# **Proposal Checklist**

Project Name: Brackish Groundwater Desalination Program – Program Manager Services

Use the checklist to ensure that the proposal is complete by checking off each item included with your response. Sign and date this form and include this page with each proposal.

Proposal Summary

Respondent Questionnaire

Statement of Qualifications

* See Section VII.c.3

Exhibit “A” – Letter from Insurance Provider and

* Copy of Current Certificate of Insurance

Exhibit “B” – Good Faith Effort Plan

Brief description of Affirmative Action Program

Completed and Signed Good Faith Effort Plan

Copy of Certification Certificate

Exhibit “C” – Conflict of Interest Questionnaire

Exhibit “D” – Acknowledgement of Texas Public Information Act Requirements and Release Form

I certify that the proposal submitted includes the items as indicated above.

Signature Date

Printed Name

Title

# **Proposal Summary**

Project Name: Brackish Groundwater Desalination Program – Program Manager Services

Respondent Name:

The Proposal Summary Form is intended to aid in reviewing the submission. The submission may propose up to three (3) design teams for each design package. Each team will be evaluated independently using the criteria outlined in Table 4: Evaluation Criteria and Required Proposal Outline. Only the highest scoring team’s scores will be included when evaluating the overall submission. List the members of each team and describe the work they will perform. The teams may be listed in no particular order.

1. Pipeline Design and Construction

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work

1. Production Well Design and Construction

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work

1. Reverse Osmosis Treatment Plant

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work

1. Injection Well Design and Construction

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work

1. Electrical / Supervisory Control and Data Acquisition (SCADA)

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work

1. Start-up, Commissioning, and Acceptance Testing Services

Team 1 Description of Work

Team 2 Description of Work

Team 3 Description of Work



# **Respondent Questionnaire**

**PROJECT NAME:** Brackish Groundwater Desalination Program – Program Management and Engineering Services

**Instructions:**  The Respondent Questionnaire is a required questionnaire. Complete the questionnaire by inserting the requested information. Do not modify or delete the questions.

**GENERAL INFORMATION**

1. **Respondent Information:** Provide the following information regarding the Respondent.

(NOTE: Co-Respondents are two or more entities proposing as a team or joint venture with each signing the contract, if awarded. Subcontractors are not Co-Respondents and should not be identified here. If this proposal includes Co-Respondents, provide the required information in this Item #1 for each Co-Respondent by copying and inserting an additional block(s) before Item #2.)

Respondent Name:

(NOTE: Give exact legal name as it will appear on the contract, if awarded.)

Principal Address:

City: State: Zip Code:

Telephone No. Fax No:

Social Security Number or Federal Employer Identification Number:

2. **Contact Information:** List the one person who SAWS may contact concerning your proposal or setting dates for meetings.

Name:

Address:

City: State: Zip Code:

Telephone No. Fax No:

Email:

3. Identify the principal contact person authorized to commit the Respondent to a contractual agreement.

4. Does Respondent anticipate any mergers, transfer of organization ownership, management reorganization, or departure of key personnel within the next twelve (12) months?

Yes  No

5. Is Respondent authorized and/or licensed to do business in Texas?

Yes  No  If “Yes”, list authorizations/licenses.

6. **Affirmative Action -** Respondent agrees to adhere to the EEO requirements contained in the RFQ section IV, sub-section “c.” paragraph 10.

Yes  No  If “No”, state reason.

7. **Debarment/Suspension Information:** Has the Respondent or any of its principals been debarred or suspended from contracting with any public entity?

Yes  No  If “Yes”, identify the public entity and the name and current phone number of a representative of the public entity familiar with the debarment or suspension, and state the reason for or circumstances surrounding the debarment or suspension, including but not limited to the period of time for such debarment or suspension.

8. **Bankruptcy Information:**  Has the Respondent ever been declared bankrupt or filed for protection from creditors under state or federal proceedings?

Yes  No  If “Yes”, state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.

9. Provide any other names under which Respondent has operated within the last 10 years.

10. **Litigation Disclosure**: Respond to each of the questions below by checking the appropriate box. Failure to fully and truthfully disclose the information required in the Litigation Disclosure questions may result in the disqualification of your proposal from consideration or termination of the contract, once awarded.

a. Have you or any member of your Firm or Team to be assigned to this engagement ever been indicted or convicted of a felony or misdemeanor greater than a Class C in the last five (5) years?

