

# REQUEST FOR QUALIFICATIONS

#### 2019 GOVERNMENTAL ENGINEERING DESIGN SERVICES

Solicitation No.: PS-00075-FF Addendum 3 | April 5, 2019

## **RESPONSES TO QUESTIONS**

1. Can consultants include insurance exceptions, or are the insurance requirements set in stone?

Answer: Exceptions to insurance requirements may be submitted for consideration with Respondent's proposal. Requests to modify terms and conditions of the contract after the submittal deadline will not considered. As a general practice, SAWS insurance requirements for each project are provided by our Risk Management department ahead of the issuance of the solicitation.

- 2. Please see the following questions for the above-referenced solicitation:
  - Will an 11x17 graphics sheet count as 1 page towards the overall page count?
  - Exhibit B Good Faith Effort Plan and Attachment II Respondent Questionnaire reference the year 2018 for the project name will these forms be updated to reflect "2019" in the project name?

Answer: Page 10, section 6 of IV. Submitting a Response, allows the use of 11"x17" for drawing where warranted. If respondent decides to use one (1) 11"x17" it would be appropriate for the organizational chart and this page will count towards the page limit.

Answer: Yes, see Modifications to RFQ number 1 below.

3. In our response, do we need to submit a CIQ Form for every subconsultant on the team, and if so does it need an original signature?

Answer: The CIQ Form must be completed by the Respondent only, not any of the subconsultants.

## **CLARIFICATIONS TO RFQ**

The changes contained in the Modifications to RFQ section below are to correct the project name to correctly reflect "2019 Governmental Engineering Design Services".

### **MODIFICATIONS TO RFQ**

1. Remove Respondent Questionnaire, and replace with the attached Respondent Questionnaire. Respondents will utilize this form as part of their submittal.

2. Remove Exhibit "B" Good Faith Effort Plan form, and replace with the attached Exhibit "B" Good Faith Effort Plan form. Respondents will utilize this form as part of their submittal.

# END OF ADDENDUM

This Addendum, with attachments, is ten (10) pages in its entirety.

### Attachments:

- Respondent Questionnaire
- Exhibit "B" Good Faith Effort Plan



# Attachment II RESPONDENT QUESTIONNAIRE

# PROJECT NAME: 2019 Governmental Engineering Design 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**

Sub-contractors are not Co-Respondents	entities proposing as a team or join and should not be identified here.	regarding the Respondent.  It venture with each signing the contract, if awarded.  If this proposal includes Co-Respondents, provide and inserting an additional block(s) before Item #2.)				
Respondent Name:(NOTE: Give exact legal name as	s it will appear on the contra	ct, if awarded.)				
	ncipal Address:					
City:	State:	Zip Code:				
Telephone No	Fax No: _					
Social Security Number or Federa	ımber:					
Operational Contact Information proposal or setting dates for meetings		SAWS may contact concerning your				
Name:						
Address:	_					
City:	State:	Zip Code:				
Telephone No	Fax No:					
Email:						
<ol> <li>Legal Contact Information: If a Contract shall be sent to. This is in add</li> <li>Name:</li> </ol>	dition to the Operational Co	ntact.				
Address:						
		Zip Code:				
Email:						
4. Identify the principal contact persoagreement.		Respondent to a contractual				

5. Does Respondent anticipate any mergers, transfer of organization ownership, management reorganization, or departure of key personnel within the next twelve (12) months?				
Yes No No				
6. Is Respondent authorized and/or licensed to do business in Texas?				
Yes No If "Yes", list authorizations/licenses.				
7. <b>Affirmative Action -</b> Respondent agrees to adhere to the EEO requirements contained in the RFQ section V, sub-section B.,1.				
Yes ☐ No ☐ If "No", state reason.				
8. <b>Debarment/Suspension Information:</b> 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.				
9. <b>Bankruptcy Information:</b> Has the Respondent ever been declared bankrupt or filed for protection from creditors under state or federal proceedings?				
Yes $\square$ No $\square$ If "Yes", state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.				
10. Provide any other names under which Respondent has operated within the last 10 years.				
11. <b>Litigation Disclosure</b> : 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 project 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 project 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 No
c. Have you or any member of your Firm or Team to be assigned to this project 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.
12. Compliance Agreement:
Nondisclosure. No information obtained by Respondent from SAWS shall be disclosed by Respondent to any third party. In the event Respondent is subject to the Texas Public Information Act, upon receipt of a request for any information obtained by Respondent, Respondent 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 Respondent.
No Lobbying and Compliance with Law. During the selection process for the project named in this RFQ, Respondent agrees to comply with all applicable laws and regulations, including but not limited to restrictions against direct or indirect lobbying of public officials. Respondent 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 No
13. <b>Security Procedures:</b> 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 sub-consultants if requested by SAWS.
Yes No No
14. <b>No Boycotting Israel Verification:</b> Respondent acknowledges having read the No Boycotting Israel Verification Exhibit "X" and understands the requirements. Respondent can and will make this verification if awarded a contract.
Yes No No
15. <b>Contract Terms and Conditions:</b> 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.

