		
2.	Trench Excavation Safety Protection  Dollars	42	1	\$XXXXXXXX	\$
3.	<u>Cents</u>	LF	15,093	\$	\$
	Revegetation  Dollars  Cents	SY	104,025	\$	\$
4.	36" FRP (all oepths)  Dollars  Cents	LF	15,093	\$	. \$
5.	Standard Manhole (Fiberglass)  Dollars  Cents	EA	3	\$	\$
6.	Standard Manhole with Drop Pil (Fiberglass)		Ü	*	· ¥
		- Δ	10	Φ	ф
	<u>Cents</u>	EA	18	\$	\$

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
7.	Standard Manhole Extra Dep	th			
	(Fiberglass) (>15')				
	Dollars Cents	LF	535	\$	\$
	Cents	Li	333	Ψ	. Ψ
8.	Manhole Over Existing Sanitary Sew Lines				
	Dollars			^	
	Cents	EA	1	\$	\$
9.	Fence Gate 16' (Type 1)			of Bios	
	Dollars	ΓΛ	20 6	<b>5</b>	Ф
	Cents	EA	300	Φ	Φ
10.	Remove and Replace Fencing		Son,		
	Cents	AF!	3.600	\$	\$
11.	Fence Gate 16' (Type 1)  Dollars Cents  Remove and Replace Fencing Dollars Cents  Boring or Tunneling for 36" DIA. FRP Dollars Carrier Pipe Installed in Steel Casin and Steel Liner Plate (Sc" DIA. FRP)	40 <sup>t, to</sup>	138	\$	\$_
12.	Carrier Pipe Installed in Steel Casir and Steel Liner Plate (96" DIA. FRP)  Dollars	ng			
	Cents	LF	138	\$	\$
	<b>₹</b> 0.				
13.	Concrete Encasement				
	Dollars Cents	LF	155	\$	\$
		_,	100	Ψ	Ψ
14.	Bypass Pumping				
	<u>Dollars</u>				_
	Cents	LS	1	\$XXXXXXXX	\$
15.	Tree Protection  Dollars				
	Cents	LS	1	\$XXXXXXXX	\$
		-		· <u></u>	·

Job No. 12-2502 Medina River Sewer Outfall, Segment 6 Solicitation No. B-10-034-DD

ITEM	DESCRIPTION & ESTIMATED QUANTITIES			UNIT PRICE	TOTAL PRICE
NO.	(Unit Price to be written in words)	UNIT	QTY	(Figures)	(Figures)
16.	Gravity Sewer Outfall Testing  Dollars  Cents	LF	15,231	\$	\$
17.	Disputes Review Board  Dollars	1.0	·	ф <b>ууууу</b> уу	¢20,000,00
LINE IT	Cents  EM "A"  DTAL BASE BID	Lo	\$	\$XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$30,000.00
18.	Mobilization Percent	LS	305	\$ <u>XXXXXXXX</u>	\$
	(Maximum of 5% of the <u>Line Item "A"</u> Sub-total Base Bid amount)	<i>~</i>	Shirk		
total baand do govern	Mobilization lump sum bid amount sase bid amount. In the event of a collar amount shown for the Machanian in the percentage written exation, SAWS reserves the right light the extension of the bid item	discrephilization xceeds	eancy bet bid item the allow	ween the writ the written p wable maxim	ten percentage percentage will um stated for
LINE ITI	Ijust the extension of the bid item  EM "B"  ZATION SUB TOTAL		<u>\$</u>		
TOTAL	BID AMOUNTO EM "A" + LINE ITEM "B")		<u>\$</u>		
					DOLLARS AND
					CENTS

		BIDDER'S SIGNATURE & TITLE
		FIRM'S NAME (TYPE OR PRINT)
		FIRM'S ADDRESS
		FIRM'S PHONE NO./FAX NO.
		FIRM'S EMAIL ADDRESS
The Contractor herein a	cknowledges receipt	of the following  Signed:
Addendum No	Dated	Signed:
Addendum No	Dated	Signed:
Addendum No	Dated	Signed:
Addendum No	Dated	Sig <b>.yes</b> :
OWNER RESERVES T	HE RIGHT TO ACCE	Signed: Signed
The bidder offers to d	construct the Project	f in accordance with the Contract Documents for the

ontract price, and to complete the Roject with 360 calendar days after the start date, as set forth in the Authorization to Proceed. The Bidder understands and accepts the provisions of the contract Documents relating to lighted damages of the Project if not completed on time.

