ARLINGTON COUNTY, VIRGINIA OFFICE OF THE PURCHASING AGENT

INVITATION TO BID NO. 22-DES-ITBLW-360

ADDENDUM NO. 1

Arlington County Invitation to Bid No. 22-DES-ITBLW-360 for On-Call Electrical and Instrumentation Technical Support Services is amended as follows:

Section III. Agreement and Contract Terms and Conditions is hereby amended to incorporate the following:

1. Contract Documents: The following Contract Document is hereby added:

Exhibit ___ - COVID-19 Vaccination Policy for Contractors Certification Form (attached)

2. Incorporation of COVID-19 Vaccination Policy for Contractors: The following contract clause is hereby added to the Contract Terms and Conditions:

COVID-19 Vaccination Policy for Contractors

Due to the COVID-19 pandemic, the County has taken various steps to protect the welfare, health, safety and comfort of the workforce and public at large. As part of these steps, the County has implemented various requirements with respect to health and safety including policies with respect to social distancing, the use of face-coverings and vaccine mandates. All County Contractors, entering County owned, controlled, or leased facilities or facilities operated by a contractor if the services provided at that location are exclusive to Arlington County Government or contractors with public facing responsibilities <u>must adopt these policies for implementation</u> with their employees and subcontractors working on County contracts.

Contractors are required to obtain and maintain the COVID-19 vaccine status of employees or subcontractors, require any unvaccinated or not fully vaccinated employees should be following a weekly testing protocol established by the Contractor to submit to weekly testing, and provide any accommodations as required by law. Contractor should submit the certification of compliance to the Purchasing Agent within five working days of the end of each quarter (see Exhibit X). In addition, all Contractor and subcontractor employees subject to the requirements of this section must also comply with the County COVID-19 masking and social distancing protocols, as signed at each County location.

It is recognized that the COVID-19 pandemic is an ongoing health crisis. As such, requirements with respect to health and safety, including vaccines and face-coverings may change over time. Contractors are expected to adhere to the County requirements as they evolve in response to the crisis.

3. <u>Bid Form is hereby replaced in its entirety with the Revised Bid Form</u>. Bid responses **Must** be on the "Revised Bid Form".

The following clarifications are made as a result of vendor inquiries:

- 1. Do you have an already PM plan? Can you give some examples of what the PM services you need? Answer: Yes. Please reference the attached examples of the PM services and equipment.
- 2. Bid Form does not have a place for the emergency response rate? Answer: Please reference the attached Revised Bid Form.

Non-Mandatory Prebid Conference held August 24, 2021, at 1:00 PM for

ITB No. 22-DES-ITBLW-360, On-call Electrical and Instrumentation Technical Support Services via Microsoft Teams

- Started @ 1:00 pm.
- Three (3) vendors and four (4) Arlington County Government employees were in attendance.
- Introduction of Arlington County Employees
- Tomeka Price, Procurement Officer, reviewed 22-DES-ITBLW-360 with emphasis on requirements and submission deadlines.
 - Teams Prebid meeting was recorded.
 - Any questions regarding the Scope of Work must be submitted via Vendor Registry for a formal response by the due date.
- Tomeka turned over the meeting to Jim Honaker for an overview of the Scope of Work. Jim explained the project and highlighted the work to be done.
- Once Jim completed the overview, Tomeka asked for questions.
 - 2 Clarifications asked see response above.
- Meeting was adjourned.

Vendor who Sign-in are below:

MC DEAN – Brandon Zemlo, 571-206-7143, <u>brandon.zemlo@mcdean.com</u> MC DEAN – Kenneth Lea, 703-286-9061, <u>kenneth.lea@mcdean.com</u>

The balance of the solicitation remains unchanged.

