

# PUMP REPAIR FOR PRESIDENT STREET AND REGIONAL PLANTS

# Event No. 7070

# **Bidder's Checklist – Envelope 1 Requirements**

This checklist shall be attached to the outside of Envelope 1 of a bid. Failure to complete, sign, and attach this checklist may result in a bid being deemed nonresponsive. Nonresponsive bids will be returned to the vendor unopened.

\*Electronically submitted bids, if allowed, do not require this checklist. Please see event summary online to determine if electronic responses will be accepted.\*

m name:	
ntact person:	
dress:	
one number:	
ail address:	

## **Envelope 1 must contain the following documents:**

Initials	Document
	Section 1310 – Disadvantaged Business Employment Provisions
	Non-Discrimination Statement
	Proposed Schedule of DBE Participation
	Good Faith Effort Form and Log (if applicable)

By signing below, bidder is attesting that all items listed in the checklist above have been included in Envelope 1.

 Signature:
 Date:



# PUMP REPAIR FOR PRESIDENT STREET AND REGIONAL PLANTS

## Event No. 7070

# **Bidder's Checklist – Envelope 2 Requirements**

This checklist shall be attached to the outside of Envelope 2 of a bid. Failure to complete, sign, and attach this checklist may result in a bid being deemed nonresponsive. Nonresponsive bids will be returned to the vendor unopened.

Firm name:		
Contact person:	:	
Address:		
Phone number:		
Email address:		

## **Envelope 2 must contain the following documents:**

Initials	Document
	Bid Proposal Form, Including Acknowledgement of Any Addenda
	Exception Sheet
	Contractor Affidavit and Agreement (Employee Eligibility Verification)
	Affidavit Verifying Status for City of Savannah Benefit Application

By signing below, bidder is attesting that all items listed in the checklist above have been included in Envelope 2.

 Signature:
 Date:



#### PUMP REPAIR FOR PRESIDENT STREET AND REGIONAL PLANTS

#### EVENT NO. 7070

#### SPECIFICATIONS AND SPECIAL CONDITIONS

4.0 The purpose of these specifications is to describe the requirements for various pumps for the water reclamation plants for the City of Savannah.

To submit pricing electronically for this event, enter pricing for each line item shown under the lines tab on the event summary. To enter pricing manually, complete the attached bid proposal form. Manually submitted bids must be submitted on the bid proposal forms contained in these specifications in order to be considered.

A pre-bid conference has been scheduled to be conducted at the Purchasing Office, 301 West Oglethorpe Avenue, Savannah, Georgia, 31401. This meeting will allow contractors to discuss the specifications and resolve any questions and/or misunderstandings that may arise with City staff. You are invited to attend.

- 4.1 General Description
- 4.2 In general, pumps to be covered include centrifugal and positive displacement style, and typically are vertical turbine, dry pit non-clog, and horizontal splitcase design.
- 4.3 In general, inoperable pumps will be picked up by the successful vendor within 24 hours after notification. Pumps shall be identified by location, type pump, serial number, and voltage.
- 4.4 The successful vendor will be responsible for determining the cause of the malfunction and making the necessary repairs. The nature of the problem and possible cause shall be documented to the City of Savannah. The successful vendor will determine estimated repair costs for each unit and fax the estimate to the City. If estimated repair costs exceed 60% of the price for new equipment, the City may replace the entire unit.
- 4.5 For more involved repair work requiring electrical and/or machine shop capabilities, it will be the responsibility of the successful vendor to provide this service, either directly, or through a subcontractor. A single invoice (and purchase order) including unit price per item shall be provided. If subcontractor is used, a copy of subcontractor invoice showing labor and material costs must be provided.
- 4.6 The City reserves the right to have rewinding work performed under existing contracts.
- 4.7 Pricing shall be submitted for labor and materials needed to make repairs. Hourly labor costs shallindude all miscellaneous tools and equipment (including welding machine, burning outfit, grinder, regular hand tools, vehicle, etc), all skill levels, and any overtime premium involved. Travel time to the job site and travel time to procure parts shall not be included in hours charged to the City. Parts pricing shall be based

on a percent markup from vendor procurement cost. This percent markup shall be submitted on the Bid Proposal Form.