Complete the additional requirements of the Proposal which are included on the following pages.

# **PROPOSAL CERTIFICATION**

Accompanying this proposal is a Bid Bond or Cer of the San Antonio Water System for	rtified or Cashier's Check on a State or National Bank payable to the Orde dollars (\$
which amount represents five percent $(5\%)$ of the the proposal is accepted and the bidder fails to exo of the Contract, in which case the check shall considered as payment for damages due to delay a	te total bid price. Said bond or check is to be returned to the bidder unless ecute and file a contract within 10 calendar days after the award become the property of said San Antonio Water System, and shall be and other inconveniences suffered by said San Antonio Water System due to the San Antonio Water System reserves the right to reject any and all
acceptance and award of the contract to the under Water System Contract Documents and make Pe <u>10</u> calendar days after the award of the Contract to insure and guarantee the work until final compl payment of all lawful claims for labor performed	proposal within60 calendar days after the bid opening. Upon signed by the Owner, the undersigned shall execute standard San Antonio erformance and Payment Bonds for the full amount of the contract within to secure proper compliance with the terms and provisions of the contract etion and acceptance, and the guarantee period stipulated, and to guarantee and materials furnished in the fulfillment of the contract.
	en Authorization to Proceed within 30 days after the award of the Contract
The Contractor hereby agrees to commence work SAWS of the written Authorization to Proceed. receipt of SAWS issued, written Authorization to days.	under this Contract within seven (7) and and any after issuance by the Under no circumstances shall the work commence prior to Contractor's Proceed. Work shall be completed in full within consecutive calenda tained in the proposal have been carefully checked and are submitted as
The undersigned certifies that the bid prices con correct and final.	tained in the proposal have been carefully checked and are submitted as
In completing the work contained in this propodiscriminate on the grounds of race, color, religion the implementation of these policies and practice.  Signed:	esal the undersigned certifies that bidder's practices and policies do no on, sex or national origin and that the bidder will affirmatively cooperate in es.
Signed	M Common Parameterina
°6 O	Company Representative
reience	Company Name
rot be.	
	Address
Please return bidder's check to:	
	Company Name
	Address



# GOOD FAITH EFFORT PLAN FOR CONSTRUCTION SUB-CONTRACTS FOR

NAME OF PROJECT:

SECTION A - C Name of Firm:	ONTRA	CTOR INFORI	MATIO	ON:				
Address:								
City:				State:		٩	Zip: _	
Contact Perso	n:			Telephone:	· — ;	,ddii		
Email Address	s:							
Is your firm Ce	ertified:	Yes	No:	If certifi	ed, Certif	ication	Number:	
Type of Certific	cation:	AABE		State: State: If certifi DIBEO VBB	ME HU	BE _ JB _	WBE DBE	
1. List ALL SUB	CONTRA	ACTORS/SUPF	PLIER	رم) الانتخاصة (Shat will be ut	tilized on th	nis proje	ct/contract.	
Name & Address of Company	Scope of be Perfo	of Work/Supplie ormed/Provide	es to d.tv	Estimated Co Amount or Projec	ontract n this	If Firm i	s Certified, cation Num copy of Cer Affidavit	, Provide ber and
1.		Firm O					Amaavit	
2.	<i>₹</i> 0 <sup>7</sup>	<b>₹</b> °						
3.								
4.								
5.								
6.								