Arlington County, Virginia

Tomeka Price, VCO, VCA
Procurement Officer
tprice@arlingtonva.us

RETURN THIS PAGE, FULLY COMPLETED AND SIGNED, WITH YOUR BID:

BIDDER ACKNO	WLEDGES RECEIPT OF ADDENDUM NUMBER 1.
FIRM NAME: _	
AUTHORIZED SIGNATURE:	DATE:

ARLINGTON COUNTY, VIRGINIA

INVITATION TO BID NO.22-DES-ITBLW-360

REVISED BID FORM

SUBMIT ONE FULLY COMPLETED AND SIGNED BID FORM ELECTRONICALLY VIA VENDOR REGISTRY

BIDS WILL BE OPENED AT 1:30 P.M., ON SEPTE MBER 16, 2021

FOR PROVIDING <u>ON-CALL</u> <u>ELECTRICAL AND INSTRUMENTATION TECHNICAL SUPPORT SERVICES</u> PER THE TERMS, CONDITIONS AND SPECIFICATIONS OF THIS SOLICITATION

THE FULL LEGAL NAME OF THE ENTITY SUBMITTING THIS BID MUST BE WRITTEN IN THE SPACE BELOW. THIS BID FORM AND ALL OTHER DOCUMENTS THAT REQUIRE A SIGNATURE MUST BE FULLY AND ACCURATELY COMPLETED AND SIGNED BY A PERSON WHO IS AUTHORIZED TO BIND THE BIDDER, OR THE BID MAY BE REJECTED.

SUBMITTED BY: (Legal name of entity)							
AUTHORIZED SIGNAT	URE:						
PRINT NAME AND TIT	LE:						
ADDRESS:							
CITY/STATE/ZIP:							
TELEPHONE NO.:		E-MAIL ADDRESS:					
THIS ENTITY IS INCOR IN:	PORATED						
THIS ENTITY IS A:	CORPORATIO	оп 🗖		LIMITE	D PARTNE	RSHIP	
(check the applicable option)	GENERAL PARTNERS	HIP 🗖		UN	INCORPOR ASSOCIA		
	LIMITED LIABILITY COMPA	NY 🗖		SOLE P	ROPRIETO	RSHIP	
IS BIDDER AUTHORIZE	ED TO TRANSACT BUSINESS	IN THE		YES		NO	

IDENTIFICATION NO. ISSUED TO THE ENTITY BY THE SCC:

Any Offeror exempt from Virginia State Corporation Commission (SCC) authorization requirement must include a statement with its proposal explaining why it is not required to be so authorized.

BID FORM, PAGE 2 OF 8 ENTITY'S DUN & BRADSTREET D-U-N-S NUMBER: (if available):				
HAS YOUR FIRM OR ANY OF ITS PRINCIPALS BEEN DEBARRED FROM SUBMITTING BIDS TO ARLINGTON COUNTY, VIRGINIA, OR ANY OTHER STATE OR POLITICAL SUBDIVISION WITHIN THE PAST THREE YEARS?	YES		NO	
HAS YOUR FIRM DEFAULTED ON ANY PROJECT IN THE LAST THREE YEARS?	YES		NO	
HAS YOUR FIRM HAD ANY TYPE OF BUSINESS, CONTRACTING OR TRADE LICENSE, REGISTRATION OR CERTIFICATION REVOKED OR SUSPENDED IN THE PAST THREE YEARS?	YES		NO	
HAS YOUR FIRM AND ITS PRINCIPALS/OWNERS BEEN CONVICTED OF ANY CRIME RELATING TO ITS CONTRACTING BUSINESS IN THE PAST TEN YEARS?	YES		NO	
HAS YOUR FIRM BEEN FOUND IN VIOLATION OF ANY LAW APLICABLE TO ITS CONTRACTING BUSINESS (LICENSING LAWS, TAX LAWS, WAGE AND HOUR LAWS, PREVAILING WAGE LAWS, ENVIRONMENTAL) WHERE THE RESULT OF SUCH VIOLATION WAS THE PAYMENT OF A FINE, BACK PAY DAMAGES, OR ANY OTHER PENALTY IN THE AMOUNT OF \$5000 OR MORE?	YES		NO	
IS YOUR FIRM PREQUALIFIED BY THE VIRGINIA DEPT. OF TRANSPORTATION?	YES		NO	
BIDDER STATUS: MINORITY OWNED: WOMAN OWN	NED:		NEITHEF	R: □
THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLO	OWING	ì:		
THE OFFICIAL COPY OF THE SOLICITATION DOCUMENTS, WHICH I ELECTRONIC COPY THAT IS AVAILABLE ON THE VENDOR REGISTRY			ADDENDA	, IS THE
POTENTIAL BIDDERS ARE RESPONSIBLE FOR DETERMINING THE ACCUALL SOLICITATION DOCUMENTS THEY RECEIVE FROM ANY SOURCE,				SS OF
BIDDER SUBMISSIONS AND ASSERTIONS: RESUMES OF THE PROPOSED CONTRACT MANAGER, SUPERVISOR, ELECTRICIAN/JOURNEYMAN AND HELPER ASSIGNED TO THIS WORK, WHO HAVE THE REQUIREMENTS AS DESCRIBED IN THE SCOPE OF SERVICE. (ATTACH TO YOUR BID SUBMISSION)	YES	q	NO	q
COPY OF CLASS A OR CLASS B LICENSE (ATTACH TO YOUR BID SUBMISSION)	YES		NO	

