



HICKORY HOLLOW ELEVATED STORAGE TANK REHABILITATION PROJECT

Solicitation Number: CO-00672

Job No.: 22-0107

ADDENDUM 1

July 14th, 2023

To Bidder of Record:

This addendum, applicable to work referenced above, is an amendment to the bid 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.

RESPONSES TO QUESTIONS

1. Question: Can you please provide evaluation criteria form in Word format?

Response: Evaluation Word forms are now posted and can be found at the link below:

https://apps.saws.org/business_center/contractsol/Drill.cfm?id=4239&view=Yes

CHANGES TO THE SPECIFICATIONS

1. Revision to Pg. IV-1. REQUEST FOR COMPETITIVE SEALED PROPOSALS.

The first paragraph is modified to read as follows:

“Sealed proposals are requested by the San Antonio Water System for the rehabilitation and construction of **0.5-million-gallon** Hickory Hollow Elevated Storage Tank Rehabilitation Project, SAWS Job No. 22-0107.”

2. Revision to SUPPLEMENTARY INSTRUCTIONS TO RESPONDENTS.

A. E.2.a.i

- i. Replace “fifteen (15)” with “ten (10)”.

3. Revision to EVALUATION CRITERIA FORM.

Remove and replace the “Evaluation Criteria Form” in its entirety with the attached updated form. The 6th row of the Tables on pages EV-15, EV-16 and EV-17 have been revised to say “Project is within the last **ten (10)** years.” Failure to use the revised version may result in bid being found non-responsive.

END OF ADDENDUM 1

This Addendum is forty-five (45) pages in its entirety.

Attachments:

Evaluation Criteria Form (44 Pages)

V. Ryan Sowa
Kimley-Horn & Associates

b. Proposed Team Structure and Key Personnel Roles and Responsibilities

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

- i. 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.

(Insert 1-page organizational chart here)

- ii. 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.

(Use the table provided below. Add rows as needed based on the proposed team for this project.)

Team Member	Company Name	Proposed Role	Worked with in the Past
Prime Contractor			
Key Subcontractor #1			<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #2			<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #3			<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #4			<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #5			<input type="checkbox"/> Yes <input type="checkbox"/> No

Describe teaming history between Prime Contractor and proposed Key Subcontractor(s):
(Provide answer here)

Proposed approach for managing Subcontractor(s), including Key Subcontractor(s):
(Provide answer here)

- iii. Provide a clear description of the proposed team’s Key Personnel roles and responsibilities, including Key Personnel from Key Subcontractor(s).

(Use the table provided below. Add rows as needed based on the proposed team composition for this project.)

Team Member	Proposed Key Personnel Role	Name of Key Personnel	Included in Org Chart?
Prime Contractor	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	QC Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Scheduler		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Safety Coordinator		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #1	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #2	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #3	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #4	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Subcontractor #5	Project Manager		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Project Superintendent		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

- i. *Using separate 8 ½” x 11” sheet(s), 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 Key Subcontractor(s) have been included
- Resumes for all Key Personnel for the Key Subcontractor(s) have been identified on the organizational chart
- Resumes for all Key Personnel for the Key Subcontractor(s) do not exceed one (1) page each
- All resumes provided include the following information:
 - Name, job 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.

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(Insert proposed Project Manager's Resume, 1 page)

(Insert proposed Key Personnel's Resume, 1 page)

(Insert proposed Key Personnel's Resume, 1 page)

(Insert proposed Key Personnel's Resume, 1 page)

(Insert proposed Key Personnel's Resume, 1 page)

(If more resumes are to be included, please insert a page break and insert the 1-page resume for additional Key Personnel as required.)

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

(Use the tables provided below to respond to the following.)

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. Key Personnel must have participated in a minimum of two (2) of the three (3) projects listed. Project Manager must have participated in a minimum of one (1) of the three (3) projects listed. Project Superintendent must have participated in a minimum of one (1) of the three (3) projects listed. QC Manager must have participated in a minimum of one (1) of the three (3) projects listed. Project Scheduler must have participated in a minimum of one (1) of the three (3) projects listed. Safety Coordinator must have participated in a minimum of one (1) of the three (3) projects listed. Key Personnel's role on project reference must have been the same as the role proposed 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 the three (3) projects provided.

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

Project #1

Project Name:	
Utility/Owner name:	
Utility/Owner Project Manager's name and contact information to include a valid, recently verified email and telephone number:	
Proposed Contractor's Key Personnel who participated on this project:	
Key Personnel's role on this 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
Detailed project description and explanation for 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:	
Identify whether the project was completed on-time and within budget:	On-time: <input type="checkbox"/> Yes <input type="checkbox"/> No Within budget: <input type="checkbox"/> Yes <input type="checkbox"/> No
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Substantial Completion Date and Actual Substantial Completion Date:	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract:	
Actual number of days added through change orders. If Contract time extensions were added to the contract as a result of Prime Contractor's responsibilities, 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.	

