



Ruby Crossing Offsite Sewer Phase 2 (Lift Station) RFCSP
Solicitation Number: CO-00686
Job No.: 22-1633

ADDENDUM 1
September 15, 2023

To Respondent of Record:

This addendum, applicable to work referenced above, is an amendment to the price proposal, plans and specifications and as such will be a part of and included in the Contract Documents. Acknowledge receipt of this addendum by entering the Addendum number and issue date on the space provided in submitted copies of the bid proposal.

CHANGES TO THE SPECIFICATIONS

- 1. REQUEST FOR COMPETITIVE SEALED PROPOSALS.** The last four paragraphs are hereby modified to read as follows:

“For questions regarding this solicitation, technical questions or additional information, please contact Janie M. Powell, Contract Administrator, in writing via email at Janie.Powell@saws.org or by fax to (210) 233-5351 until 4:00 PM (CDT) on September 8, 2023. Answers to the questions will be posted to the web site by 5:00 PM (CDT) on September **20**, 2023 as a separate document or included as part of an addendum. Be advised that firms responding to this RFCSP (Respondents) are prohibited from communicating with any other SAWS staff, the Consultant, the Developer, or COSA officials regarding this RFCSP up until the contract is awarded as outlined in the Instructions to Respondents.

Proposals will be received electronically only, until 10:00 AM (CDT), September **28**, 2023. Electronic proposals will be received via the secure SAWS FTP site. See the Electronic Proposal Opening Instructions attachment for additional information regarding an electronic proposal submittal. Electronic proposals shall be accompanied by a bid bond in an amount not less than five percent of the total proposal price. (Or, if providing SAWS with a cashier's check or certified check in an amount not less than five percent of the total proposal price, SAWS will request this within 24 hours from the Respondent who did not submit a bid bond). Proposals will then be publicly opened and read aloud by Contract Administration via WebEx.

<https://saws.webex.com>

Audio Connection: (210) 233-2090

Meeting number (access code): 2498 258 4538

Meeting password: CO-00686

Respondents will need to submit a request by September **27**, 2023 at 10:00 AM (CDT) to receive access to the File Transfer Protocol (FTP) site via email to Janie.Powell@saws.org. Respondent's email requesting access to the FTP site shall provide the legal name of the Respondent's company and the intended recipient's email address and phone number. No requests for FTP site access will be accepted after September **27**, 2023 at 10:00 AM (CDT).”

- 2. ELECTRONIC PROPOSAL OPENING INSTRUCTIONS.** The header and first two paragraphs are hereby modified to read as follows:

“RUBY CROSSING OFFSITE SEWER PHASE 2 (LIFT STATION) PROJECT
Solicitation Number: CO-00686
ELECTRONIC PROPOSAL OPENING INSTRUCTIONS
September **28, 2023 at 10:00 AM (CDT)**”

In order to receive electronic proposal for this RFCSP, SAWS will utilize a SAWS secured File Transfer Protocol (FTP) site. Only Respondents submitting as Prime Contractors will need to submit their request prior to September 27, 2023 by 10:00 AM (CDT) to receive access to the FTP site via email to Janie.Powell@saws.org. Respondent's email shall provide the legal name of the Respondent's company and the intended recipient's email address and phone number. No requests for FTP site access will be accepted after September 27, 2023 by 10:00 AM (CDT). Once a Respondent is approved for access, an email with a hyperlink to the FTP site and a unique password for the Respondent will be provided to the Respondent's email recipient.

Once access is received, Respondent may upload the required documents per the Respondent's Proposal checklist any time before September 28, 2023 by 10:00 AM (CDT). Please ensure to allow sufficient time should Respondent's experience technical difficulties in uploading the required documents. No changes to the proposal price can be made once the proposal has been submitted."

3. **Supplementary Instructions to Respondents:** Remove the Supplementary Instructions to Respondents in its entirety and replace with the version attached with this addendum. Respondents shall reference the revised Supplementary Instructions to Respondents when submitting a proposal for this RFCSP.
4. **Evaluation Criteria Form:** Remove the Evaluation Criteria Form in its entirety and replace with the version attached with this addendum. Respondents shall reference, as well as utilize, the revised Evaluation Criteria forms when submitting a proposal for this RFCSP. Failure to use the revised Evaluation Criteria forms may result in a deduction of points or the Respondent being found non-responsive.
5. **Required Document Matrix:** Remove the Required Document Matrix in its entirety and replace with the version attached with this addendum. Respondents shall reference the revised Required Document Matrix when submitting a proposal for this RFCSP.
6. **Building Wage Decision:** Remove Building Wage Decision in its entirety and replace with the Building Wage Decision dated 08/25/2023 attached to this addendum.
7. **Respondent's Proposal Checklist.** Remove the Respondent's Proposal Checklist in its entirety and replace with the version attached with this addendum. Respondents shall reference, as well as utilize, the revised Respondent's Proposal Checklist when submitting a proposal for this RFCSP.

CLARIFICATIONS

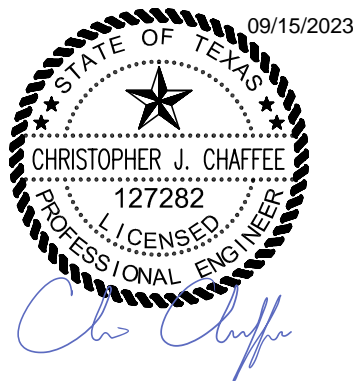
1. The Project Estimated Budget has increased from \$8,000,000.00 to \$15,000,000.00 and has been modified on the SAWS website.
2. The changes to the Supplementary Instructions to Respondents, the Evaluation Criteria Form and Respondent Proposal Checklist are to relocate Safety information for the Prime Contractors as part of the Quality, Reputation and Ability to Deliver Projects on Schedule and within Budget Evaluation Criteria. The Safety Information for the Key Subcontractors will remain in its current location.

END OF ADDENDUM

This Addendum, including these two (2) pages, is forty-four (44) pages with attachments in its entirety.

Attachment:

Supplementary Instructions to Respondents (12 pages)
Evaluation Criteria Form (21 pages)
Required Document Matrix
Respondent's Proposal Checklist (1 page)
Building Wage Decision (7 pages)



SUPPLEMENTARY INSTRUCTIONS TO RESPONDENTS

The San Antonio Water System (SAWS) Board of Trustees and/or its designated representative have determined that the Competitive Sealed Proposals method of procurement will provide the best value for SAWS for this project. This procurement shall conform to Section 2269 of the Texas Government Code.

This document provides general information about the requirements and evaluation for this Request for Competitive Sealed Proposals (RFCSP).