	YES		NO	
ISA CCST-II OR NETA-II OR HIGHER CERTIFICATION	. 20	_		_
(ATTACH TO YOUR BID SUBMISSION)				

PRICING:

BIDDERS MUST ENTER PRICING IN US DOLLARS FOR EACH LINE HIGHLIGHTED IN BLUE BELOW. ITEMS LEFT BLANK, WILL BE DEEMED AS A NO-BID FOR THAT ITEM AND BIDDERS MAY BE DEEMED NON-RESPONSIVE.

A. PERSONNEL HOURLY LABOR RATES

HOURLY LABOR RATES INCLUDE THE PROVISION OF ALL THINGS NECESSARY FOR PERFORMING REPAIRS, INSPECTION, AND PREVENTIVE MAINTENANCE SERVICES INCLUDING BUT NOT LIMITED TO, LABOR, TOOLS, AND TRANSPORTATION TO, FROM AND BETWEEN JOBS, PARKING, TOOLS-OF-THE-TRADE, AND MEANS FOR ACCESS, AND CONSUMABLE SUPPLIES. **OVERTIME (OVER 8 HOURS OF CONSECUTIVE WORK)**RATES SHALL BE TIME AND HALF OF REGULAR HOURLY RATES. 4-HR RESPONSE TIME

POSITION	ESTIMATED HOURS	REGULAR HOURLY RATE	TOTAL (ESTIMATED HOURS MULTIPLIED BY REGULAR HOURLY RATE)
Certified Control Systems Technician, Level II or InterNational Electrical Testing Association (NETA), level II or higher	1500	\$	\$
Electrician/Journeyman	1500	\$	\$
Helper	1500	\$	\$
TOTAL ESTIM	\$		

B. ON-CALL AND EMERGENCY REPAIR SERVICES HOURLY LABOR RATES - 2-HR RESPONSE TIME

HOURLY LABOR RATES INCLUDE THE PROVISION OF ALL THINGS NECESSARY FOR PERFORMING **ON-CALL AND EMERGENCY REPAIR SERVICES** INCLUDING BUT NOT LIMITED TO, LABOR, TOOLS, AND TRANSPORTATION TO, FROM AND BETWEEN JOBS, PARKING, TOOLS-OF-THE-TRADE, AND MEANS FOR ACCESS, AND CONSUMABLE SUPPLIES.