To verify contract pricing, the successful vendor will be required to provide backup data such as labor time sheets, vendor invoices, etc. All invoices must have a description of the work performed, the number and rate for all labor hours, and the quantity and price for all materials. A written job summary must be included with each invoice. It shall include each day activities and materials installed as part of the job. Also, vendor invoices for parts/materials shall be included with each invoice. Delivery tickets will not be accepted as verification for payment.

- 4.8 Each bidder shall submit with his bid a list of service personnel, showing service time, qualifications received, and any other pertinent information relating to staff qualifications.
- 4.9 All repair parts used must be certified by the manufacturer for use on the model of pump involved.
- 4.10 All repair work shall carry a non-prorated warranty covering parts and labor for 12 months.
- 4.11 All pumps and motors shall be repaired and delivered within seven to ten working days. (Excluding parts delays).
- 4.12 Qualifications:
  - 4.12.1 Repair facility shall be within Chatham County.
  - 4.12.2 The facility's' primary business will be pump repair.
  - 4.12.3 The facility shall be equipped with lathes, welding and milling machines for parts manufacture.
  - 4.12.4 The facility shall have a dynamic balance machine capable of balancing up to 5,000 pounds.
  - 4.12.5 The facility shall have mechanics certified in pump repair and maintain a 24-hour a day, 7 days a week emergency phone number.
  - 4.12.6 Response time shall be a maximum of 1 hour for call outs.
  - 4.12.7 The facility must have at least one Laser Alignment machine.
- 4.13 The City occasionally has the need for removal, transport and rebuild of the various types of pumps as well as installation of the same. The location of some of these pumps may require crane services. A line item for the cost of the crane rental is included. This cost should include a mobilization charge as well as the hourly fee.
- 4.14 Insurance Requirements:
  - 4.14.1 Comprehensive General Liability

Contractor shall carry comprehensive general liability on an occurrence form with no "x, c or u" exclusions with the following minimum limits:

• Each occurrence - \$1,000,000

- Damage to Rented Premises \$50,000
- Medical Expense \$5,000
- Personal & Adv Injury \$1,000,000
- General Aggregate \$2,000,000
- Products Completed Ops. Aggregate \$2,000,000

General aggregate shall apply on a per project basis

Contractor will provide a Certificate of Insurance reflecting required coverage.

A waiver of subrogation endorsement to the policy in favor of the City shall also be provided and attached to the certificate

A (30) day notice of cancellation in favor of the City must be endorsed to policy and attached to the certificate

4.14.2 Commercial Automobile Liability

The automobile policy must include coverage for owned, non-owned and hired automobiles

- Minimum limits are \$1,000,000
- Contractor will provide a Certificate of Insurance reflecting required coverage.
- A waiver of subrogation endorsement to the policy in favor of the City shall also be provided and attached to the certificate
- A (30) day notice of cancellation in favor of the City must be endorsed to policy and attached to the certificate
- 4.14.3 Workers Compensation

Contractor shall carry a workers compensation policy including all statutory coverage required by Georgia state law

Minimum employers liability limits:

- \$500,000 each accident
- \$500, 000 each employee (disease)
- \$500, 000 policy limit (disease)

Contractor will provide a Certificate of Insurance reflecting required coverage.

A waiver of subrogation endorsement to the policy in favor of the City shall also be provided and attached to the certificate

A (30) day notice of cancellation in favor of the City must be endorsed to policy and attached to the certificate

4.14.4 Umbrella/Excess Liability

Contractor shall carry an umbrella/excess liability policy which must follow form over underlying policies: general liability, auto liability and employer's liability.

Minimum limits: \$1,000,000 per occurrence \$1,000,000 aggregate

Contractor will provide a Certificate of Insurance reflecting required coverage.

Waiver of subrogation endorsement to the policy in favor of the City shall also be provided and attached to the certificate.