A. EVALUATION OF PROPOSALS

1. SAWS will conduct a comprehensive, fair and impartial evaluation of all Competitive Sealed Proposals received in response to this request within 45 days of receipt of the proposals. SAWS will appoint a selection committee to perform the evaluation. SAWS will evaluate and rank each proposal in relation to the following selection criteria:

Team Qualifications and Experience	17%
Quality, Reputation, and Ability to Deliver Projects on Schedule and within Budget	15%
Project Approach	18%
Price	40%
Small, Minority, and Women-owned Business Participation	<u>10%</u>
Total:	100%

2. During the evaluation and ranking of Respondents' proposals, SAWS reserves the right to consider the following:
 - a. Whether the Respondent can perform the contract within the specified time. In making this determination SAWS may take into account Respondent's existing commitments and whether in SAWS' sole discretion those commitments will adversely impact Respondent's ability to complete the work in the scheduled time.
 - b. The quality and punctuality of performance on any current or previous contracts.
 - c. SAWS may contact references provided by the Respondent, as well as any other references to verify qualifications, experience and performance. In making this determination, SAWS may take into account work performed by the Respondent on any project, including but not limited to SAWS' projects, projects that the Respondent provides as references and any other projects that SAWS has knowledge of.
 - d. Respondent's previous and existing compliance with the applicable laws, ordinances, permits, and regulations.
 - e. Respondent's financial resources and ability to perform the contract.

3. If Respondent fails to provide a response to any of the Evaluation Criteria identified

within this RFCSP, points may be deducted or the proposal may be considered non-responsive and ineligible for consideration.

B. SUMMARY OF WORK

This Summary of Work is being provided to Respondents to better assist them in determining which projects are reasonably comparable to include as part of their proposal to this RFCSP. The work consists of the following:

- a. Construction of a new regional lift station consisting of a wet well, pumps, SCADA, force main, electrical building, generator, and all relevant electrical, I&C, and yard piping.
- b. Careful planning and sequencing of construction activities to tie into existing sanitary sewer infrastructure.

Respondents should reference the Contract Documents prior to submitting a proposal for this RFCSP to fully understand the entire scope of work for this Project.

The decision of “comparability” when evaluating the Respondent’s proposal is at the complete discretion of SAWS.

C. REQUIRED EXPERIENCE

Respondents submitting a proposal for this RFCSP should demonstrate, completely and sufficiently, that rehabilitation, upgrades, or construction of new lift stations and sanitary sewer facilities are a primary business focus and service, and such services have been successfully provided for at least five (5) continuous years.

D. DEFINITIONS

1. Personnel for the purpose of this RFCSP is defined as employees of the Prime Contractor, or any subcontractor(s), affiliates, joint venture partners, or team members, and consultants engaged by any of those entities.
2. The personnel specified below are considered by SAWS to be essential to the work being performed under this Contract, and as such are defined as Key Personnel. Key Personnel include the Project Manager, Quality Control Lead, Project Scheduler, and Project Superintendent. Key Personnel shall be dedicated exclusively to this Project and shall be assigned as full-time employees for the duration of the Project. Prior to diverting any of the specified individuals to other projects, the contractor shall notify the Owner reasonably in advance and shall submit justification (including proposed substitutions) in sufficient detail to permit evaluation of the impact on the project. No diversion shall be made by the contractor without the written consent of the Owner.
3. Subcontractor is defined in Article I, Contract Definitions of the General Conditions of the Contract Documents. Respondents should reference this definition prior to submitting a proposal in response to this Request for Competitive Sealed Proposals

("RFCSP").

4. Key Subcontractors are defined as subcontractors that are responsible for executing a significant portion of the work, and as such are deemed to be essential to the work being performed under this Contract. The Key Subcontractor roles could include wet well and pump installation, electrical, process control and systems integration.

E. RESPONSE FORMAT

1. Team Qualifications and Experience (17 Points)

a. Organizational Structure and Key Information of the Prime Contractor

- i. Provide current business organizational structure, type of business structure, and stability of organization.
- ii. Provide total number of employees and annual company revenues as of December 31, 2022.
- iii. Provide Debarment history for the company for the last ten (10) years.
- iv. Provide any litigation, arbitration, and claims history for the last three (3) years and any litigation, arbitration, and claims history with SAWS regardless of the year they occurred.
- v. Indicate the number of years performing contracting/construction work under current legal business name and/or previous legal business name(s).
- vi. Provide a clear description of the proposed team identifying Key Subcontractor(s), their role on the project, and teaming history. If the Prime Contractor has not worked previously with proposed Key Subcontractor(s), describe the proposed approach for ensuring successful completion of the project in accordance with Contract Documents.
- vii. Provide a 1-page organizational chart that describes the composition of the team for this project. The chart shall include proposed Key Personnel for the Prime Contractor and Key Subcontractor(s). The chart shall also include percent availability (as percentage of total individual's workload) for Key Personnel (Prime and Key Subcontractor(s)) and their proposed role for the duration of the Project.
- viii. Provide a clear description of the proposed team's Key Personnel roles and responsibilities, including Key Personnel from Key Subcontractor(s).

b. Qualifications and Experience of Key Personnel Proposed for this Project

- i. On separate 8 ½" x 11" sheets, provide resumes, one per person and not to exceed one (1) page, for Key Personnel for the Prime Contractor and Key Subcontractor(s) identified on the organizational chart with the Project Manager's resume being first. Key Personnel resumes should include the following information:
 - Name, title, education
 - Number of years of total professional experience
 - Number of years/months with current firm
 - Number of years/months of experience in proposed role for this project

- Description of professional qualifications (to include degrees, licenses, certifications, and associations)
- Brief overview of professional experience
- Detailed description of capabilities and experience relevant to this Project
- List of all other active projects the team member is assigned to for the duration of the Project, to include the phase and percentage of time allocated to each of the other projects. For each project included in each resume, please clearly identify whether the project is with current firm or part of the person's past professional experience.

2. Quality, Reputation, and Ability to Deliver Projects on Schedule and within Budget (15 Points)

a. Prime Contractor On-time Completion on Similar Projects in the Past Ten (10) Years

- List and describe three (3) completed projects within the last ten (10) years of similar size, scope, and complexity to the work described in the Contract Documents for this Project. Respondents should provide references with contact information to include a valid, recently verified email and telephone number for each project listed.

Each project should include the following information (using the evaluation forms provided):

- Project name.
- Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Project Manager.
- List any Key Personnel also proposed on the Ruby Crossing Offsite Sewer Phase 2 (Lift Station) project and the roles served by the proposed Key Personnel on the past project.
- Project is within the last ten (10) years.
- Project has similar size, scope, and complexity to the work described in the Contract Documents.
- Project description and why it is comparable to the size, scope, and complexity for this item.
- Original (bid/price) and final construction in place costs.
- Total costs for all change orders, as well as explanation regarding the reason for specific change orders.
- Construction Contract Notice to Proceed (NTP) Date.
- Original Contract Duration (Specify Calendar Days or Working Days).
- Original Contract Completion Date and Actual Completion Date.
- Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.
- The recovery schedule/plan and implementation of such, if it was required. If a recovery schedule/plan was implemented, describe

whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.

