BID PROPOSAL CHECKLIST:

Medina River Sewer Outfall – Segment 2 Project SAWS Job No. 11-2503 Solicitation No. B-10-055-DD

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

Bid proposal (BP-1 through BP-6)
Bid Proposal Certification (BP-7)
Bid Bond
Signed page(s) of Addendum(s)
Good Faith Effort Plan
Signed page(s) of Addendum(s) Good Faith Effort Plan Conflict of Interest Questionnaire (Form CIQ) Letter of Insurance Verification and/or sample Certificate of Insurance verifying
Letter of Insurance Verification and/or sample Certificate of Insurance verifying
insurance coverage
Bidder's Certifications (TWDB Form WR 2-255)
Vendor Compliance with Reciprocity on Non-Resident Bidders (TWDB Form
Vendor Compliance with Reciprocity on Non-Resident Bidders (TWDB Form WRD-259)
Financial Statement prepared within the last twelve months by an independent
Certified Public Accounds (per Supplementary Conditions, page SS-1)
Company Information Packet (per Supplementary Conditions, page SS-1)
Prepared statement regarding ability to complete project (per Supplementary
Conditions (See SS-1)
Statemen Of Bidder's Experience (Attachment A)/Record of Performance on
three (3) similar projects in the last five (5) years (per Supplementary Conditions
page SS-1)
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. 11-2503 Medina River Sewer Outfall, Segment 2 Solicitation No. B-10-055-DD

Date:					

BID PROPOSAL

PROPOSA	AL OF								
A corp	prporation								
A part	nership consisting of								
An inc	dividual doing business as								
Pursuant materials a	ANTONIO WATER SYSTEM to Instructions and Invitation as specified and perform the io Water System Job Numberices to wit:	ns to Bidd work requ	ired for the	constructi	on of pipelines	and appurtenances,			
ITEM NO.	DESCRIPTION & ESTIMATION & ESTI		UNIT	QTY	Plans and S	TOTAL PRICE (Figures)			
1.	Erosion & Sedimentation Co	ontrols <u>Dollars</u> <u>Cents</u>	UNIT LS CO	SNAO26	\$ <u>XXXXXXXX</u>	\$			
2.	Trench Excavation Safety P	rotection Dollars	ation time	21,681		Ф			
3.		Dollars Cents Only Dollars		ŕ					
4.	78" FRP (all deaths)	Cents Dollars	SY	237,146	\$	\$			
		Cents	LF	20,601	\$	\$			
5.	78" Tee Base MH	Dollars Cents	EA	5	\$	\$			
6.	78" Special Tee Base MH	Dollars Cents	EA	1	\$	\$			

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
7.	78" Tee Base MH, Miter	EA	11	\$. \$
8.	78" Tee Base MH (Drop) Dollars Cents	EA	9	\$. \$
9.	Tee Base MH Miter (Drop) Dollars Cents Tee Base MH, 60" Riser Extra Depth (>15') Dollars Cents Toyota Lift Station Tie-In Dollars Cents Fence Gate 16' (Type 1)	EA	6	St Bidding	. \$
10.	Tee Base MH, 60" Riser Extra Depth (>15') Dollars Cents	S√S/J	SALOOSE 307	, S	\$
11.	Toyota Lift Station Tie-In Dollars Gents	tor ^{iti} .	1	\$XXXXXXX	\$ \$
12.	Fence Gate 16' (Type 1) Dollars Cents	EA	6	·	·
13.	Remove and Replace Fencing Dollars Cents	LF	710	\$	\$
14.	Boring or Tunneling for 78" DIA. FRP Dollars Cents	LF	192	\$_	\$
15.	Carrier Pipe Installed in Steel Casing or Tunnel Liner Plate (78" DIA FRP) Dollars Cents	LF	192	\$	\$
	Conto		.02	Ψ	. *