Project #2

Project Name:	
Utility/Owner name:	
Utility/Owner Project Manager's name and contact information to include a valid, recently verified email and telephone number:	
Proposed Contractor's Key Personnel who participated on this project:	
Key Personnel's role on this 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
Detailed project description and explanation for 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:	
Identify whether the project was completed on-time and within budget:	On-time: <input type="checkbox"/> Yes <input type="checkbox"/> No Within budget: <input type="checkbox"/> Yes <input type="checkbox"/> No
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Substantial Completion Date and Actual Substantial Completion Date:	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract:	
Actual number of days added through change orders. If Contract time extensions were added to the contract as a result of Prime Contractor's responsibilities, 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.	

Project #3

Project Name:	
Utility/Owner name:	
Utility/Owner Project Manager's name and contact information to include a valid, recently verified email and telephone number:	
Proposed Contractor's Key Personnel who participated on this project:	
Key Personnel's role on this 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
Detailed project description and explanation for 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:	
Identify whether the project was completed on-time and within budget:	On-time: <input type="checkbox"/> Yes <input type="checkbox"/> No Within budget: <input type="checkbox"/> Yes <input type="checkbox"/> No
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Substantial Completion Date and Actual Substantial Completion Date:	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract:	
Actual number of days added through change orders. If Contract time extensions were added to the contract as a result of Prime Contractor's responsibilities, 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.	

- iii. The Respondent shall provide a list of all current and recently completed, within the past five (5) years, tank rehabilitation projects for all Utility Owners in the State of Texas. Respondent shall provide the following information for each project.

(Use the table provided below to respond. Repeat the table as many times as needed to provide the information requested for all relevant projects.)

Project #1

Project Name:	
Utility / Owner Name:	
Date of Notice to Proceed:	
Original Contract Time (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 percent (%) complete based on Contract Value and 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?	

- iv. 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.

(Use the table provided below to respond. Insert additional rows to the table above, as needed.)

Key Personnel Name	Company Affiliation	Project Name	% Time Allocated	Project Completion Date

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

(Use the tables provided below to respond)

- i. Provide a list of two (2) projects that the identified Key Electrical, Instrumentation and Controls Subcontractor has completed within the last ten (10) years. The projects must be of similar size, scope, and complexity to the work described in the Contract Documents. Subcontractor's Project Manager and Project Superintendent shall have participated in a minimum of one of the two (2) projects. Key Personnel's role on project reference must have been the same as the role proposed for this Project.
- ii. If Prime Contractor is planning to self-perform the Work in accordance with the Contract Documents and no Key Subcontractor(s) have been identified in the Response, 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 in the State of Texas within the last ten (10) years. Prime Contractor's Key Personnel shall have participated in a minimum of one (1) of the two (2) projects listed, for each Key Subcontractor role being replaced. Describe the role served by the proposed staff on those projects.

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

Key Electrical, Instrumentation and Controls Subcontractor Performance Project #1

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name:	
Utility/Owner Project Manager's name: and contact information to include a valid, recently verified email and telephone number:	
Proposed Key Subcontractor's Key Personnel who participated on this project:	
Key Personnel's role on this project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Key Personnel 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
Detailed project description and explanation for why it is comparable to proposed Key Subcontractor's role on the Project:	
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:	
Identify whether the Project was completed on-time and within budget:	On time: <input type="checkbox"/> Yes <input type="checkbox"/> No Within budget: <input type="checkbox"/> Yes <input type="checkbox"/> No
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Substantial Completion Date and Actual Substantial Completion Date:	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract:	

<p>Actual number of days added through change orders. If Contract time extensions were added to the contract as a result of Key Sub-Contractor's responsibilities, provide a short explanation of each.</p>	
<p>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.</p>	

Key Electrical, Instrumentation and Controls Subcontractor Performance Project #2

Project Name:	
Identify if the Project was performed by Sub-Contractor or if Prime Contractor Self-Performed	
Utility/Owner name:	
Utility/Owner Project Manager's name: and contact information to include a valid, recently verified email and telephone number:	
Proposed Key Subcontractor's Key Personnel who participated on this project:	
Key Personnel's role on this project:	
Project is within the last ten (10) years:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key Sub-Contractor's Key Personnel 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
Detailed project description and explanation for why it is comparable to proposed Key Subcontractor's role on the Project:	
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:	
Identify whether the Project was completed on-time and within budget:	On time: <input type="checkbox"/> Yes <input type="checkbox"/> No Within budget: <input type="checkbox"/> Yes <input type="checkbox"/> No
Original Contract Time (specify Calendar Days or Working Days):	
Original Contract Substantial Completion Date and Actual Substantial Completion Date:	
Original Contract Completion Date and Actual Completion Date:	
Actual number of days beyond the original contract:	