A (30) day notice of cancellation in favor of the City must be endorsed to policy and attached to the certificate

4.14.5 General

All insurance shall be placed with Georgia admitted carriers with a current Best's rating of A(minus), X, or better

Any modifications to specifications must be approved by the City

- 4.15 The City may award this contract to both a primary and a secondary vendor if deemed to be in its best interest. The City reserves the right to request time and material estimates on any job for repairs and if deemed excessive, award the job to the secondary vendor. If the primary vendor consistently exhibits excessive hourly requirements (and/or materials), the City reserves the right to award the contract to the next low bidder, or re-bid the contract.
- 4.16 This is an annual contract and prices are to be held firm for a period of one year. This agreement may be renewed for up to three additional 12 month periods, if all contracting parties so agree and services provided by the vendor have been satisfactory.
- 5.0 General Conditions
- 5.1 The bid response shall include all documents required in the bidder's checklist.

All referenced documents must be completed and returned in their entirety to constitute a complete bid.

- 5.2 Copies: One unbound, printed and signed original and one identical, printed copy of the bid must be submitted in response to the bid.
- 5.3 Original invoices should be sent to:

City of Savannah

Accounts Payable P.O. Box 1027 Savannah, Georgia 31402

- 5.4 The vendor is responsible for determining and acknowledging any addenda issued in connection with this bid solicitation. All addenda issued for this event must be acknowledged in order for a bid to be considered.
- 5.5 To be awarded bids, vendors must be registered as suppliers on the City of Savannah's website at www.savannahga.gov.
- 5.6 This contract will be awarded to the vendor offering the lowest net price to the City, and meeting or exceeding all specifications herein.

#### **EXCEPTION SHEET**

Event # 7070

If the commodity(ies) and/or services proposed in the response to this bid is in anyway different from that contained in this proposal or bid, the bidder is responsible to clearly identify by specification section number, all such differences in the space provided below. Otherwise, it will be assumed that bidder's offer is in total compliance with all aspects of the proposal or bid.

Below are the exceptions to the stated specifications:

Date

Signature

Company

Title

#### **BID PROPOSAL FORM**

#### (SUBMIT AS THE COVER SHEET)

City of Savannah Purchasing Department 301 West Oglethorpe Avenue 2<sup>nd</sup> floor Savannah, Georgia 31401 ATTN: Purchasing Director **EVENT NUMBER: 7070** 

Business Location: (Check One) Chatham County City of Savannah Other

<u>ALL BIDDERS MUST BE REGISTERED VENDORS ON THE CITY'S WEBSITE TO</u> <u>BE AWARDED AN EVENT. PLEASE REGISTER AT WWW.SAVANNAHGA.GOV.</u>

MANUALLY SUBMITTED BIDS MUST BE SUBMITTED ON THIS BID PROPOSAL FORM IN ORDER TO BE CONSIDERED.

Name of Bidder:		_
Street Address:		
City, State, Zip Code:		_
Phone:	Fax:	
Email:		
	AX CERTIFICATE ISSUED IN THE STATE	OF GEORGIA?
FROM WHAT CITY/COUNTY	FED TAX ID #:	
TAX CERTIFICATE #:	FED TAX ID #:	-
CHECK ONE:CO	OWNERSHIP OF BIDDER (STATISTICAL F ORPORATION PARTNERSHIP INDIVIDUALOTHER (S	,

Do you plan to subcontract any portion of this project? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please complete the attached schedule of DBE participation. Also complete the schedule if you will be using any DBE suppliers.

### ADDENDA ACKNOWLEDGEMENT

My signature below confirms my receipt of all addenda issued for this proposal.

Signature

\*This acknowledgement is separate from my signature on the fee proposal form. My signature on the fee proposal form will not be deemed as an acknowledgement of addenda.

THE UNDERSIGNED PROPOSES TO FURNISH THE FOLLOWING ITEMS IN STRICT CONFORMANCE TO THE BID SPECIFICATIONS AND BID INVITATION ISSUED BY THE CITY OF SAVANNAH FOR THIS BID. ANY EXCEPTIONS ARE CLEARLY MARKED IN THE ATTACHED COPY OF BID SPECIFICATIONS.