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
16.	Downstream Siphon Structure No. 2 Dollars Cents	<u>i</u>	1	\$ <u>XXXXXXXX</u>	\$
17.	Upstream Siphon Structure No. 2 Dollars Cents		1	\$ <u>XXXXXXXX</u>	\$
18.	12" FRP for Siphon No.2 Dollars Cents	<u>i</u> <u>L</u> F	530	St Bidding	
19.	36" FRP for Siphon No.2 Dollars Cents	<u>.</u> . IF	530 e Purpose 530	\$	\$
20.	42" FRP for Siphon No.2 Dollars Cents	tor LF	530	\$	\$
21.	30" HDPE (Air By-Pass Pipe)	<u>.</u>	550	\$	\$
22.	Air Bypass Manhold (FRP) Dollars Cents		2	\$	\$
23.	Rock Rip Rap (12" to 18") Dollars	<u>i</u>			· · ·
24.	Cents Concrete Cap Dollars		889	\$	_ \$
25.	Cents Concrete Encasement	='	250	\$	\$
	Dollars Cents		373	\$	\$

Segment 2

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
26.	Bypass Pumping				
	Dollars				
	Cents	LS	1	\$XXXXXXXX	\$
27.	Abandonment of Sanitary Sewer Main and Manholes				
	Dollars				
	Cents	LF	300	\$	\$
28.	Tree Protection Dollars			Sexxxxxxx	
	Cents	IS	1 /	- Exxxxxxx	\$
	Cents	LO	် <u>ဇ</u>	9 ⁴ ^^^^	Ψ
29.	Connection to MRSO Segment 1 Dollars Cents	riorine	Purposes	\$XXXXXXXX	_ \$
30.	Sents	LS	1	\$XXXXXXXX	\$
31.	Gravity Sewer Outfall Testing				
	Gravity Sewer Outfall Testing Dollars Cents	LF	20,793	\$	\$
32.	Disputes Review Board				
	<u>Dollars</u>				
	<u>Cents</u>	LS	1	\$XXXXXXXX	\$30,000.00
<u> </u>	//				
LINE ITE					
SUB TO	TAL BASE BID		<u>\$</u>		

Job No. 11-2503 Medina River Sewer Outfall Segment 2

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT	QTY	UNIT PRICE (Figures)	TOTAL PRICE (Figures)		
33.	Mobilization Percent	LS	1	\$XXXXXXX	\$		
	(Maximum of 5% of the Line Item "A" Sub-total Base Bid amount)						
LINE ITE	EM "B" ZATION SUB TOTAL			<u>\$</u>			
Note: Mobilization lump sum bid amount shall be limited to a maximum of 5% of the Subtotal base bid amount. In the event of a discrepancy between the written percentage and dollar amount shown for the Mobilization bid item the written percentage will govern. If the percentage written exceeds the allowable maximum stated for mobilization SAWS recovers the right to can the amount at the percentage shown							
mohili:	zation SAMS recorved the right	ta aan	tha ama	ant at the per	centage shown		
mohili:	zation SAMS recorved the right	ta aan	tha ama	ant at the perd	centage shown		
mohili:	zation, SAWS reserves the right just the extension of the bid item BID AMOUNT (LINE ITEM "A" + LINE ITEM	ta aan	tha ama	ant at the perd	DOLLARS AND CENTS		

		BIDDER'S SIG	NATURE & TITLE
		FIRM'S NAME	(TYPE OR PRINT)
		FIRM'S ADDRE	ESS
			E NO./FAX NO.
		FIRM'S EMAIL	ADDRESS
The Contractor herein acknowledges receipt of	the follov	ving	ding
Addendum No	Dated_		Sigo 6:
Addendum No	Dated_		Signed:
Addendum No	Dated_	-,0050	Signed:
Addendum No	Dated	Le Dill.	ADDRESS Signed: Signed: Signed:
OWNER RESERVES THE RIGHT TO ACCEPT The bidder offers to construct the Project	T THE O	VERALL MOST	RESPONSIBLE BID.
contract price, and to complete the Project forth in the Authorization to Proceed.	with <u>54</u> Bidder ur	<u>·0</u> calendar da nderstands and	lys after the start date, as set daccepts the provisions of the
Complete the additional requirements of topages.	the Prop	oosal which a	are included on the following