#### **SECTION B. – SMWB COMMITMENTS**

The SMWB goal on this project is 17%

1.	The undersigned contractor has satisfied the requirements of the BID specification in the manner (please check the appropriate space):	following
	The contractor is committed to a minimum of % SMWB utilization on this contra	ct.
2	The contractor (if unable to meet the SMWB goal of%) is committed to a minimum. SMWB utilization on this contract. (If contractor/consultant is unable to meet the please fill out Section C and submit documentation demonstrating good faith efforts).  Name and phone number of person appointed to coordinate and administer the SMWB requirements on this process.	e goal,
۷.	name and phone number of person appointed to coordinate and administer the Sixty requirements on this pr	roject.
	Name:	
	Title:	
	Title: Phone Number Purpose  P	
	$\mathcal{C}_{\mathbf{i}}$	

IF THE SMWB GOAL WAS MET, PROCEED TO AFFIRMATION AND SIGN THE GFEP. IF GOAL WAS NOT MET, PROCEED TO SECTION C.

During the term of the contract, the contract, must report the actual payments to all the SMWB subcontractors on a monthly basis, on the "Subcontractor Report Form" or in other specified time intervals and format prescribed by the SAWS. Any unjustified failure to comply with the levels of SMWB participation identified in the bid and affirmed in the Good Faith Effort Plan shall be considered a material breach of contract. The SAWS reserves the right, at any time during the term of the contract to request additional information, documentation or verification of payments made to subcontractors in connection with the contract. Verification of amounts being reported may take the form of requesting copies of canceled checks paid to SMWB participants and/or confirmation in whire directly to the SMWB participants. Proof of payments, such as copies of canceled checks must properly identify the project name or project number to substantiate SMWB payment for this project.

The completed Subcontractor Report Forms should be mailed to:

San Antonio Water System SMWB Program 2800 U. S. Hwy 281 N., Suite 171 San Antonio, TX 78212

## SECTION C - GOOD FAITH EFFORTS (Fill out only, if the SMWB goal was not achieved).

1. List all firms you contacted with subcontracting/supply opportunities for this project that will not be utilized for the contract by choice of the contractor, subcontractor, or supplier. Written notices to firms contacted by the contractor for specific scopes of work identified for subcontracting/supply opportunities must be provided to subcontractor/supplier not less than five (5) business days prior to bid/proposal due date. The following information is required for all firms that were contacted of subcontracting/supply opportunities.

Name & Address of Company	Scope of Work/Supplies to be Performed/Provided by Firm	Is Firm SMWB Certified?	Date Written Notice was Sent & Method (Fax, Letter, Mail, etc.)	Reason Agreement Was not reached?
1.			Section	
2.		OU	(Q	
3.		ine		
4.		401		
5.	17,			
6.	Ou			
7.	Reference (Use additional			
8.	Reference of the second			
40	(Use additional	sheets as ne	eeded)	

In order to verify a contractor's good faith efforts, please provide to SAWS copies of the written notices to all firms contacted by the contractor for specific scopes of work identified in relation to the subcontracting/supply opportunities in the above named project. Copies of said notices must be provided to the Business Development Liaison with five (5) business days after the bid is due. Such notices shall include information on the plans, specifications, and scope of work.

2.	Did you attend the pre-proposal conference scheduled for this project?	Yes _	No

3.	List all SMWB listings or directories, contractor associations	s, and/or a	ny other	associations
	utilized to solicit SMWB Subcontractors/suppliers.			

\_\_\_\_\_\_\_

Discuss efforts made to define additional elements of the work proposed to be performed by SMWBs in order to increase the likelihood of achieving the goal:				
5. Indicate advertisement mediun of the advertisement(s):	ns used for soliciting bids from SMWBs. (Please attach a copy			
	AFFIRMATION			
I hereby affirm that the above informed further understand and agree the binding part of the contract.	ormation is true and complete to the best of my knowledge. I nat, this document shall be attached thereto and become a cial:  Date:  Date:  Teylewed by SAWS Contracting Department. For questions of the SMWB Program Manager, Ruby A.Perez-Webb, at all was not met, the SMWB Program Manager will evaluate			
Name and Title of Authorized Offi	cial:			
Name:	Durk			
Title:	ine,			
Signature:	Date:			
NOTE:	<i>34</i> , 1-			
This Good Faith Effort Plan is and/or clarifications, please contact (210) 233-3420. If the SMWB the "good faith efforts" of a firm. the contract.	reviewed by SAWS Contracting Department. For questions of the SMWB Program Manager, Ruby A.Perez-Webb, at all was not met, the SMWB Program Manager will evaluate. The Good Faith Effort Plan must be approved prior to award of			
Recommendation: Approval:	Denial:			
Signature of Business Developme	ent Liaison:			
Date:				

