## **BID PROPOSAL**

PROPOS	AL OF		
A co	rporation		
A pa	artnership consisting of		
An i	ndividual doing business as		
Pursuant specified	ANTONIO WATER SYSTEM to Instructions and Invitations to Bidders, the undersigner and perform the work required for the construction of pub Number 10-1526 & 10-1527 in accordance with the P	ipelines and appurtenance	es, San Antonio Water
SAWS J	ob No. 10-1526	, Bild	
ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT PRICE (Sigures)	TOTAL PRICE (Figures)
540	1 LS - Erosion & Sedimentation Controls; per Lump	SUIPE	
(CoSA)	SumDollars		
	Cents	\$ <u>XXXXXXXXX</u>	\$
550	11,077 LF – Trench Excavation Protection per Linear Foot		
(CoSA)	Dollars		
	Cents	\$	\$
550/552	1 LS- Fencing and Gates Fencing Sum		
(TxDOT)	1 LS- Fencing and Gates of Lump Sum  Dollars  Cents		\$
2113	250,000 Sy Osprigging; per Square Yard	<del></del>	·
	Dollars		
	Cents	\$	\$
848	60 LF - 8" Open Cut Sewer Main (all depths); per Linear Foot		
			\$
		·	Ψ
848	48 LF - 12" Open Cut Sewer Main (all depths); per Linear Foot		
	Dollars Cents		\$

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
848	4,103 LF - 18" Open Cut Sewer Main (all depths); per Linear Foot		
		\$	\$
848	6,035 LF - 24" Open Cut Sewer Main (all depths); per Linear Foot		
		\$	\$
848	831 LF - 27" Open Cut Sewer Main (all depths); per Linear Foot	\$oBidding	<b>&gt;</b>
	Dollars Cents	sKBiU	\$
848	50 LF - 18" Sewer Main (in casing); per Linear Foot  Dollars	wirpose of	
	Cents	SP11.4	\$
848	200 LF - 24" Sewer Main (in casing); per Linear Food		
	Cents	\$	\$
848	50 LF - 27" Sewer Main (in casing); per Linear Foot  Dollars		
	Cents	\$	\$
856	50 LF - Jack and Bore 636" Casing; per Linear Foot  Dollars		
	Cents	\$	\$
856	200 LF - Jack and Bore for 42" Casing; per Linear Foot  Dollars		
	Cents	\$	\$
856	50 LF - Jack and Bore for 48" Casing; per Linear Foot		
	Dollars Cents	\$	\$
856	50 LF - 36" Steel Casing; per Linear Foot		
		\$	\$

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
856	200 LF - 42" Steel Casing; per Linear Foot		
	Dollars		
	Cents	\$	\$
856	50 LF - 48" Steel Casing; per Linear Foot		
	Dollars		
	Cents	\$	\$
852/853	22 EA - 4' Diameter Manholes; per Each	\$	
	Dollars	$n_{ik}$	<b>-</b> 5
	Cents	\$	\$
852/853	2 EA - 4' Manhole w/drop Pipe; per Each	Ϋ́,	
	Dollars	<u> </u>	
	Cents	\$ 500	\$_
		JULA	
852/853	197 VF - Extra Depth 4' Diameter Manholes; per	<	
	Vertical Foot		
	<b>kO</b> Cents	\$	\$
852/853	13 EA - 6' Diameter Manhole; per Each		
	Dollars		
	Cents	\$	\$
852/853	312 VF - Extra Depth 6' Discreter Manhole; per Vertical Foot  Dollars  Cents		
	Pollars		
	Cents	\$	\$
	4		
858	342 LF Concrete Encasement (all pipe sizes); per Linear Foot		
	Dollars		
	Cents	\$	\$
866	11,377 LF - Sewer Television Insp. (8" to 27"); per Linear Foot		
	Dollars		•
	Cents	\$	\$
	Out 4-4-1 OAMO Lab Na 40 4500	•	
	Subtotal SAWS Job No. 10-1526:	\$	