PROPOSAL CERTIFICATION

of the San Antonio Water System for which amount represents five percent (5%) of the the proposal is accepted and the bidder fails to exect of the Contract, in which case the check shall be considered as payment for damages due to delay an	dollars (\$
acceptance and award of the contract to the unders: Water System Contract Documents and make Per 10 calendar days after the award of the Contract to insure and guarantee the work until final comple	roposal within60 calendar days after the bid opening. Upon igned by the Owner, the undersigned shall execute standard San Antoni formance and Payment Bonds for the full amount of the contract within a secure proper compliance with the terms and provisions of the contraction and acceptance, and the guarantee period stipulated, and to guarantee and materials furnished in the fulfillment of the contract.
It is anticipated that the Owner will provide written	Authorization to Proceed within 30 days after the award of the Contrac
SAWS of the written Authorization to Proceed 1	under this Contract within seven (7) Chendar days after issuance by the Under no circumstances shall the work commence prior to Contractor Proceed. Work shall be completed in full within consecutive calendary and the proposal has been carefully checked and are submitted and the undersited certifies that bidder's practices and policies do not say a particular and that the hidden will offernatively apparent.
The undersigned certifies that the bid prices contacorrect and final.	nined in the proposal have been carefully checked and are submitted a
In completing the work contained in this propos discriminate on the grounds of race, color, religion the implementation of these policies and practices	al the undersized certifies that bidder's practices and policies do not sex or national origin and that the bidder will affirmatively cooperate in Company Representative Company Name
Signed	Company Representative
ွင့	
eterence	Company Name
to 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:		CTOR INFORI	MATIC	ON:			
Address:							
City:				State:			Zip:
Contact Perso	n:			Telephone:		ight.	
Email Address	s:						
Is your firm Ce	ertified:	Yes	No:	If certifie	ج کا, Certific	ation Nu	ımber:
City: Contact Perso Email Address Is your firm Ce Type of Certific 1. List ALL SUB Name &	cation:	AABE		T NBE COLL	MBE	≣ B	WBE DBE
1. List ALL SUB	CONTRA	CTORS/SUPF	PLIER	Sthat will be utili	ized on this	s project/	contract.
Name & Address of Company	be Perfo	ormed/Provide		Estimated Cor Amount on t Project	:his	Certificati ittach cop	Certified, Provide on Number and by of Certification Affidavit
1.		Seletelice Of				,	undavit
2.	¢o ^t	₹°					
3.							
4.							
5.							
6.							

SECTION B. – SMWB COMMITMENTS

The SMWB goal on this project is <u>17%</u>

1.		contractor has satisfied the requirements of the BID specification in the following heck the appropriate space):
	The conti	ractor is committed to a minimum of % SMWB utilization on this contract.
	% SMW please fill out Se	ractor (if unable to meet the SMWB goal of%) is committed to a minimum of B utilization on this contract. (If contractor/consultant is unable to meet the goal, ction C and submit documentation demonstrating good faith efforts).
2.	Name and phone nur	mber of person appointed to coordinate and administer the SMMB requirements on this project.
	Name:	· Bia
	Title:	ourpose's O'
	Phone Number_	
		a ^x

IF THE SMWB GOAL WAS MET, PROCEED TO ANTIRMATION 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 formation 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 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, F	Reason Agreement Was not reached?
1.			Ses	
2.		OUK	903	
3.		ine		
4.	. 6	KOL		
5.	17,7			
6.	OUIS			
7.	rence			
8.	Reference Only No.			
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-proposa	l conference s	scheduled	for this project?	' Yes	_ No

3.	List all SMWB listings or directories,	contractor	associations,	and/or any	other	associations
	utilized to solicit SMWB Subcontract	ors/supplier	S.			