- Describe any project specific challenges and how they were overcome.
- ii. A minimum of one (1) of the three (3) projects listed must have been performed by the proposed Key Personnel (Project Manager, Quality Control Lead, Project Scheduler, and Project Superintendent for this Project.
- If Respondent has SAWS experience, at a minimum, one (1) SAWS project of similar size, scope, and complexity must be included in the list of three (3) projects provided
- iii. The Respondent shall also list all current and recently completed rehabilitation, upgrades and new construction of lift stations and sanitary sewer facility projects performed in the last five (5) years for all Utility Owners in the State of Texas. Respondent shall provide the following information for each project:
- Project name.
 - Utility/Owner name.
 - Date of Notice to Proceed.
 - Project description and how it satisfies the lift station site requirement for this section.
 - Original Contract Time (Specify Calendar Days or Working Days).
 - Original Contract Completion Date and Actual Completion Date. If project is not complete at the time of submission, Respondent shall provide the current % Complete based on contract time.
 - Original (bid/price) and final construction in place costs. If project is not complete at the time of submission, Respondent shall provide the current % Complete based on contract value as of the most recent application for payment.
 - Identify whether the project was completed on-time and within budget, as applicable.

b. Key Subcontractor(s) Performance on Similar Projects in the Past Ten (10) Years

The scope of this Project includes the construction of a new regional lift station consisting of a wet well, pumps, SCADA, force main, electrical building, generator, and all relevant electrical, I&C, and yard piping.

- i. Provide a list of projects, as requested below, that the identified Key Subcontractors' Project Manager and/or Project Superintendent(s) participated in that were of similar size, scope, and complexity to the work described in the Contract Documents that have been completed within the last ten (10) years. Describe the role served by the proposed staff on those projects.
- a. 2 projects for Wet Well and Pump Installation Subcontractor
 - b. 2 projects for the Electrical Subcontractor
 - c. 2 projects for the Process Control and System Integration Subcontractor

- ii. Respondent shall provide a list of two (2) additional projects, for each Key Subcontractor role being replaced, that were of similar scope to the Work that would have been performed by the Key Subcontractor being replaced and that have been completed within the last ten (10) years. Prime Contractor's Key Personnel shall have participated in at least one (1) of the two (2) projects listed for each Key Subcontractor role being replaced.

Each project should include the following information:

- Project name.
- Identify if the Project was performed by **Sub-Contractor** or if Prime Contractor **Self-Performed**
- Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager.
- List any Key Personnel also proposed on the Ruby Crossing Offsite Sewer Phase 2 (Lift Station) project and the roles served by the proposed Key Personnel on the past project.
- Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart.
- Project is within the last ten (10) years.
- Project has similar size, scope, and complexity to the work described in the Contract Documents.
- Project description and why it is comparable to the size, scope, and complexity for this item.
- Original (bid/price) and final construction in place costs.
- Total costs for all change orders, as well as explanation regarding the reason for specific change orders.
- Construction Contract Notice to Proceed (NTP) Date.
- Original Contract Duration (Specify Calendar Days or Working Days).
- Original Contract Completion Date and Actual Completion Date.
- Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.
- The recovery schedule/plan and implementation of such, if it was required. If a recovery schedule/plan was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.
- Describe any project specific challenges and how they were overcome.

If valid contact information is not provided, the project may not be considered and the Respondent's score for this criteria may be reduced and/or Respondent's proposal may be deemed non-responsive.

c. Safety Information for Prime Contractor

- i. Provide records showing Total Recordable Incident Rate (TRIR) for each year for the past five (5) years for the Prime Contractor with backup documentation.
- ii. Provide records detailing all formal Complaints, Inquiries, Investigations, and/or Violations by OSHA or any state or local level OSHA program for the past five (5) years for the Prime Contractor with backup documentation.
- iii. List any fatalities in the company's safety history for the Prime Contractor . If Respondent has had fatalities in their record, please provide a detailed description of the corrective measures taken, new or additional safety training provided, and process improvements made to prevent near-miss incidents and fatalities since the occurrence of the fatality.

3. Project Approach including Delivery Schedule (18 Points)

a. Project Approach

- i. Provide a narrative of the project approach describing how the Respondent will complete this project. Include key milestones, specific critical processes and critical path items, phases and/or sequencing, permits, approvals, coordination with stakeholders, and procurements anticipated to complete the project work. Identify potential risks and describe proposed mitigation measures to ensure on-time completion of the Project.
- ii. Describe availability of equipment and facilities that will be specifically utilized for this Project.
- iii. Provide any innovative ideas for cost savings (due to method or duration) for this project.
- iv. Provide a quality management plan describing how the Prime Contractor will ensure that the necessary steps, safeguards, subcontractor oversight, Quality Assurance/Quality Control processes, and document controls will be implemented in a rigorous manner as to ensure the completeness, workmanship, accuracy, and successful completion of the Project.

b. Project Schedule, Procurement of Long-Lead Items, and Unforeseen Conditions

- i. Provide a detailed, precedence style critical path method (CPM) baseline schedule in Primavera or Microsoft Project. The baseline scheduled must encompass the entire contract duration from Notice to Proceed to the Contract End Date. The baseline schedule must show a completion date (or early completion date) that corresponds to the Contract End Date. The baseline schedule must be inclusive of all work necessary to complete the project including sufficient time necessary for submission and review of submittals, permits, etc. The schedule shall take into consideration sequencing and contractual limitations as described within the Contract Documents. The anticipated notice to proceed (NTP) for this Project is January 2, 2024. Respondent shall use this date for developing the proposed project schedule.
- ii. Identify long-lead items and critical path shop drawing submittals.
- iii. Provide details for procurement of long-lead items including pumps, pipe, and

- other long-lead time equipment devices.
- iv. Provide a description of the project approach for procuring long-lead items, as well as for ensuring critical path items will be addressed adequately.
- v. List and describe any instances in which the Contractor has encountered unforeseen conditions.
 - Identify whether a recovery plan was required.
 - Describe the nature of the issue and whether it was promptly resolved or resulted in the Respondent being asked to demobilize.
- vi. Describe the Respondent's approach towards mitigating and managing unforeseen conditions should they be encountered during the construction of this Project.
- vii. The Respondent shall provide a list of all projects currently under construction in which Key Personnel are involved, as identified in the organizational chart provided in the response for this RFCSP, and the expected completion date that demonstrates Respondent's ability to start and complete the work required by the project.

4. Safety Information for Key Subcontractors on Similar Projects in the Past Five (5) Years

- a. Provide records showing Total Recordable Incident Rate (TRIR) for each year for the past five (5) years for Key Subcontractor(s) with backup documentation.
- b. Provide records detailing all formal Complaints, Inquiries, Investigations, and/or Violations by OSHA or any state or local level OSHA program for the past five (5) years for Key Subcontractor(s) with backup documentation.
- c. List any fatalities in the company's safety history for Key Subcontractor(s). If Key Subcontractor(s) had fatalities in their record, please provide a detailed description of corrective measures taken, new or additional safety training provided, and process improvements made to prevent near-miss incidents and fatalities since the occurrence of the fatality.

5. Price Proposal (40 Points)

The Proposal with the lowest total price will receive forty (40) points. Proposals will receive a percentage of the forty (40) points based on a comparison with the lowest total price proposal as described below.

Computation Steps:

- i. Step 1. Determine lowest total price and award 40 points for price.
- ii. Step 2. Calculate the ratio between the lowest total price and each proposal. Multiply the ratio by 40 to obtain the points earned.