POSITION	ON-CALL EMERGENCY HOURLY
	RATE
Certified Control Systems Technician, Level II or InterNational Electrical	
Testing Association (NETA), level II or higher	\$
Electrician/Journeyman	\$
Helper	\$
TOTAL ON-CALL EMERGENCY/CRITICAL REPAIR SERVICES HOURLY RATE	\$

BID FORM, PAGE <u>4</u> OF 8

EMERGENCY CONTACT

Provide phone numbers that are answered by a live person twenty-four (24) hours a day, seven (7) days a week:

Phone n	number:			
Phone n	number:			
The undersigned	d acknowledges receipt	of the following Add	lenda:	
ADDEN	DUM NO. 1	DATE:	INITIAL:	_
ADDENE	DUM NO. 2	DATE:	INITIAL:	_
ADDEN	DUM NO. 3	DATE:	INITIAL:	_
Trade secrets of transaction will Pursuant to Secret submitt materials, identified Please in No, 1	not be subject to pution 4-111 of the Arling ed data or materials fify the data or materials mark one:	cion submitted by a blic disclosure unde gton County Purchas from disclosure must to be protected and	a Bidder in connection was the Virginia Freedom ing Resolution, however, before or upon submit state the reasons why production any trade secrets	of Information Act., a Bidder seeking to ssion of the data or otection is necessary.
		nitted <u>does</u> contain t	rade secrets and/or prop	rietary information.
	•	•	xact data or materials to contain such data or mat	· —

BID FORM, PAGE <u>5</u> OF <u>8</u>

BIDDER NAME:

St	rate the specific reason(s) why protection is necessary:
_	
_	
— If you fail above to	b identify the data or materials to be protected or to state the reason(s) why protection
• • •	will not have invoked the protection of Section 4-111 of the Purchasing Resolution. the award of a contract, the bid will be open for public inspection consistent with
by (1) any act of defined in Virgini	FNON-COLLUSION: The undersigned certifies that this bid is not the result of or affected collusion with another person engaged in the same line of business or commerce (as a Code §§ 59.1-68.6 et seq.) or (2) any act of fraud punishable under the Virginia uds Act (Virginia Code §§ 18.2-498.1 et seq.).
undersigned certi condition of contr	F COMPLIANCE WITH THE COVID-19 VACCINATION POLICY FOR CONTRACTORS: The fies that it will comply with the COVID-19 Vaccination Policy for Contractors as a fact award which requires that all contractor employees or subcontractors assigned to st be vaccinated or undergo weekly testing pursuant to the Contract Terms and
Provide the nam communications r	I AND MAILING ADDRESS FOR DELIVERY OF NOTICES ne and address of the person who is designated to receive notices and other egarding this solicitation. Refer to the "Notices" section in the draft Contract Terms and ormation regarding delivery of notices.
NAME:	
ADDRESS:	
E-MAIL:	

BID FORM, PAGE 6 OF 8

REFERENCES

Bidders should provide three (3) references for similar services that have been provided by the Bidder within the past five (5) years. The County reserves the right to evaluate the quality of Contractor's work through site visits with Contractor's references.

REFERENCE 1:	Contact Name:
	Organization:
	Phone Number:
	E-mail Address:
	Contract/Project Name:
	Contract/Project Dates (from-to):
	Contract/Project Description:
REFERENCE 2:	Contact Name:
	Organization:
	Phone Number:
	E-mail Address:
	Contract/Project Name:
	Contract/Project Dates (from-to):
	Contract/Project Description:
DEFERENCE O	
REFERENCE 3:	Contact Name:
	Organization:
	Phone Number:
	E-mail Address:
	Contract/Project Name:
	Contract/Project Dates (from-to):
	Contract/Project Description:

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS MARKED "X".