Discuss efforts made to define additional elens SMWBs in order to increase the likelihood of ach	
5. Indicate advertisement mediums used for soli of the advertisement(s):	citing bids from SMWBs. (Please attach a copy
AFFIRM	IATION
I hereby affirm that the above information is true further understand and agree that, this documbinding part of the contract. Name and Title of Authorized Official: Name: Title: Signature: NOTE: This Good Faith Effort Plan is reviewed by Sand/or clarifications, please contact the SMWB F	e and complete to the bast of my knowledge. In any shall be attached thereto and become a
Name and Title of Authorized Official:	-05e5
Name:	- Orlibe
Title:	We,
Signature:	Date:
NOTE:	
SMWB goal was not met, the MWB Program Nof a firm. The Good Faith Roort Plan must be a	Manager will evaluate the "good faith efforts" pproved prior to award of the contract.
Recommendation: Approval:	Denial:
Signature of Business Development Liaison:	
Date:	

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:	
Instructions: All prime contractors	are required to complete and subr	nit this report until final payment of	f contract. To complete this report, we detailed instru	ctions on reverse side. If you have any
questions, please contact the SMW				
4) Type of Contract - Select from Down below: (Tab down)	Dro	p-5) Contractor's/Consultant's Business Name, Address, and Telephone Number	6) Date of Contract Award	7) Scheduled Date of Completion
8) Original Contract Amount	9) Current Contract Amount (Including Change Orders/Add	itional Addendums)	10) Total Contract Amount Rec'd to Date	11) Total Contract Amount Owed
12) Proposed Participation SBE% MBE% WBE%	13) Instructions for calculation Total dollar amount paid to SM	of SMWB Percentage: WB divided by total dollar am	14) Name, Address, & Phone Number Subcontractor/Sub Consultan	15) Select from Drop-down Below:
16) Description of Subcontract Work	17) Subcontract Amount Paid to Dollars Awarded	19) Subcontract % Paid to Date	14) Name, Address, & Phone Number of Subcontractor/Sub Consultantial Subcontractor/Subcontractor	
		, 40,	WBE	
Company's Officia	Signature and Title	Date Signed	Name & Title of Individual (Completing Report
		M		
	,co	0,		
	o eteron			
	to, kg			
	•			

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 7th 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 questionnaire, mail to: David R. Gonzales, CPM, 2800 U.S. Hwy 281 North, San Antago, TX 78212. If delivering a completed Conflict of Interest questionnaire, whiver to Contracting Department, Tower 2, 1st Floor, Room 171, 2800 U.S. Hwy 81 North, San Antonio, Department, Tower 2, 1st Floor, Room 171, 2800 U.S. Hwyd 1 North, San Antonio, TX 78212. Please consult your own legal advisor if you have questions regarding the statute or form."

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.	n [©]					
Check this box if you are filing an update to a previously filed questionnaire.	<u>, </u>					
(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 become						
Name of local government officer with whom filer has employment or by mess relationship	р.					
Name of Officer						
Name of Officer						
This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.						
A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?						
Yes No						
B. Is the filer of the questionnant ecceiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?						
Yes No						
C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local 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 extra opportunity clause under Executive Orders 11246 and 11375. 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 attorntractor(s), when appropriate.
B.	NONSEGREGATED FACILITIES
	() I certify that I do not and will not maintain and facilities provided for my employees in a segregated manner, or permit my employees operform 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 CFR 60-1.8.
I ur terr	nderstand that a false statement withis 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 primo	ipal place of
	A copy of the statute is attached.	percent lower than residence didders	by state law
	Non-resident vendors in business, are not required to und	(givestate), our princerbid resident bidders.	ipal place of
B.	Our principal place of business of Texas:	(give state), our prince(give state), our prince(give state), our prince(give state), our prince	
BIDI	Our principal place of business of Texas: DER: Description State (please print)	Hottor	
Comp	oany ence Only		
City	State	Zip	
By: ((please print)		
Signa	iture		
Title:	(please print)		

THIS FORM MUST BE RETURNED WITH THE BID