Proposal	Price	Calculation	Points Earned
A	\$9,350,000	$(7,750,665/9,350,000) \times 40$	33.16
B	\$10,125,800	$(7,750,665/10,125,800) \times 40$	30.62
C	\$7,750,665	$(7,750,665/7,750,665) \times 40$	40.00
D	\$8,565,450	$(7,750,665/8,565,450) \times 40$	36.20
E	\$12,700,000	$(7,750,665/12,700,000) \times 40$	24.41

6. Small, Minority, Woman, and Veteran-Owned Business Participation (10 Points)

- a. Equal Employment Opportunity Requirements - SAWS highly encourages Respondents to implement Affirmative Action practices in their employment programs. This means Respondents should not discriminate against any employee or applicant for employment because of race, color, religion, sex, pregnancy, sexual orientation, national origin, political belief or affiliation, age, disability or genetic information.

The SAWS Board of Trustees has adopted a Small, Minority, Woman, and Veteran-owned Business (SMWB) Policy to establish and oversee a program that will support the inclusion of local small, minority, woman, and veteran-owned businesses (SMWB). It is the policy of SAWS that it will ensure that local small, minority, woman, and veteran-owned businesses have an equal opportunity to compete for, receive and participate in SAWS contracts. It is our policy to:

- Ensure nondiscrimination in the award and administration of SAWS contracts;
- Create a level playing field on which SMWBs can compete fairly for SAWS contracts;
- Ensure that only firms that attempt to meet small, minority, and woman-owned business good faith efforts are considered for contract awards.

Respondent's commitment to SAWS SMWB policy will be based on meeting or exceeding the minimum aspirational SMWB goal of 21%. The minimum goal is based on the total contract value. Points will be awarded based on the following tiered scales.

Please note that as of 1/1/2023, an updated SMWB Policy and scoring methodology are being implemented by San Antonio Water System. **The maximum number of Small, Minority, and Woman-owned Business (SMWB) points to be earned is 10 points.** Self-performance and subconsulting may be used to achieve the aspirational goals and earn points. **SMWB Respondents and/or subconsultants must be certified by the South Central Texas Regional Certification Agency. Eligible firms (including MBEs and WBEs) must also be certified as a Small Business Enterprise (SBE), must perform a commercially-useful function on the project, and must have a local presence in the San Antonio Metropolitan Statistical Area in order to be counted for SMWB points.** Please see the Good Faith Effort Plan for definitions of terms. All Respondents, whether SMWB or not, may earn the **maximum number**

of SMWB points (10) by adhering to any combination of the following point structures when attempting to meet the aspirational goals:

A. M/WBE Scoring Method: Up to 10 Points (By percentage). 20.00% M/WBE Goal:
• MBE Participation Percentage between 1% and 4.99%: 1 Point
• MBE Participation Percentage between 5% and 9.99%: 2 Points
• MBE Participation Percentage between 10% and 14.99%: 4 Points
• MBE Participation Percentage between 15% and 16.99%: 5 Points
• MBE Participation Percentage between 17% and 19.99%: 8 Points
• MBE Participation Percentage meeting or exceeding 20.00%: 10 Points
B. SBE (Non-M/WBE) Scoring Method (for participation of firms whose sole certification is “SBE”): Up to 5 Points (By percentage). 5% SBE Participation:
• SBE Participation Percentage between 1% and 1.99%: 1 Point
• SBE Participation Percentage between 2% and 2.99%: 2 Points
• SBE Participation Percentage between 3% and 3.99%: 3 Points
• SBE Participation Percentage between 4% and 4.99%: 4 Points
• SBE Participation Percentage meeting or exceeding 5.00%: 5 Points
C. Optional: Prior subcontractors/supplier utilization compliance averages for the past 2 years may be considered when totaling the SMWB score, based upon data from the Subcontractor Payment & Utilization Reporting (SPUR) System. This applies to SMWB and Non-SMWB Prime Contractors' utilization of their SMWB subcontractors/suppliers. Up to 3 points may be deducted from the SMWB score for discrepancies between the pledged SMWB goal, and the current/ongoing actual utilization of SMWB subcontractors/suppliers on recent SAWS projects. This option does not apply to work order/unspecified contracts.
• Total SMWB Subconsultant compliance discrepancy between 3% - 4%: Deduct 1 Point
• Total SMWB Subconsultant compliance discrepancy between 4% - 5%: Deduct 2 Points
• Total SMWB Subconsultant compliance discrepancy greater than 5%: Deduct 3 Points

- b. All firms submitted as SMWB must provide a copy of their certification certificate.
- c. The SMWB goal is expressed as a percentage of the total dollar amount of the contract going to SMWBs for those areas which the Respondent has subcontracted or anticipates to subcontract, including any future change orders. The goal shall also apply to change orders that require work beyond the scope of services originally required to accomplish the project.
- d. The Respondent agrees to employ good faith efforts to carry out this policy through award of subcontracts to SMWBs to the fullest extent possible.

- e. The SAWS Good Faith Effort Plan (GFEP) will be used for scoring purposes based upon SMWB participation. However, **all subcontractors and/or suppliers, whether SMWB-certified or not, must be listed in the GFEP**, because the information provided in the GFEP will be utilized in the development of the final contract/agreement. The GFEP format is attached as Exhibit "B." This form is required and considered part of the response to the RFCSP. Should the Good Faith Effort Plan not be submitted, the proposal may be considered non-responsive.
- f. The S.P.U.R. System is accessed through a link on SAWS' "Business Center" web page. The Respondent and all subcontractors will be provided a unique login credential and password to access the SAWS subcontractor payment reporting system. The link may be accessed through the following internet address: <https://saws.smwbe.com/>.

Training on the use of the system will be provided by SAWS. After the Respondent receives payment from SAWS, electronic submittals will require data entry of the amount paid to each subcontractor listed on the Contractor's Good Faith Effort Plan.
- g. Please contact the SMWB program manager, Marisol V. Robles, at 210-233-3420 or marisol.robles@saws.org for any questions pertaining to the Good Faith Effort Plan or the SMWB Program.

F. FORMAT OF PROPOSALS

1. Proposals shall be prepared simply and economically, providing a straightforward, concise description of the Respondent's ability to meet the requirements of this RFCSP. Emphasis shall be on the quality, completeness, clarity of content, responsiveness to the requirements, responsiveness to the evaluation criteria, and an understanding of SAWS needs.
2. Respondents shall utilize the fillable evaluation criteria forms provided by SAWS to prepare their response to the RFCSP and should reference the Required Documents Matrix, which identifies which documents are required and won't count toward the page limit. Proposals shall be a **MAXIMUM OF TWENTY-FIVE (25) PRINTED PAGES**, for those pages that do count towards the page limit. Respondents shall respond to each section fully, but are not obligated to use every page set by the limit and are allowed the flexibility to use this page limit as they see fit.
3. Proposals shall be submitted in three (3) pdf files electronically. Respondents should reference the revised Respondent's Proposal Checklist to ensure all required items are included.
4. Respondents shall carefully read the information contained in this RFCSP and submit a complete response to all requirements and questions as directed. Incomplete Proposals will be considered non-responsive and subject to rejection.