**DESCRIPTION & ESTIMATED QUANTITIES** 

**ITEM** 

NO. (Unit Price to be written in words) (Figures) (Figures) **SAWS Job No. 10-1527 DESCRIPTION & ESTIMATED QUANTITIES ITEM UNIT PRICE TOTAL PRICE** NO. (Unit Price to be written in words) (Figures) (Figures) 3330 1 LS - Lift Station #5; per Lump Sum **Dollars** Cents \$ XXXXXXXXX 2730 4,011 LF - 6" HDPE Force Main (all depth); per Linear Foot Cents 2730 60 LF - 6" HDPE Force Main (in casing); per Linear Foot Dollars Q 1 EA - 6" Check Valve (w/Box, complete); per 2640 **Dollars** Cents 2 EA - 6" Plug Valve and Box, complete; per Each 2640 **Dollars** Cents 856 18" casing; per Linear Foot **Dollars** Cents 856 60 LF - 18" Steel Casing; per Linear Foot **Dollars** Cents 413 350 LF - Flowable Fill; per Linear Foot (CoSA) **Dollars** Cents 852 1 LS - Tie to Existing MH; per Lump Sum **Dollars** Cents \$ XXXXXXXXX 855 1 LS - Epoxy Coat MH Riser; per Lump Sum

**UNIT PRICE** 

**TOTAL PRICE** 

Job No. 10-1526 & 10-1527 Verano Phase I Sanitary Sewer Solicitation No. B-10-039-DD

NO.	(Unit Price to be written in words)	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
		\$ <u>XXXXXXXX</u>	\$
503 (CoSA)	90 SY - 5" Concrete Driveway; per Square Yard  Dollars		
(333,1)	Cents	\$	\$
164 (TxDOT)	9,000 SY – Hydromulch; per Square Yard  Dollars  Cents	* ciddinc	<b>&gt;</b>
841	1 LS - Force Main Hydrostatic Testing; per Lump Sum  Dollars	\$sidding	Φ
550	4,054 LF - Trench Excavation Protection; per Linear Foot	200	\$
(CoSA)	Cents	\$	\$
540 (CoSA)	1 LS - Erosion Sedimentation Control; per Lump Sum  Dollars  Cents	\$_XXXXXXXXX	\$
	Subtotal SAWS Job No. 10-1526 (Sew	\$	
	Bid Summary		
	V -00010101 0A110 000 110. 10-1020 (001		
	Subtotal SAWS Job No. 10-1527 (Sew	/er):	
	Line Item "A" Subtotal Base Bid (10-1526 &	10-1527): \$	

Job No. 10-1526 & 10-1527 Verano Phase I Sanitary Sewer Solicitation No. B-10-039-DD

ITEM NO.	DESCRIPTION & ESTIMATED QUANTITIES (Unit Price to be written in words)	UNIT PRICE (Figures)	TOTAL PRICE (Figures)
100	Mobilization		
	1 Lump Sum-Percent of the Line Item "A" Subtotal B written in words	ase Bid	
	Percent (Max. of 10% of the <u>Line Item "A"</u> Subtotal Ba Amount)	sase Bid \$\\$XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	sing s
101	Preparation of Right-of-Way	, BiO	, T
	1 Lump Sum-Percent of the <u>Line Item "A"</u> Subtotal B written in words Percent	sase Bid S	\$
	(Max. of 5% of the <u>Line Item "A"</u> Subtotal Ba		
	Mobilization & Preparation of R.O.W. Su	btotal: \$	
	lump sum bid shall be limited to a maximum	the	
amount. The 101, Prepari shown for Maritten exceright to cap	of Right-of-Way lump sum bid shall be limited to a le Line Item "A" Sub-total base bid is defined as alling Right-of-Way. In the event of a discrepancy Mobilization and Preparation of ROW bid items leds the allowable maximum stated for mobilizatine amount at the percentages shown and adjustion of Right-of-Way)	bid items EXCLUDING Ite between the written per the written percentage wi ation and or preparation o	m 100, Mobilization and Item centage and dollar amount III govern. If the percentage f ROW. SAWS reserves the
	, ot \		_DOLLARS AND
	Y		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 Contra Addendum	actor herein acknowledges receipt of the following:  n Nos		

Job No. 10-1526 & 10-1527 Verano Phase I Sanitary Sewer Solicitation No. B-10-039-DD

#### OWNER RESERVES THE RIGHT TO ACCEPT THE OVERALL MOST RESPONSIBLE BID.

The bidder offers to construct the Project in accordance with the Contract Documents for the contract price, and to complete the Project with <u>240</u> 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 liquidated damages of the project if not completed on time.