<p>Actual number of days added through change orders. If Contract time extensions were added to the contract as a result of Key Sub-Contractor's responsibilities, provide a short explanation of each.</p>	
<p>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.</p>	

END OF QUALITY, REPUTATION, AND ABILITY TO DELIVER PROJECTS ON

SCHEDULE AND WITHIN BUDGET CRITERIA

3. Project Approach, Schedule, and Availability (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. (Provide answer here)

(Continue here)

(Continue here - Add pages as necessary)

- ii. Explain how Respondent will contact and coordinate with key stakeholders throughout the Project. Describe how the Respondent will coordinate with property owners and/or business owners being impacted by the Project.
(Provide answer here)

- iii. Provide a description of the approach specifically addressing the procurement of the electrical and I&C components and other long-lead time equipment or devices.
(Provide answer here)

- iv. Describe your construction management approach and ability to coordinate work with all subcontractors and suppliers in order to meet project deadlines.
(Provide answer here)

- v. Describe your contingency plan for addressing any unanticipated delays.
(Provide answer here)

- vi. Describe your plan to handle the existing environmental conditions such as paint containing heavy metals. Describe how the Respondent is planning to dispose of any paint waste and debris generated during construction.
(Provide answer here)

- vii. Provide any innovative ideas for cost savings (construction sequencing, method or construction duration, supply chain management and logistics, procurement of critical items, and availability of materials and equipment,) for this project.
(Provide answer here)

- viii. Provide a Quality Management Plan (QMP) describing how the Prime Contractor will ensure that the necessary steps, safeguards, subcontractor oversight, QC processes, and document controls will be implemented in a rigorous manner as to ensure the completeness, workmanship, accuracy, and successful completion of the Project.
(Provide answer here)

b. Project Schedule and Unforeseen Conditions

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

- i. Provide a critical path method (CPM) schedule in Primavera or Microsoft Project. The schedule shall include milestones, specific critical processes and critical path items, construction phases, permits and approvals, environmental requirements, coordination with stakeholders, security clearances and procurements anticipated to complete the project work. The anticipated notice to proceed (NTP) for this Project is **October 10th, 2023**. Respondent shall use this date for developing the proposed project schedule.

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(Insert proposed critical path method (CPM) schedule in Primavera or Microsoft Project here. 11" x 17" paper size is permitted)

- ii. Explain how Respondent will complete the project within the schedule taking into account the existing commitments identified in 2.a.iv.
(Provide answer here)

- iii. Identify long-lead item and critical path shop drawing submittals.
(Provide answer here)

- iv. Provide details for the procurement and delivery of the electrical and I&C components and other long lead-time equipment and devices.
(Provide answer here)

- v. From past project experience, list and describe any previous instances in which the Contractor has encountered unforeseen conditions.

(Provide answer here. Repeat items below as many times as needed to describe instances in which Contractor has encountered unforeseen conditions in the past.)

(As part of the criteria, use the check boxes below as a checklist to help ensure guidelines are met. Repeat the below as many times as needed to provide the information requested.)

Was a recovery plan required?

Yes No

Describe the nature of the issue and whether it was promptly resolved or resulted in the Respondent being asked to demobilize.

(Provide answer here)

- vi. Describe the Respondent's approach towards mitigating and managing unforeseen conditions should they be encountered during the construction of this Project.
(Provide answer here)

c. Availability of Key Personnel and Equipment

- i. Describe availability of Key Personnel (Prime and Key Subcontractor(s)) that will be specifically assigned to this Project.
(Provide answer here)

- ii. Describe availability of equipment and facilities that will be specifically utilized for this Project.
(Provide answer here)

- iii. Corresponding with the organizational chart provided, list the available workforce for the various disciplines required for this project including the number of work crews, and number of personnel for each skill classification proposed to complete the work.
(Provide answer here)

END OF PROJECT APPROACH, SCHEDULE, AND AVAILABILITY CRITERIA

Safety information for Prime Contractor and Subcontractors:

Company Name(s)	TRIR	TRIR	TRIR	TRIR	TRIR	EMR	EMR	EMR	Fatalities
	2022	2021	2020	2019	2018	2022	2021	2020	
Prime Contractor									
Key Subcontractor									
Key Subcontractor									
Key Subcontractor									
Key Subcontractor									

Note: Respondent shall provide the backup documentation verifying the safety information provided with their proposal.