5. Proposals and any other information submitted by Respondents in response to this RFCSP shall become the property of SAWS.
6. Proposals shall be prepared using letter-size 8-1/2" x 11" pages. The project schedule and Team Organizational Chart can be prepared using tabloid-size 11" x 17" pages.
7. Respondents shall utilize the Respondent's Proposal Checklist provided in this RFCSP and must provide page numbers for all pages of the proposal.
8. Separate and identify each evaluation criteria response of this RFCSP by use of a divider sheet for ready reference in the order indicated within the Respondent's Proposal Checklist.

REQUIRED DOCUMENT MATRIX

Proposal Packet Items	Ref. Page(s)	Ref. Section	Included in Overall Page Limit <u>25 Pages Total</u> (Yes/No)	Forms Provided in RFCSP
Cover Letter, Tabs, Proposal Table of Contents, etc.			NO	Cover letter (optional); all others Respondent to provide
Bid Bond/Cashier's Check	IR-2	3	NO	Respondent to provide
Statement on President's Executive Order	IR-7	21.(c)	NO	Statement on President's Executive Order Acknowledgement
Proposal Checklist	CH-1		NO	Proposal Checklist Form
Team Qualifications and Experience				
Team Info.	SIR-3	E.1.a.i - vi	YES	Evaluation Criteria Form
Organizational Chart	SIR-3	E.1.a.vii	YES	1 page limit (size 8.5"x11" or 11"x17")
Key Personnel Roles	SIR-3	E.1.a.viii	YES	Evaluation Criteria Form
Financial Statement	SIR-1		NO	
Team Resumes	SIR-3 to SIR-4	E.1.b.i	NO	1 page per person (size 8.5" x 11")
Projects on Schedule and within Budget and Safety				
Prime Contractor Past Projects	SIR-4 to SIR-5	E.2.a.i - ii	YES	Evaluation Criteria Form
Current and Recent Projects	SIR-4 to SIR-5	E.2.a.iii	NO	Evaluation Criteria Form
Key Subcontractor(s) Projects	SIR-5 to SIR-7	E.2.b.i - ii	YES	Evaluation Criteria Form
Prime Contractor Safety Info	SIR-7	E.2.c.i - iii	YES	Evaluation Criteria Form
Project Approach including Delivery Schedule				
Project Approach	SIR-7	E.3.a.i - v	YES	Evaluation Criteria Form
Project Schedule	SIR-8	E.3.b.i - iv	YES	Evaluation Criteria Form
Safety Information for Key Subcontractors	SIR-8		NO	
Respondent Questionnaire	RQ-1 to RQ-3		NO	Respondent Questionnaire Form
Price Proposal	BP		NO	Price Proposal Form
Proposal Certification	PC-1		NO	Proposal Certification Form
Good Faith Effort Plan (GFEP)	GFEP-1		NO	Good Faith Effort Plan Form
SMWB Certifications	SIR-10 to SIR-12	E.5.a - g	NO	if including Respondent to provide
Conflict of Interest Questionnaire	Form CIQ		NO	Conflict of Interest Questionnaire Form
W-9	Form W-9		NO	W-9 Form
Proof of Insurability	WC1 to WC3 and ICS		NO	Respondent to provide
Notes: 1. Respondent shall check the SAWS website to verify the number of Addendums and ensure the correct version of the forms are being utilized prior to submitting their proposal. 2. For sections where no page limit applies as indicated on this matrix, an appendix may be used if desired.				

EVALUATION CRITERIA FORM

The intent of this document is to provide Respondents a structure for their responses. While there are page limits for this solicitation, there are no character limitations.

Respondents should provide answers to the questions below in the order and spaces provided to ensure continuity between Respondent's submissions.

When responding to the questions below, Respondents should use the space provided in this form, unless otherwise indicated. Stating "See Attached" or "See Following Pages" are not acceptable responses. If the Response Forms provided here are not utilized, the information provided by the Respondent will not be considered and the Respondent's score for the evaluation criteria in question may be reduced and/or Respondent's proposal may be deemed non-responsive.

If all fields are not completed, the proposal may be deemed non-responsive.

1. Team Qualifications and Experience (17 Points)

a. Organizational Structure and Key Information of the Prime Contractor

Prior to responding to this section, refer to the Supplementary Instructions to Respondents for definitions and other requirements.

- i. Provide current business organizational structure, type of business structure, and stability of organization.
- ii. Provide total number of employees and annual company revenues as of December 31, 2022.
- iii. Provide the Debarment history for the company for the last ten (10) years.
- iv. Provide any litigation, arbitration, and claims history for the last three (3) years and any litigation, arbitration, and claims history with SAWS regardless of the year they occurred.
- v. Indicate the number of years performing contracting/construction work under current legal business name and/or previous legal business name(s).
- vi. Provide a clear description of the proposed team identifying Key Subcontractor(s), their role on the project, and teaming history. If the Prime Contractor has not worked previously with proposed Key Subcontractor(s), describe the proposed approach for ensuring successful completion of the project in accordance with Contract Documents.

- vii. Provide a 1-page organizational chart that describes the composition of the team for this project. The chart shall include proposed Key Personnel for the Prime Contractor and Key Subcontractor(s). The chart shall also include percent availability (as percentage of total individual's workload) for Key Personnel (Prime and Key Subcontractor(s)) and their proposed role for the duration of the Project.
- viii. Provide a clear description of the proposed team's Key Personnel roles and responsibilities, including Key Personnel from Key Subcontractor(s).

b. Qualifications and Experience of Key Personnel Proposed for this Project

Prior to responding to this section, refer to the Supplementary Instructions to Respondents for definitions and other requirements.

- i. *Using separate 8 ½" x 11" sheets, titled "Team Qualifications and Experience – Resume" inserted immediately following this Section:*
Provide resumes for Key Personnel for the Prime Contractor and Key Subcontractor(s) identified on the organizational chart, one per person, not to exceed one (1) page each with the Project Manager's resume being first.

As part of this criteria, use the check boxes below as a checklist to help ensure the information above is understood and information provided follows the guidelines listed above.

- Project Manager's resume is first
- Resumes for all Key Personnel for the Prime Contractor have been included
- Resumes for all Key Personnel for the Prime Contractor have been identified on the organizational chart
- Resumes for all Key Personnel for the Prime Contractor do not exceed one (1) page each
- Resumes for all Key Personnel for the Subcontractors have been included
- Resumes for all Key Personnel for the Subcontractors have been identified on the organizational chart
- Resumes for all Key Personnel for the Subcontractors do not exceed one (1) page each
- All resumes provided include the following information:
 - o Name, title, education
 - o Number of years of total professional experience
 - o Number of years/months with current firm
 - o Number of years/months of experience in proposed role for this

- project
- Description of professional qualifications (to include licenses, certifications, and associations)
 - Brief overview of professional experience.
 - Detailed description of capabilities and experience relevant to this Project.
 - List of all other active projects the team member is assigned to for the duration of the Project, to include the phase and percentage of time allocated to each of the other projects. For each project included in each resume, please clearly identify whether the project is with current firm or part of the person's past professional experience.

