

#### **EVENT NO. 5870**

#### MODULAR OFFICE TRAILER FOR GREENWICH CEMETERY

#### SPECIFICATIONS AND SPECIAL CONDITIONS

4.0 These specifications describe the requirements for the acquisition, delivery, and installation of a modular office trailer in the Greenwich Cemetery maintenance compound located in Greenwich Cemetery at 330 Greenwich Road, Savannah, GA 31404.

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. 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, third floor, City Hall, 2 E. Bay Street, 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 Scope of Work

The scope of this project shall include the acquisition, delivery, and installation of a modular office trailer in the approximate location as the existing unit in Greenwich Cemetery.

- 4.1.1 The new unit must be or comparable in size to the existing trailer (14' x 50', 700 sq. ft.).
- 4.1.2 The facility must be certified for the Coastal Region by the Georgia Department of Community Affairs (DCA).
- 4.1.3 The unit will be a permanent facility, which must be connected to a permanent foundation that meets current international building codes. The hitch and axles shall be removed and the skirting shall be installed around the base of the unit. The contractor will be required to install any foundation as needed.
- 4.1.4 The unit shall contain two points of entry: one leading into the breakroom and a second leading to the office. All doors and windows shall be lockable.
- 4.1.5 The successful bidder shall be responsible for tying the new unit into the existing utilities to include the septic, water, electrical, and phone.
- 4.1.6 The new unit shall contain a minimum of one office with closet space, a common area to be used as a breakroom, a kitchenette/coffee bar containing cabinets and a sink, and a unisex/American with Disabilities Act (ADA) accessible restroom.
- 4.1.7 The breakroom shall contain at least 18 feet of available wall space to accommodate locker installation.

- 4.1.8 The unit shall contain central HVAC.
- 4.1.9 Electrical components shall include an electrical breaker panel, a 110/240 volt single-phase electrical system, fluorescent lighting, and outlets available in each room of the unit.
- 4.1.10 The unit exterior shall have vinyl or aluminum siding and gutters. The interior shall have vinyl or tiled floors and paneled or vinyl-covered walls. All doors, walls, floors, and windows shall be insulated.
- 4.1.11 All entrances must meet ADA requirements to include an ADA compliant ramp with an appropriate landing at the entrance to the break room and ADA compliant steps with an appropriate landing at the entrance to the office. .
- 4.1.12 Other vendor-specific options not mentioned in this scope may be provided as a separate quote.
- 4.1.13 The contractor shall be responsible for cleaning and the legal disposal of any job-related debris. No trash, debris, or materials shall be left on site upon completion of the job.
- 4.1.14 The successful bidder is responsible for the identification and acquisition of any applicable permits.
- 4.1.15 The contractor has three (3) weeks from the acceptance date of the contract to complete the installation of the unit and attach it to the utilities.

# 4.2 Special Considerations

All work shall occur between the hours of 7:00 am and 5:00 pm, Monday through Friday, excluding City holidays. If, due to unforeseen circumstances, work must be performed after-hours or on weekends/holidays, the contractor will be required to schedule such work in advance and pay an after-hour access fee as established by the Mayor and Aldermen of the City of Savannah.

- 4.2.1 The successful bidder shall comply with the Rules and Regulations of Municipal Cemeteries while working in the cemetery.
- 4.2.2 In the event a funeral occurs near the work site, the contractor may be required to cease work until the funeral concludes. The Department of Cemeteries reserves the right to restrict work activities within the cemetery.