During the term of the contract, the contractor must report the actual payments to all the SMWB subcontractors on a monthly basis, on the "Subcontractor Report Form" or in other specified time intervals and format prescribed by the SAWS. Any unjustified failure to comply with the levels of SMWB participation identified in the bid and affirmed in the Good Faith Effort Plan shall be considered a material breach of contract. The SAWS reserves the right, at any time during the term of the contract to request additional information, documentation or verification of payments made to subcontractors in connection with the contract. Verification of amounts being reported may take the form of requesting copies of canceled checks paid to SMWB participants and/or confirmation inquiries directly to the SMWB participants. Proof of payments, such as copies of canceled checks must properly identify the project name or project

Jon is de da man and term of it defication of a Verification of and Anceled checks paid to State de SMWB participants. Properly identify the project dent for this project.

Leport Forms should be mailed to:

San Antonio Water System SMWB Program

2800 U. S. Hwy 281 N., Suite 1720 San Antonio, TX 7821200 San Antonio, TX 782120 San An

## SUBCONTRACTOR / CONSULTANT REPORT

San Antonio Water System 2800 U.S. Hwy. 281 North		1) Invoice No.	2) Job Name/Reporting Period	3) SAWS Job Number
San Antonio, Texas 78212				
			From: To:	
			f contract. To complete this report, we detailed instruc	ctions on reverse side. If you have any
questions, please contact the SMWI 4) Type of Contract - Select from		ez-Webb. 5) Contractor's/Consultant's	6) Date of Contract Award	7) Scheduled Date of
Down below: (Tab down)	Dio	Business Name, Address, and Telephone Number	o) Date of Contract Award	Completion
8) Original Contract Amount	9) Current Contract Amount (Including Change Orders/Addi	tional Addendums)	10) Total Contract Amount Rec'd to Date	11) Total Contract Amount Owed
12) Proposed Participation SBE% MBE  %	13) Instructions for calculation Total dollar amount paid to SMV		14) Name, Address, & Phone Number of Subcontractor/Sub Consultan	15) Select from Drop-down Below:
WBE%			Subcontractor/Sub Consultan	
16) Description of Subcontract Work	17) Subcontract Dollars Awarded  18) Subcontract Amount Paid to Date	1 1	G	
			SBE, MBE, WBE	
		Signed W	MBE	
		X 10	WBE	
Company's Official	Signature and Title	Signed	Name & Title of Individual C	Completing Report
		<i>'H'</i>		
	Signature and Title			

#### CONFLICT OF INTEREST QUESTIONNAIRE NOTE:

"Effective January 1, 2006, Chapter 176 of the Texas local Government Code requires that persons, or their agents, who seek to contract for the sale or purchase of property, goods, or services with SAWS shall file a completed conflict of interest questionnaire with the SAWS Director of Contracting no later than the 7<sup>th</sup> business day after the date that the person: (1) begins contract discussions or negotiations with SAWS; or (2) submits to SAWS an application, response to a request for proposals or bids, correspondence, or another writing related to a potential agreement with SAWS. The Conflict of Business questionnaire is attached on the following page and is available from the Texas Ethics Commission at www.ethics.state.tx.us. Completed Conflict of Interest questionnaires should be included with your bid or may be delivered by hand, within 7 business days of the bid opening, to the Director of Contracting. If mailing a completed Conflict of Interest questionaire, mail to: David R. Gonzales, CPM, 2800 U.S. Hwy 281 North, San Antorio, TX 78212. If delivering a completed Conflict of Interest questionnaire arriver to Contracting Department, Tower 2, 1st Floor, Room 171, 2800 U.S. Hwy 281 North, San Antonio, TX 78212. Please consult your own legal advisor if you have questions regarding the statute or form." be delivered by hand, within 7 business days of the bid opening, to the Director of