END OF TEAM QUALIFICATIONS AND EXPERIENCE CRITERIA

2. Quality, Reputation, and Ability to Deliver Projects on Schedule and within Budget (15 Points)

a. Prime Contractor On-time Completion on Similar Projects in the Past Ten (10) Years

i. *Using the tables provided:*

List and describe three (3) completed projects within the last ten (10) years of similar size, scope, and complexity to the work described in the Contract Documents for this Project. Respondents should provide references with contact information to include a valid, recently verified, email and telephone number for each project listed.

ii. A minimum of one (1) of the three (3) projects listed must have been performed by the proposed Key Personnel (Project Manager, Quality Control Lead, Project Scheduler, and Project Superintendent, for this Project.

- If Respondent has SAWS experience, at a minimum, one (1) SAWS project of similar size, scope, and complexity must be included in the list of three (3) projects provided

iii. The Respondent shall also list all current and recently completed rehabilitation, upgrades and new construction of lift stations and sanitary sewer facility projects performed in the last five (5) years for all Utility Owners in the State of Texas. Respondent shall provide the following information for each project:

- Project name.
- Utility/Owner name.
- Date of Notice to Proceed.
- Project description and how it satisfies the lift station site requirement for this section.
- Original Contract Time (Specify Calendar Days or Working Days).
- Original Contract Completion Date and Actual Completion Date. If project is not complete at the time of submission, Respondent shall provide the current % Complete based on contract time.
- Original (bid/price) and final construction in place costs. If project is not complete at the time of submission, Respondent shall provide the current % Complete based on contract value as of the most recent application for payment.

If valid contact information is not provided, the project will not be considered and the Respondent's score for this criteria may be reduced and/or Respondent's proposal may be deemed non-responsive.

Project #1

Project Name:	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Project Manager:	
Role served by the proposed Key Personnel on the project	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each:	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Project #2

Project Name:	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Project Manager:	
Role served by the proposed Key Personnel on the project	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each:	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Project #3

Project Name:	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Project Manager:	
Role served by the proposed Key Personnel on the project	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each:	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

- iv. The Respondent shall also list all current and recently completed rehabilitation, upgrades and new construction of lift stations and sanitary sewer facility projects performed in the last five (5) years for all Utility Owners in the State of Texas. Respondent shall provide the following information for each project:

Project #1

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Brief description on how this satisfies the lift station site requirement for this section	
Original Contract Time (specify calendar days or working days):	
Original Contract Completion Date:	
Actual Contract Completion Date (if not complete, provide % complete based on Contract Time):	
Original Bid Price / Price Proposal:	
Final Construction In-Place Cost (if not complete, provide % complete based on Contract Value as of the most recent application for payment):	
Was the project completed on-time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the project completed within budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Project #2

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Brief description on how this satisfies the lift station site requirement for this section	
Original Contract Time (specify calendar days or working days):	
Original Contract Completion Date:	
Actual Contract Completion Date (if not complete, provide % complete based on Contract Time):	
Original Bid Price / Price Proposal:	
Final Construction In-Place Cost (if not complete, provide % complete based on Contract Value as of the most recent application for payment):	
Was the project completed on-time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the project completed within budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Project #3

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Brief description on how this satisfies the lift station site requirement for this section	
Original Contract Time (specify calendar days or working days):	
Original Contract Completion Date:	
Actual Contract Completion Date (if not complete, provide % complete based on Contract Time):	
Original Bid Price / Price Proposal:	
Final Construction In-Place Cost (if not complete, provide % complete based on Contract Value as of the most recent application for payment):	
Was the project completed on-time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the project completed within budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Project #4

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Brief description on how this satisfies the lift station site requirement for this section	
Original Contract Time (specify calendar days or working days):	
Original Contract Completion Date:	
Actual Contract Completion Date (if not complete, provide % complete based on Contract Time):	
Original Bid Price / Price Proposal:	
Final Construction In-Place Cost (if not complete, provide % complete based on Contract Value as of the most recent application for payment):	
Was the project completed on-time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the project completed within budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Project #5

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Brief description on how this satisfies the lift station site requirement for this section	
Original Contract Time (specify calendar days or working days):	
Original Contract Completion Date:	
Actual Contract Completion Date (if not complete, provide % complete based on Contract Time):	
Original Bid Price / Price Proposal:	
Final Construction In-Place Cost (if not complete, provide % complete based on Contract Value as of the most recent application for payment):	
Was the project completed on-time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was the project completed within budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Tables above are to be copied as many times as necessary in order to list all current and recently completed lift station site projects performed in the last five (5) years for all Utility Owners in the State of Texas.

b. Key Subcontractors Performance on Similar Projects in the Past Ten (10) Years

The scope of this Project includes mostly installation of infrastructure related to the lift station. For the purposes of this RFCSP, installation of site piping, mechanical, electrical, and plumbing infrastructure are examples of Key Subcontractor’s roles.

Using the tables provided below:

- i. Provide a list of two (2) projects that the identified Key Subcontractors’ Project Manager and/or Project Superintendent(s) participated in that were of similar size, scope, and complexity to the work described in the Contract Documents that have been completed within the last ten (10) years. Describe the role served by the proposed staff on those projects.
 - 2 projects for Wet Well and Pump Installation Subcontractor
 - 2 projects for the Electrical Subcontractor
 - 2 projects for the Process Control and System Integration Subcontractor
 - 2 projects for the Prime Contractor for each Key Subcontractor Role they wish to self-perform.

- ii. Respondent shall provide a list of two (2) additional projects, for each Key Subcontractor role being replaced, that were of similar scope to the Work that would have been performed by the Key Subcontractor being replaced and that have been completed within the last ten (10) years. Prime Contractor’s Key

Personnel shall have participated in at least one (1) of the two (2) projects listed for each Key Subcontractor role being replaced.

If valid contact information is not provided, the project will not be considered and the Respondent's score for this criteria may be reduced and/or Respondent's proposal may be deemed non-responsive.

Key Sub-Contractor Performance Project #1

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Key Sub-Contractor Performance Project #2

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Key Sub-Contractor Performance Project #3

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Key Sub-Contractor Performance Project #4

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Key Sub-Contractor Performance Project #5

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

Key Sub-Contractor Performance Project #6

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name and contact information to include a valid, recently verified email and telephone number for Utility/Owner Project Manager:	
Role served by the proposed Key Personnel on the Project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Project team(s) involved in this Project were identified on the organizational chart:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project has similar size, scope, and complexity to the work described in the Contract Documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project description and why it is comparable to the size, scope and/or complexity for this item:	
Original bid/price and final construction in place costs:	
Total costs for all change orders, as well as an explanation regarding the reason for specific change orders:	
Construction Contract Notice to Proceed (NTP) Date:	
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract. If Contract time extensions were added, provide a short explanation of each.	
The recovery schedule/plan and implementation of such, if it was required. If a recovery/plan schedule was implemented, describe whether the project was successfully brought back on schedule. Please discuss, as necessary and deemed appropriate.	
Describe any project specific challenges and how they were overcome.	

c. Safety Information for Prime Contractor:

- i. Provide records showing Total Recordable Incident Rate (TRIR) for each year for the past five (5) years for the Prime Contractor with backup documentation.
- ii. Provide records detailing all formal Complaints, Inquiries, Investigations, and/or Violations by OSHA or any state or local level OSHA program for the past five (5) years for the Prime Contractor with backup documentation.
- iii. List any fatalities in the company’s safety history for the Prime Contractor. If Respondent has had fatalities in their record, please provide a detailed description of corrective measures taken, new or additional safety training provided, and process improvements made to prevent near-miss incidents and fatalities since the occurrence of the fatality.