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

For Reference Only. Not for the Purpose of Bidding

# **PROPOSAL CERTIFICATION**

Accompanying this proposal is a Bid Bond or Certificon of the San Antonio Water System for	fied or Cashier's Check on a State or National Bank payable to the Order dollars (\$ ),
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	otal bid price. Said bond or check is to be returned to the bidder unless
acceptance and award of the contract to the undersignater System Contract Documents and make Performant 20 calendar days after the award of the Contract to to insure and guarantee the work until final complet payment of all lawful claims for labor performed a	oposal within60 calendar days after the bid opening. Upon gned by the Owner, the undersigned shall execute standard San Antonio ormance and Payment Bonds for the full amount of the contract within secure proper compliance with the terms and provisions of the contract, ion and acceptance, and the guarantee period stipulated, and to guarantee and materials furnished in the fulfillment of the contract.
	Authorization to Proceed within 30 days after the award of the Contract.
The Contractor hereby agrees to commence work uSAWS of the written Authorization to Proceed. Ureceipt of SAWS issued, written Authorization to Padays.	under this Contract within seven (7) Chendar days after issuance by the Juder no circumstances shall the Work commence prior to Contractor's roceed. Work shall be completed in full within consecutive calendar ined in the proposal have been carefully checked and are submitted as
The undersigned certifies that the bid prices contacorrect and final.	ined in the proposal have been carefully checked and are submitted as
In completing the work contained in this proposal discriminate on the grounds of race, color, religion, the implementation of these policies and practices.  Signed:	al the undersigned certifies that bidder's practices and policies do not sex or national origin and that the bidder will affirmatively cooperate in
Signed	Company Representative
% (),	Company Representative
retence	Company Name
rot being	
	Address
Please return bidder's check to:	
	Company Name
	Address



# GOOD FAITH EFFORT PLAN FOR CONSTRUCTION SUB-CONTRACTS FOR

NAME OF PROJECT:

SECTION A - CONTRACTOR INFORMATION: Name of Firm:								
Address:								
City:				State:		٩	Zip: _	
City: State: Zip:  Contact Person: Telephone:  Email Address: Fax:  Is your firm Certified: Yes No: If certified, Certification Number:  Type of Certification: AABE DIBE MBE WBE BE VBE HUB DBE  1. List ALL SUBCONTRACTORS/SUPPLIERS hat will be utilized on this project/contract.								
Email Address	s:							
Is your firm Ce	ertified:	Yes	No:	If certifi	ed, Certif	ication	Number:	
Type of Certific	cation:	AABE		NBE⊘ _	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.			Second	
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.			

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

4. 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 mediums used for soliciting bids from SMWBs. (Please attach a copy of the advertisement(s):
AFFIRMATION
I hereby affirm that the above information is true and complete to the past of my knowledge. I further understand and agree that, this document shall be attached thereto and become a binding part of the contract.  Name and Title of Authorized Official:  Name:
Name and Title of Authorized Official:
Name:
Title:
1110:
Signature: Date:
NOTE:
This Good Faith Effort Plan is reviewed by SAWS Contracting Department. For questions and/or clarifications, please contact the SMWB Program Manager, Ruby A. Perez-Webb at (210 233-3420. If the SMWB goal was not met, the Business Development Liaison will evaluate the "good faith efforts" of a firm The Good Faith Effort Plan must be approved prior to award of the contract.
Recommendation: Approval: Denial:
Signature of Business Development 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 an Verification of and anceled checks paid to State de SMWB participants. Properly identify the project dentify dentif

## 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 Manager of Contract Administration 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 Manager of Contract Administration. If mailing a completed Conflict of Interest questionnaire, mail to: David Gonzales, Manager, Contract Administration, 2800 U.S. Hwy 281 North, San Antonio, TX 212. If delivering a completed Conflict of Interest questionnaire, deliver to contract Administration, Tower 2, 1<sup>st</sup> Floor, Room 171, 2800 U.S. Hwy 281 North an Antonio, TX 78212. Please consult your own legal advisor if you have quotions regarding the statute or form." Tower 2, 1st Floor, Room 171, 2800 U.S. Hwy 281 North an Antonio, TX 78212.

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				