Yes  No

b. Have you or any member of your Firm or Team to be assigned to this engagement been terminated (for cause or otherwise) from any work being performed for the San Antonio Water System or any other Federal, State or Local Government, or Private Entity?

Yes  No

c. Have you or any member of your Firm or Team to be assigned to this engagement been involved in any claim or litigation with the San Antonio Water System or any other Federal, State or Local Government, or Private Entity during the last ten (10) years?

Yes  No

If you have answered “Yes” to any of the above questions, please indicate the name(s) of the person(s), the nature, and the status and/or outcome of the information, indictment, conviction, termination, claim or litigation, as applicable. Any such information should be provided on a separate page, attached to this form and submitted with your proposal.

11. **Compliance Agreement:**

Nondisclosure. No information obtained by Prospective Consultant from SAWS shall be disclosed by Prospective Consultant to any third party. In the event Prospective Consultant is subject to the Texas Public Information Act, upon receipt of a request for any information obtained by Prospective Consultant, Prospective Consultant shall provide notice to SAWS of the request along with a copy of the request, and give SAWS the opportunity to respond to the request prior to its release by Prospective Consultant.

No Lobbying and Compliance with Law. During the selection process for the project named in this RFQ, Prospective Consultant agrees to comply with all applicable laws and regulations, including but not limited to restrictions against direct or indirect lobbying of public officials. Prospective Consultant agrees not to make or permit to be made any improper payments, or to perform any unlawful acts.

This agreement shall be construed to be enforceable to the maximum extent permitted by law.

Failure to complete this question or comply with its terms may subject this firm to elimination from the selection process at any time.

Does the Respondent agree to the above?

Yes  No

12. **Security Procedures:** Respondent acknowledges having read the security procedures in Exhibit “D” and understands the requirements. Respondent is prepared to perform at their own expense background security checks on their employees, or the employees of their consultants or subconsultants if requested by SAWS.

Yes  No

13. **Contract Terms and Conditions:** Respondent acknowledges having read the contract attached to this RFQ. By responding to this RFQ, Respondent agrees to these terms and conditions.

No Exceptions  Exceptions  If “Exceptions”, they must be submitted with the proposal. Respondents shall submit exceptions with proposed alternative language to SAWS as an attachment accompanying this questionnaire.

Exceptions will not be accepted after the proposal due date and time. At the sole discretion of SAWS, the type and nature of exceptions may be grounds for disqualification.

14. **Addendums:** Each Respondent is required to acknowledge receipt of all addendums.

None  Yes  If “Yes”, Identify.

The information provided above is true and accurate to the best of my knowledge. Furthermore, we understand that failure to complete the Respondent Questionnaire may subject this firm to elimination from the selection process.

Signature Date

Printed Name

Title

|  |  |
| --- | --- |
| **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**.  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).  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 Governmental 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. | **OFFICE USE ONLY** | |
| Date Received | |
| 1. **Name of person doing business with local governmental entity.** | | | |
| 2  **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 appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.) | |
| 1. **Name of local government officer with whom filer has employment or business relationship.**   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Name of Officer  This section (item 3 including subparts A, B, C and D) must be completed for each officer with whom the filer has an employment or business relationship as defined by Section 176.001 (1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.   * 1. 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   * 1. Is the filer of the questionnaire receiving 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   * 1. 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   * 1. Describe each employment or business relationship with the local government officer named in this section. | |
| 4.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of person doing business with the governmental entity Date | |

**ACKNOWLEDGEMENT OF TEXAS PUBLIC INFORMATION ACT REQUIREMENTS AND RELEASE FORM**

All responses to this RFQ will be considered public information pursuant to the terms of the Texas Public Information Act in Chapter 554 of the Texas Government Code (the “Act”). By submitting a response to this RFQ, Respondents expressly waive any exceptions to disclosure to which it may be entitled under the Act, including, without limitation, a claim that any material submitted in response to this solicitation is proprietary or is a trade secret or otherwise confidential under the Act or otherwise.

I acknowledge the aforementioned statement and understand that my proposal is subject to being made available to requestors of public information.

Signature

Printed Name and Title

Date