Company Names(s)	TRIR	TRIR	TRIR	TRIR	TRIR	Fatalities
	2022	2021	2020	2019	2018	
Prime Contractor						

END OF QUALITY, REPUTATION, AND ABILITY TO DELIVER PROJECTS ON SCHEDULE AND WITHIN BUDGET CRITERIA

3. Project Approach including Delivery Schedule (18 Points)

a. Project Approach

- i. Provide a narrative of the project approach describing how the Respondent will complete this project. Include key milestones, specific critical processes and critical path items, phases and/or sequencing, permits, approvals, coordination with stakeholders, and procurements anticipated to complete the project work. Identify potential risks and describe proposed mitigation measures to ensure on-time completion of the Project.
- ii. Describe availability of equipment and facilities that will be specifically utilized for this Project.
- iii. Provide any innovative ideas for cost savings (due to method or duration) for this project.
- iv. Provide a quality management plan describing how the Prime Contractor will ensure that the necessary steps, safeguards, subcontractor oversight, Quality Assurance/Quality Control processes, and document controls will be implemented in a rigorous manner as to ensure the completeness, workmanship, accuracy, and successful completion of the Project.

b. Project Schedule, Procurement of Long-Lead Items, and Unforeseen Conditions

Prior to responding to this section, refer to the Supplementary Instructions to Respondents for definitions and other requirements.

- i. Provide a detailed, precedence style critical path method (CPM) baseline schedule in Primavera or Microsoft Project. The baseline schedule must encompass the entire contract duration from Notice to Proceed to the Contract End Date. The baseline schedule must show a completion date (or early completion date) that corresponds to the Contract End Date. The baseline schedule must be inclusive of all work necessary to complete the project including sufficient time necessary for submission and review of submittals, permits, etc. The schedule shall take into consideration sequencing and contractual limitations as described within the Contract Documents. The anticipated notice to proceed (NTP) for this Project is January 2, 2024. Respondent shall use this date for developing the proposed project schedule.
- ii. Identify long-lead items and critical path shop drawing submittals.
- iii. Provide details for procurement of long-lead items including pumps, pipe, and other long-lead time equipment devices.
- iv. Provide a description of the project approach for procuring long-lead items, as well as for ensuring critical path items will be addressed adequately.
- v. List and describe any instances in which the Contractor has encountered unforeseen conditions.
 - Identify whether a recovery plan was required.
 - Describe the nature of the issue and whether it was promptly resolved or resulted in the Respondent being asked to demobilize.
- vi. Describe the Respondent's approach towards mitigating and managing unforeseen conditions should they be encountered during the construction of this Project.
- vii. The Respondent shall provide a list of all projects currently under construction in which Key Personnel are involved, as identified in the organizational chart provided in the response for this RFCSP, and the expected completion date that demonstrates Respondent's ability to start and complete the work required by the project.

END OF PROJECT APPROACH INCLUDING DELIVERY SCHEDULE CRITERIA

4. Safety Information for Key Subcontractors on Similar Projects in the Past Five (5) Years:

- a. Provide records showing Total Recordable Incident Rate (TRIR) for each year for the past five (5) years for Key Subcontractor(s) with backup documentation.
- b. Provide records detailing all formal Complaints, Inquiries, Investigations, and/or Violations by OSHA or any state or local level OSHA program for the past five (5) years for Key Subcontractor(s) with backup documentation.
- c. List any fatalities in the company’s safety history for Key Subcontractor(s). If Key Subcontractor(s) had fatalities in their record, please provide a detailed description of corrective measures taken, new or additional safety training provided, and process improvements made to prevent near-miss incidents and fatalities since the occurrence of the fatality.

Company Names(s)	TRIR	TRIR	TRIR	TRIR	TRIR	Fatalities
	2022	2021	2020	2019	2018	
Key Subcontractor						
Key Subcontractor						
Key Subcontractor						
Key Subcontractor						
Key Subcontractor						

END OF SAFETY INFORMATION FOR KEY SUBCONTRACTORS ON SIMILAR PROJECTS IN THE PAST FIVE (5) YEARS CRITERIA

"General Decision Number: TX20230231 08/25/2023

Superseded General Decision Number: TX20220231

State: Texas

Construction Type: Building

County: Bexar County in Texas.

BUILDING CONSTRUCTION PROJECTS (does not include single family homes or apartments up to and including 4 stories).

Note: Contracts subject to the Davis-Bacon Act are generally required to pay at least the applicable minimum wage rate required under Executive Order 14026 or Executive Order 13658. Please note that these Executive Orders apply to covered contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but do not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60).

If the contract is entered into on or after January 30, 2022, or the contract is renewed or extended (e.g., an option is exercised) on or after January 30, 2022:	. Executive Order 14026 generally applies to the contract. . The contractor must pay all covered workers at least \$16.20 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in 2023.
If the contract was awarded on or between January 1, 2015 and January 29, 2022, and the contract is not renewed or extended on or after January 30, 2022:	. Executive Order 13658 generally applies to the contract. . The contractor must pay all covered workers at least \$12.15 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on that contract in 2023.

The applicable Executive Order minimum wage rate will be adjusted annually. If this contract is covered by one of the Executive Orders and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must still submit a conformance request.

Additional information on contractor requirements and worker protections under the Executive Orders is available at <http://www.dol.gov/whd/govcontracts>.

Modification Number	Publication Date
0	01/06/2023
1	01/13/2023

2 02/03/2023
 3 04/14/2023
 4 08/25/2023

* ASBE0087-014 06/04/2023

	Rates	Fringes
ASBESTOS WORKER/HEAT & FROST INSULATOR (Duct, Pipe and Mechanical System Insulation)....	\$ 28.95	8.39

 BOIL0074-003 01/01/2021

	Rates	Fringes
BOILERMAKER.....	\$ 29.47	24.10

 ELEC0060-003 06/01/2022

	Rates	Fringes
ELECTRICIAN (Communication Technician Only).....	\$ 31.95	15%+6.41

 ELEC0060-004 06/01/2022

	Rates	Fringes
ELECTRICIAN (Excludes Low Voltage Wiring).....	\$ 31.95	15%+6.41

 ELEV0081-001 01/01/2023

	Rates	Fringes
ELEVATOR MECHANIC.....	\$ 46.83	37.335+a+b

FOOTNOTES:

a. 6% under 5 years based on regular hourly rate for all hours worked. 8% over 5 years based on regular hourly rate for all hours worked.

b. Holidays: New Year's Day; Memorial Day; Independence Day; Labor Day; Thanksgiving Day; Friday after Thanksgiving Day; Christmas Day; and Veterans Day.