16. Addendums: Each Respondent is required to acknowledge receipt of all addendums.				
None 🗌	Yes 🗌	If "Yes", Identify.		
	at failure to cor		the best of my knowledge. Furthermore onnaire may subject this firm to elimination	
	Signatu		Date	
	Printed Na	ame		
	Title			



# **EXHIBIT "B"**

# Good Faith Effort Plan for Professional Services SUB-CONSULTING for:

NOTE: Effective 1/1/17, SMWB points shall only be assessed for consultants and/or sub-consultants who are local and certified as SBEs (including MBEs and WBEs).

NAME OF P	ROJECT: 2019 Governm	nental Engineering Des	ign Services		
	PRIME CONSULTANT INFOR of Firm, including "doing bus e:				
Address of	Office to Perform Project Wor	k:			
City:			State:	Zip Code:	•
Telephone:			Fax:		
Contact Per	rson:				
Email Addre	ess:		Is your firm Certified - as an SMWVB?	Yes:	No:
If "Yes", Ce	rtification Agency that granted	d SMWVB designation:			
Type/s of C	ertification:	SBE:	MBE:	_ VBE:	WBE:
Prime Cons	sultant's Percentage of Particip	pation: (Ex: 100% is the total va	ilue of the contract)	%	
	1. List ALL SUB-CONSUL	TANTS/SUPPLIERS that will b	e utilized on this project/	contract. (SMWB AND I	Non-SMWB)
	Legal Name of Sub- consultant/Supplier (including "doing business as", if applicable).	Address of Office Location to Perform Project Work or Provide Supplies:	Scope of Work/Supplies to be Performed/Provided by Firm:	Estimated Percentage of Participation on this Project:	Certification Type & Certification Agency:
1					
2					
3					
4					

_						
	5					
SEC	CTION B	- SMWB COMMITMENTS				
The	SMWB go	oal on this project is 40%				
1.	The und	dersigned proposer has satisfie	d the requirements of the BID sp	pecification in the following	manner (please check	the appropriate space):
	The	e proposer is committed to a min	nimum of 40 % SMWB utilization	on this contract.		
			e SMWVB goal of 40%), is comr goal, please fill out Section C an			
Nan	ne:	d phone number of person appo	pinted to coordinate and adminis	ter the SMWB requiremen	its on this project.	
	ne Numbe ail Addres					
			TO AFFIRMATION AND SIGN		AS NOT MET, PROCEE	D TO SECTION C.
SEC	CTION C -	- GOOD FAITH EFFORTS (Fill	out only if the SMWB goal was r	not achieved).		
con: firm <i>not</i>	sulting/sup s contacte	oply opportunities for this proje ed by the proposer for specific so five (5) business days prior to	ach to this Good Faith Effort Plar ct that will not be utilized for the copes of work identified for sub- oproposal due date. This infor	contract by choice of the consulting/supply opportu	proposer, sub-consulta nities must be provided t	nt, or supplier. Notices to to sub-consultant/supplier
Сор	ies of said		the SMWB Program Manager a	it the time the response is	s due. Such notices sha	allinclude information on
2. D	id you atte	end the pre-submittal conference	scheduled for this project?	YesNo		
3.	List all SI	MWB listings or directories, conti	ractor associations, and/or any ot	her associations utilized to	solicit SMWB sub-consu	tants/suppliers:
4.	Discuss	efforts made to identify elements	of the work to be performed by S	MWBs in order to increase	the likelihood of achievin	g the goal:
 5. I	ndicate ad	vertisement mediums used for s	oliciting SMWBs. (Please attach	a copy of the advertisement	t(s):	

#### AFFIRMATION

I hereby affirm that the above information is true and complete to the best of my knowledge. I further understand and agree that, this document shall be attached thereto and become a binding part of the contract.