COVERAGES REQUIRED

LIMITS (FIGURES DENOTE MINIMUMS)

COVERAGES REQUIRED	ENVITS (FIGURES DENOTE WHATHOUS)
	Statutory limits of Virginia
	\$500,000/accident, \$500,000/disease, \$500,000/disease policy limit
	\$1,000,000 CSL BI/PD eachoccurrence, \$2 Million annual aggregate
	\$500,000 CSL BI/PD each occurrence, \$ 1 Million annual aggregate
	\$1 Million BI/PD each accident, Uninsured Motorist
	\$1 Million BI/PD each accident, Uninsured Motorist
X 7. Independent Contractors	\$1 Million CSL BI/PD eachoccurrence, \$1 Million annual aggregate
	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
X 9. Completed Operations	\$1 Million CSL BI/PD eachoccurrence, \$1 Million annual aggregate
X_10. Contractual Liability (Must be shown on Certification)	ate)\$1 Million CSL BI/PD eachoccurrence, \$ 1 Million annual aggregate
11. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate
12. Umbrella\Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury
13. Per Project Aggregate	
14.Professional Liability	
a. Architects and Engineers	\$1 Million per occurrence/claim
b. Asbestos Removal Liability	\$2 Million per occurrence/claim
	\$1Millionperoccurrence/claim
	\$1Millionperoccurrence/claim
15. Miscellaneous E&O/ Professional Liability	\$1 Million peroccurrence/claim
16. Motor Carrier Act End. (MCS-90)	\$1 Million BI/PD each accident, Uninsured Motorist
17. Motor Cargo Insurance	
18. Garage Liability	\$1 Million Bodily Injury, Property Damage peroccurrence
	\$500,000 Comprehensive, \$500,000 Collision
	\$
21. Moving and Rigging Floater	Endorsementto CGL
	\$1,000,000
	ProvideCoverage inthefullamountofcontract
	Endorsement to CGL
_	Federal Statutory Limits
X 26. Carrier Rating shall be Best's Rating of A-V	•
	rial change in coverage shall be provided to County at least thirty (30) days prior to action.
	nsured on all policies except Workers Compensation, Errors and Omissions/Professiona
Liability and Auto.	
X 29. Certificate of Insurance shall show Bid N	Number and Bid Title.
_30. Environmental Impairment Liability, include	ding coverage of on-site clean upBI/PD \$3 Million per occurrence/\$6 Million Aggregate
a In addition to environmental impairme	ent liability, if work requires clean up, remediation, and/or removal of bio-solids, bio-hazard
waste, and any hazardous or toxic materia	al via transportation request:
	on per occurrence with MCS-90 and CA 9948 (or equivalent endorsements specificall
referenced in the certificate of insuran	
	\$2Million per occurrence/Aggregate
32. OTHER INSURANCE REQUIRED:	
INCURANCE A CENTIC CTATEMATA	
INSURANCE AGENT'S STATEMENT:	
·	vith the Offeror named below and have advised the Offeror of required coverages no
provided through this agency.	
A CENICVANANAE	AUTH CICALATURE
AGENCY NAME:	AUTH. SIGNATURE:
OFFEDOR'S STATEMARNE.	
OFFEROR'S STATEMENT:	a all Contract incurrence requirements
If awarded the Contract, I will comply with	n all Contract insurance requirements. ALITH SIGNATURE:
BIDDER NAME:	AULH MUNATUKE,

CERTIFICATION OF CONTRACTOR COMPLIANCE WITH COUNTY COVID-19 VACCINATION POLICY

l,	(hereinafter referred to as "Bidder"), certify that I will
comply with the COVID-19 Vaccination Policy fo	or as a condition of contract award which requires that all
contractor employees or subcontractors assigned	ed to the contract must be vaccinated or undergo weekly
testing pursuant to the Contract Terms and Con	ditions.
Signed:	_ Date:
Name of Bidder:	

EXHIBIT ____

CERTIFICATION

I hereby certify that all	employee	s and subcontractors
working on Contract No	_ will be fully vaccinated against COVI	D-19 by September 13
2021 or will be tested on a weekly basis.		
Please do not send individual vaccine/testing	g information	
Please do not sena maividuai vaccine/testing	g information.	
Date:		
		
Signature:		
Deinted Names		
Printed Name:		
Title		