# 4.3 Insurance Requirements

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

# 4.3.1 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

### 4.3.2 Workers Compensation

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

Minimum employer's 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

# 4.3.3 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

### 5.0 General Conditions

- 5.1 The bid response must include the following documents in this order:
  - Bid Proposal Form (as a cover sheet)
  - Exception Sheet
  - Non-Discrimination Statement
  - Proposed Schedule of Disadvantaged Business Enterprise (DBE) Participation
  - DBE Subcontractor Payment Report
  - Other submittals as stated

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

5.2 Original invoices should be sent to:

City of Savannah Department of Cemeteries

City of Savannah
Bonaventure Cemetery Office

330 Bonaventure Rd.

P.O. Box 1027
Savannah, Georgia 31404

Savannah, GA 31402

- 5.3 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.
- 5.4 To be awarded bids, vendors must be registered as suppliers on the City of Savannah's website at www.savannahga.gov.
- 5.5 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 #5870

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:				
D .		0.		
Date		Signature  Company		
		1 ,		

Title

# **BID PROPOSAL FORM**

# (SUBMIT AS THE COVER SHEET)

City of Savannah Purchasing Department 3rd Floor, City Hall P. O. Box 1027 Savannah, Georgia 31402 ATTN: Purchasing Director	EVENT NUMBER: 5870  Business Location: (Check One)  Chatham County City of Savannah Other
ALL BIDDERS MUST BE REGISTERED VEN BE AWARDED AN EVENT. PLEASE REGIST MANUALLY SUBMITTED BIDS MUST BE SUBMI	TER AT WWW.SAVANNAHGA.GOV.
IN ORDER TO BE CONSIDERED.	THE ON THIS BID PROPOSAL FORM
Name of Bidder:	
Street Address:	
City, State, Zip Code:	
Phone: Fax:	
Email:	
DO YOU HAVE A BUSINESS TAX CERTIFICATE (CHECK ONE) YES:	
FROM WHAT CITY/COUNTY FED TAX ID	
INDICATE LEGAL FORM OF OWNERSHIP OF B CHECK ONE:CORPORATIONINDIVIDUAL	IDDER (STATISTICAL PURPOSES ONLY): PARTNERSHIPOTHER (SPECIFY:)
INDICATE OWNERSHIP STATUS OF BIDDER (CHECK ONE):	
NON-MINORITY OWNED	ASIAN AMERICAN
AFRICAN AMERICAN HISPANIC	AMERICAN INDIAN OTHER MINORITY (describe)
WOMAN (non-minority)	offizer with control (describe)
Do you plan to subcontract any portion of this project: If yes, please complete the attached schedule of DBE will be using any DBE suppliers.	Yes No participation. Also complete the schedule if you

My sią	ADDENDA ACKNOWLEI gnature below confirms my receipt of all addend		s proposal.	
	ture acknowledgement is separate from my signature cure on the fee proposal form will not be deemed			
CONF CITY	UNDERSIGNED PROPOSES TO FURNISH TIFORMANCE TO THE BID SPECIFICATIONS AN OF SAVANNAH FOR THIS BID. ANY EXCEPTIONS CHED COPY OF BID SPECIFICATIONS.	ID BID INVITA	TION ISSU	ED BY THE
ITEM NO	DESCRIPTION	ESTIMATED QUANTITY	UNIT PRICE	TOTAL
1	Modular Office Trailer	1		
		TOTAL BID	\$	
	ENT TERMS: PLEASE CHECK ONE AND FILL num of 10 working days must be allowed for discoun		d in bid awa	ard)
L	ess %Days Prompt Payment Discount (if o	offered)	(	)
N	Net - 30 Days (no discount offered	1)	- 0 -	
	TOTAL NET BID		\$	
		====	======	===
DO YO	OU HAVE THE REQUIRED INSURANCE?	_		
	by this bid complies with the General and Specific Specept as clearly marked in the attached copy.	ecifications and (	Conditions i	ssued by the

**Authorization Signature** 

Date

Please Print Name

### NON-DISCRIMINATION STATEMENT

The bidder certifies that:

- (1) No person shall be excluded from participation in, denied the benefit of, or otherwise discriminated against on the basis of race, color, national origin, or gender in connection with any bid submitted to the City of Savannah or the performance of any contract resulting therefrom;
- (2) That it is and shall be the policy of this company to provide equal opportunity to all business persons seeking to contract or otherwise interested in contracting with this company, including those companies owned and controlled by racial minorities, cultural minorities, and women;
- (3) In connection herewith, we acknowledge and warrant that this company has been made aware of, understands and agrees to take affirmative action to provide such companies with the maximum practicable opportunities to do business with this company;
- (4) That this promise of non-discrimination as made and set forth herein shall be continuing in nature and shall remain in full force and effect without interruption;
- (5) That the promises of non-discrimination as made and set forth herein shall be and are hereby deemed to be made as part of and incorporated by reference into any contract or portion thereof which this company may hereafter obtain and;
- (6) That the failure of this company to satisfactorily discharge any of the promises of non-discrimination as made and set forth herein shall constitute a material breach of contract entitling the City of Savannah to declare the contract in default and to exercise any and all applicable rights and remedies including but not limited to cancellation of the contract, termination of the contract, suspension and debarment from future contracting opportunities, and withholding and/or forfeiture of compensation due and owing on a contract.

Signature	Title	

# DBE SUBCONTRACTOR PAYMENT REPORT

Contract #:	Contra	ct Amount:	Date Form Sub	mitted:			
Project Name:		Project Completion Date:					
Prime Contractor:			Period Ending: Amt. Paid to Prime:				
Contact Person: Telepho		Telephone#: (	)	Fax#: ( )			
O BE SUBMITTED TO THE	CITY OF SAVANNAU	SUBCONTRA OFFICE OF BUSINESS OPI	ACTING INFORMA	TION			
DBE Subcontractor	Telephone #	Description of Work	FORTONITI	Original Agreed Price	% of work Completed to Date	Amount Paid This Period	Amount Paid To Date
			Total	 Amount Paid	to Subcontrac	tors to Date:	
	e information s	submitted in this	report is in fact			he best of	my knowled
Signature:		Title:		Da	ite:		

# OFFICE OF BUSINESS OPPORTUNITY SCHEDULE OF DISADVANTAGED BUSINESS ENTERPRISE (DBE) PARTICIPATION<sup>1</sup>

EVENT NUMBER:		PROJECT TITLE:				
PRIME CONTRACTOR NAME:		ADDRESS:			PHONE:	FAX:
SUBCONTRACTOR NAME	ADDRESS a	and PHONE NUMBER	SERVICES/WORK TO BE PERFORMED	DBE? (Y/N)	SUB-CONTRACT AMT (% OF TOTAL BASE BID)	SUB-CONTRACT AMT (\$)
					TOTAL BASE BID <sup>2</sup>	\$
			TOTAL PROP	OSED DE	BE SUBCONTRACTS <sup>2</sup>	\$
			BIDDER'S PRO	POSED [	DBE PARTICIPATION <sup>3</sup>	%
on the trades specified	d and/or supp	ly materials and/or	posed subcontracts, and th equipment for this project. edule with our response.			
Name and Title of Authorized Representative Signature Date						Date

<sup>&</sup>lt;sup>1</sup>Form to be completed and signed by the bidder/offeror; Use additional sheets if necessary.

<sup>&</sup>lt;sup>2</sup>To be provided only when the solicitation requires that the bidder/offeror include the dollar amount in its bid.

 $<sup>^3</sup>$ Total proposed DBE participation ( $^3$ ) divided by bidder's total base bid (less any exclusions specifically mentioned in the solicitation), or total of all DBE Participation ( $^3$ ) if dollar amount is not required.



### **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	n 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 / 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

License or Oc	cupation Tax Certificate, Alcoho	oplicant for a City of Savannah, G ol License, Taxi Permit, Contract of 5-1, I am stating the following wit	or other public
person applying entity]	ng on behalf of individual, busine	ess, corporation, partnership, or of	ther private
1.)	I am a citizen of the	United States.	
2.)	ORI am a legal perman	ent resident 18 years of age or old	ler.
		ualified alien (8 § USC 1641) or a Nationality Act (8 USC 1101 <i>et s</i> the United States.*	_
willfully make	es a false, fictitious, or fraudulent	, I understand that any person who t statement or representation in an 20 of the Official Code of Georgi	affidavit shall
		Signature of Applicant:	Date
		Printed Name:	
	D AND SWORN	*	
	ON THIS THE	Alien Registration number	for non-citizens.
Notary Public My Commissi			

# 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.