ITEM NO	DESCRIPTION	ESTIMATED QUANTITY	UNIT PRICE	TOTAL
1	Labor	500 hours		
2	Pump Materials Cost = \$10,000 + (\$10,000 x % markup)	1 lot	N/A	
3	Crane Rental	8 hours		
4	Crane Mobilization Charge	1 each		

TOTAL BID \$\_\_\_\_\_

#### PAYMENT TERMS: PLEASE CHECK ONE AND FILL IN BLANKS (Minimum of 10 working days must be allowed for discount to be considered in bid award)

\_\_\_\_Less \_\_\_\_% \_\_\_Days Prompt Payment Discount (if offered) (\_\_\_\_\_\_) \_\_\_\_Net - 30 Days (no discount offered) - 0 -TOTAL NET BID \$

DO YOU HAVE THE REQUIRED INSURANCE?

I certify this bid complies with the General and Specific Specifications and Conditions issued by the City except as clearly marked in the attached copy.

Please Print Name

Authorization Signature

Date

## CONTRACTOR AFFIDAVIT AND AGREEMENT

Employment Eligibility Verification

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with the City of Savannah has registered with and is participating in a federal work authorization program\* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA),

P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the City of Savannah, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Savannah at the time the subcontractor(s) is retained to perform such service.

EEV / Basic Pilot Program\* User Identification Number

BY:

Contractor Name

Date

Signature of Authorized Officer or Agent

Printed Name of Authorized Officer or Agent

Title of Authorized Officer or Agent of Contractor

\*As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV *I* Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

\* \* \* \* \* \* \* \* \* \*

## Instructions for Completing Contractor Affidavit and Agreement Form

As required under Senate Bill 529 – "Georgia Security and Immigration Compliance Act" of 2006, O.C.G.A. Section 2, Article 3 13-10-91, public employers, their contractors and subcontractors are required to verify the work eligibility of all newly hired employees through an electronic federal work authorization program. The Georgia Department of Labor has added a new Chapter 300-10-1, entitled "Public Employers, Their Contractors and Subcontractors Required to Verify New Employee Work Eligibility Through a Federal Work Authorization Program," to the Rules and Regulations of the State of Georgia. (See website: http://www.dol.state.ga.us/pdf/rules/300\_10\_1.pdf.) The new rules designate the "Employment Eligibility Verification (EEV) Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security as the electronic federal work authorization program to be utilized for these purposes. The EEV/Basic Pilot Program can be accessed at: https://everify.uscis.gov/enroll/StartPage.aspx?JS=YES. Bidders shall comply with this new rule and submit with your bid the attached "Contractor Affidavit and Agreement."

# Affidavit Verifying Status for City of Savannah Benefit Application

By executing this affidavit under oath, as an applicant for a City of Savannah, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, Contract or other public benefit as reference in O.C.G.A. Section 50-36-1, I am stating the following with respect to my bid for a City of Savannah contract for \_\_\_\_\_\_. [Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

- 1.) I am a citizen of the United States.
- OR
  2.) I am a legal permanent resident 18 years of age or older.
  - OR
- 3.) I am an otherwise qualified alien (8 § USC 1641) or nonimmigrant under the Federal Immigration and Nationality Act (8 USC 1101 *et seq.*) 18 years of age or older and lawfully present in the United States.\*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant:	Date

Printed Name:

\*

Alien Registration number for non-citizens.

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE \_\_\_\_\_DAY OF \_\_\_\_\_, 20\_\_\_\_

Notary Public My Commission Expires:

## Instruction for Completing Systematic Alien Verification for Entitlement (SAVE) Form

O.C.G.A. § 50-36-1, requires Georgia's cities to comply with the federal **Systematic Alien Verification for Entitlements (SAVE) Program**. SAVE is a federal program used to verify that applicants for certain "public benefits" are legally present in the United States. Contracts with the City are considered "public benefits." Therefore, the successful bidder will be required to provide the Affidavit Verifying Status for City of Savannah Benefit Application prior to receiving any City contract. The affidavit is included as part of this bid package but is only required of the successful bidder.