Name:	
Title:	
Signature: _	
Date:	

Name and Title of Authorized Official:

#### NOTE:

This Good Faith Effort Plan is reviewed by SAWS Contracting Department. For questions and/or clarifications, please contact Marisol V. Robles, SMWVB Program Manager, at 210-233-3420.

#### **DEFINITIONS**

Note: To be eligible for participation in the SAWS Small, Minority, Woman, and Veteran-owned Business Program, a firm must be local, and must be certified as a Small Business Enterprise (SBE). This includes firms certified as Minority and/or Woman-owned Business Enterprises (MBEs and WBEs). SAWS tracks Veteran-owned Business Enterprises (VBEs) for statistical purposes, but does not award points for VBE participation.

**Local:** A business located in the San Antonio Metropolitan Statistical Area (SAMSA), which includes the counties of Atascosa, Bandera, Bexar, Comal, Frio, Guadalupe, Kendall, Kerr, McMullen, Medina, Uvalde and Wilson. A business's presence in the SAMSA that consists solely of a P.O. box, a mail drop, or a telephone message center does not count as being local.

**Prime Consultant/Contractor:** Any person, firm partnership, corporation, association or joint venture which has been awarded a San Antonio Water System contract.

Sub-consultants/contractor: Any named person, firm partnership, corporation, association or joint venture identified as providing work, labor, services, supplies, equipment, materials or any combination of the foregoing under contract with a prime consultant/contractor on a San Antonio

**Small, Minority, and Woman-owned Business (SMWB):** All business structures Certified by the Small Business Administration, Texas State Comptroller's Office, or the South Central Texas Regional Certification Agency that are 51% owned, operated, and controlled by a Small Business Enterprise, a Minority Business Enterprise, or a Woman-owned Business Enterprise.

Small Business Enterprise (SBE): A business structure that is Certified by the Small Business Administration, Texas State Comptroller's Office or the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by someone who is legally residing in or a citizen of the United States, and the business structure meets the U.S. Small Business Administration's (SBA) size standard for a small business within the appropriate industry category.

Minority Business Enterprise (MBE): A business structure that is Certified by the Small Business Administration, Texas State Comptroller's Office or the South Central Texas Regional Certification Agency as being 51% owned, operated, and controlled by an ethnic minority group member(s) who is legally residing in or a citizen of the United States. For purposes of the SMWB program, the following are recognized as minority groups:

- a. African American Persons having origins in any of the black racial groups of Africa.
- b. Hispanic American Persons of Mexican, Puerto Rican, Cuban, Spanish or Central or South American origin.
- c. **Asian-Pacific American** Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
- d. Asian-Indian American Persons whose origins are from India, Pakistan, Bangladesh or Sri Lanka.
- e. American Indian/Native American Persons having no less than 1/16 percentage origin in any of the American Indian Tribes, as recognized by the U.S.

Women Business Enterprise (WBE): A business structure that is Certified by the Small Business Administration, Texas State Comptroller's Office or the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by a woman or women who are legally residing in or citizens of the United States.

**African American Business Enterprise (AABE):** A business structure that is Certified by the Small Business Administration, Texas State Comptroller's Office or the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by African American minority group member(s) who are legally residing in or are citizens of the United States.

**Joint Venture:** A limited association of two or more persons to carry out a single business enterprise for profit, for which purpose they combine their property, money, efforts, skills and knowledge.

**Veteran-Owned Business Enterprise (VBE):** A business structure that is at least 51% owned, operated and controlled by an individual who served in the United States Armed Forces, and who was discharged or released under conditions other than dishonorable. Please note: This certification type should not be confused with the Service Disabled Veteran designation available through the Small Business Administration.

Addendum 3

#### Web Submittal of Sub-consultant/Supplier Payment Reports:

The Contractor will be required to electronically report the actual payments to all sub-consultants and suppliers utilizing the Subcontractor Payment and Utilization Reporting (S.P.U.R.) System, beginning with the first SAWS payment for services under the contract, and with every payment thereafter (for the duration of the contract). Electronic submittal of monthly subcontractor payment information will be accessed through a link on SAWS' "Business Center" web page. This information will be utilized for subcontractor participation tracking purposes. Any unjustified failure to comply with the committed SMWB levels may be considered breach of contract.

The Contractor and all subcontractors will be provided a unique log-in credential and password to access the SAWS subcontractor payment reporting system. The link may also be accessed through the following internet address: https://saws.smwbe.com/

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