TWDB 06/10

# **CONFLICT OF INTEREST QUESTIONNAIRE**

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.	OFFICE USE ONLY
This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).	Date Received
By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.	
A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.	
Name of person who has a business relationship with local governmental entity.	no
Check this box if you are filing an update to a previously filed questionnaire.	
(The law requires that you file an updated completed questionnaire with the application than the 7th business day after the date the originally filed question aire become	propriate filing authority not as incomplete or inaccurate.)
Name of local government officer with whom filer has employment or business relationship	o.
Name of Officer  This section (item 3 including subparts A, B, C & D), must be completed for each officer	
Name of Officer	
employment or other business relationship as defined Section 176.001(1-a), Local Govern pages to this Form CIQ as necessary.	ment Code. Attach additional
A. Is the local government officer named in the ection receiving or likely to receive taxable in income, from the filer of the questionnaire?	ncome, other than investment
Yes No	
B. Is the filer of the questionnance eceiving or likely to receive taxable income, other than invedirection of the local government officer named in this section AND the taxable income is governmental entity?	stment income, from or at the not received from the local
Yes No	
C. Is the filer of this questionnaire employed by a corporation or other business entity wire government officer serves as an officer or director, or holds an ownership of 10 percent or more	
Yes No	
D. Describe each employment or business relationship with the local government officer nan	ned in this section.
4	
Signature of person doing business with the governmental entity	Date

# **BIDDER'S CERTIFICATIONS**

Pro	ject Name:
Pro	ject Number:
Coı	ntract For:
The	e following certifications must be completed by the bidder for each contract.
A.	EQUAL EMPLOYMENT OPPORTUNITY:
	( ) I have developed and have on file at my each establishment affirmative action programs pursuant to 41 CFR Part 60-2.
	( ) I have participated in previous contract(s) or subcontract(s) subject to the extent opportunity clause under <b>Executive Orders 11246 and 11375</b> . I have filed all reports due under the requirements contained in 41 CFR 60-1.7.
	( ) I have not participated in previous contracts(s) subject to the equal opportunity clause under Executive Orders 11246 and 11375.
	( ) I will obtain a similar certification from any proposed socontractor(s), when appropriate.
B.	NONSEGREGATED FACILITIES  ( ) I certify that I do not and will not maintain any facilities provided for my employees in a
	( ) I certify that I do not and will not maintain any facilities provided for my employees in a segregated manner, or permit my employees perform their services at any location under my control where segregated facilities are maintained; and that I will obtain a similar certification prior to the award of any federally assisted subcontract exceeding \$10,000 which is not exempt from the equal opportunity clause as required by 41 OFR 60-1.8.
I ur terr	nderstand that a false statement of this certification may be grounds for rejection of this bid proposal or mination of the contract award.
Тур	ped Name & Title of Bidder's Authorized Representative
Sig	nature of Bidder's Authorized Representative Date
— Naı	me & Address of Bidder

## VENDOR COMPLIANCE WITH RECIPROCITY ON NON-RESIDENT BIDDERS

Government Code 2252.002 provides that, in order to be awarded a contract as low bidder, a non-resident bidder must bid projects for construction, improvements, supplies or services in Texas at an amount lower than the lowest Texas resident bidder by the same amount that a Texas resident bidder would be required to underbid a non-resident bidder in order to obtain a comparable contract in the state in which the non-resident's principal place of business is located. A non-resident bidder is a contractor whose corporate offices or principal place of business is outside of the state of Texas. This requirement does not apply to a contract involving Federal funds. The appropriate blanks in Section A must be filled out by all out-of-state or non-resident bidders in order for your bid to meet specifications. The failure of out-of-state or non-resident contractors to do so will automatically disqualify that bidder. Resident bidders must check the blank in Section B.

A.	Non-resident vendors in	(give state), our orm	cipal place of
	A copy of the statute is attached.	percent lower than resident older	s by state law
	Non-resident vendors in business, are not required to under	(give state), our print(give state), our print(give state), our print bid resident bidders.	cipal place of
В.	Our principal place of business or of Texas:	corporate offices are in the State of	
BIDE	Our principal place of business or of Texas:  DER:  Description State  (please print)	Potion	
Comp	pany once Only		-
City	State	Zip	_
 Ву: (	(please print)		_
Signa	uture		_
Title:	(please print)		_

THIS FORM MUST BE RETURNED WITH THE BID