 ENGI0450-002 04/01/2014

	Rates	Fringes
POWER EQUIPMENT OPERATOR Cranes.....	\$ 34.85	9.85

 IRON0066-013 06/01/2022

	Rates	Fringes
IRONWORKER, STRUCTURAL.....	\$ 25.25	7.28

 IRON0084-011 06/01/2022

	Rates	Fringes
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IRONWORKER, ORNAMENTAL.....\$ 26.76 7.88

* PLUM0142-009 07/01/2023

	Rates	Fringes
HVAC MECHANIC (Electrical Temperature Control Installation & Unit Installation Only).....	\$ 35.95	11.25
PIPEFITTER (Including HVAC Pipe Installation).....	\$ 35.95	11.25
Including HVAC Pipe Installation		
PLUMBER.....	\$ 35.95	11.25
Excludes HVAC Pipe Installation		

SFTX0669-002 04/01/2023

	Rates	Fringes
SPRINKLER FITTER (Fire Sprinklers).....	\$ 34.60	23.30

* SHEE0067-004 07/03/2023

	Rates	Fringes
Sheet metal worker Excludes HVAC Duct Installation.....	\$ 30.24	15.89
HVAC Duct Installation Only.	\$ 30.24	15.89

* SUTX2014-006 07/21/2014

	Rates	Fringes
BRICKLAYER.....	\$ 22.15	0.00
CARPENTER (Acoustical Ceiling Installation Only).....	\$ 17.83	0.00
CARPENTER (Form Work Only).....	\$ 13.63 **	0.00
CARPENTER, Excludes Acoustical Ceiling Installation, Drywall Hanging, Form Work, and Metal Stud Installation.....	\$ 16.86	4.17
CAULKER.....	\$ 15.00 **	0.00
CEMENT MASON/CONCRETE FINISHER...	\$ 22.27	5.30
DRYWALL FINISHER/TAPER.....	\$ 13.81 **	0.00
DRYWALL HANGER AND METAL STUD INSTALLER.....	\$ 15.18 **	0.00
ELECTRICIAN (Low Voltage Wiring Only).....	\$ 20.39	3.04
IRONWORKER, REINFORCING.....	\$ 12.27 **	0.00
LABORER: Common or General.....	\$ 10.75 **	0.00

LABORER: Mason Tender - Brick...	\$ 11.88 **	0.00
LABORER: Mason Tender - Cement/Concrete.....	\$ 12.00 **	0.00
LABORER: Pipelayer.....	\$ 11.00 **	0.00
LABORER: Roof Tearoff.....	\$ 11.28 **	0.00
LABORER: Landscape and Irrigation.....	\$ 8.00 **	0.00
OPERATOR: Backhoe/Excavator/Trackhoe.....	\$ 15.98 **	0.00
OPERATOR: Bobcat/Skid Steer/Skid Loader.....	\$ 14.00 **	0.00
OPERATOR: Bulldozer.....	\$ 14.00 **	0.00
OPERATOR: Drill.....	\$ 14.50 **	0.00
OPERATOR: Forklift.....	\$ 12.50 **	0.00
OPERATOR: Grader/Blade.....	\$ 23.00	5.07
OPERATOR: Loader.....	\$ 12.79 **	0.00
OPERATOR: Mechanic.....	\$ 18.75	5.12
OPERATOR: Paver (Asphalt, Aggregate, and Concrete).....	\$ 16.03 **	0.00
OPERATOR: Roller.....	\$ 12.00 **	0.00
PAINTER (Brush, Roller and Spray), Excludes Drywall Finishing/Taping.....	\$ 13.07 **	0.00
ROOFER.....	\$ 12.00 **	0.00
TILE FINISHER.....	\$ 11.32 **	0.00
TILE SETTER.....	\$ 14.94 **	0.00
TRUCK DRIVER: Dump Truck.....	\$ 12.39 **	1.18
TRUCK DRIVER: Flatbed Truck.....	\$ 19.65	8.57
TRUCK DRIVER: Semi-Trailer Truck.....	\$ 12.50 **	0.00
TRUCK DRIVER: Water Truck.....	\$ 12.00 **	4.11

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

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** Workers in this classification may be entitled to a higher minimum wage under Executive Order 14026 (\$16.20) or 13658 (\$12.15). Please see the Note at the top of the wage determination for more information.

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at <https://www.dol.gov/agencies/whd/government-contracts>.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of ""identifiers"" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

Union Rate Identifiers

A four letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than ""SU"" or ""UAVG"" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing this classification and rate.

Survey Rate Identifiers

Classifications listed under the ""SU"" identifier indicate that no one rate prevailed for this classification in the survey and the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and

non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

Survey wage rates are not updated and remain in effect until a new survey is conducted.

Union Average Rate Identifiers

Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

WAGE DETERMINATION APPEALS PROCESS

1.) Has there been an initial decision in the matter? This can be:

- * an existing published wage determination
- * a survey underlying a wage determination
- * a Wage and Hour Division letter setting forth a position on a wage determination matter
- * a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour National Office because National Office has responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations
Wage and Hour Division
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

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END OF GENERAL DECISIO"

RESPONDENT'S PROPOSAL CHECKLIST

Project Name: Ruby Crossing Offsite Sewer Phase 2 (Lift Station)

SAWS Job No. 22-1633

SAWS Solicitation Number: CO-00686

FILE 1

Titled: **PROPOSAL_CO00686_FIRM NAME**

- Signed Price Proposal/Acknowledgement of Addenda (BP-1)
- General Price Proposal Items (latest versions)
- Signed Proposal Certification Page (PC-1)
- Bid Bond*
- Financial Statement

*If proposal is submitted electronically without Bid Bond, SAWS will require check within 24 hour of bid opening

- Cashier's Check or Certified Check

FILE 2

Titled: **ORIGINAL PROPOSAL_CO00686_FIRM NAME**

- Proposal Checklist
- Statement on President's Executive Orders – Page IR – 8
- Good Faith Effort Plan
- Conflict of Interest Questionnaire – Form CIQ (Rev. 11/30/2015)
- W-9
- Proof of Insurability (Letter from Insurer or Sample Certificate of Insurance)
- Respondent Questionnaire
- Evaluation Criteria Form
 - Team Qualifications and Experience with Resumes and Organizational Chart
 - Quality, Reputation, and Ability to Deliver Projects on Schedule and within Budget
 - Safety Information for Prime Contractor on Similar Projects in the Past Five (5) Years
 - Project Approach including Delivery Schedule
 - Safety Information for Key Subcontractors on Similar Projects in the Past Five (5) Years

FILE 3

Titled: **COPY_CO00686_FIRM NAME** (Excludes Price Proposal and Financial Statement)

- Proposal Checklist
- Respondent Questionnaire
- Evaluation Criteria Form
 - Team Qualifications and Experience with Resumes and Organizational Chart
 - Quality, Reputation, and Ability to Deliver Projects on Schedule and within Budget
 - Safety Information for Prime Contractor on Similar Projects in the Past Five (5) Years
 - Project Approach including Delivery Schedule
 - Safety Information for Key Subcontractors on Similar Projects in the Past Five (5) Years

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

Signature

Date

Printed Name

Title