ARLINGTON COUNTY, VIRGINIA OFFICE OF THE PURCHASING AGENT

INVITATION TO BID NO. 23-DES-ITBPW-335 PROJECT NO.: TE15

BID FORM

ELECTRONIC BIDS WILL BE RECEIVED BY THE COUNTY VIA VENDOR REGISTRY NOT LATER THAN 1:00 P.M., NOVEMBER 21, 2022.

FOR PROVIDING CONSTRUCTION SERVICES FOR WASHINGTON BOULEVARD AND N SYCAMORE STREET TRAFFIC SIGNAL UPGRADE IDENTIFIED HEREIN IN ACCORDANCE WITH THE DRAWINGS, SPECIFICATIONS, TERMS AND CONDITIONS OF THIS SOLICITATION

BIDDERS SHALL FURNISH ALL NECESSARY LABOR, EQUIPMENT, MATERIALS, AND ALL INCIDENTALS NECESSARY TO PERFORM THE WORK AS SET FORTH IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS. ALL PRICES INCLUDE PROVISION AND INSTALLATION.

Bidders shall enter the Unit Prices on Attachment A-Pricing sheet and enter the Grand Total from Attachment A below:

Grand Total from Attachment A:	\$

Bidder shall enter all positions and their hourly rate who will be working on this contract

POSITIONS UTILIZED	PREVAILING WAGE HOURLY RATE

THE FULL <u>LEGAL NAME</u> 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 SIGNATUR							
PRINT NAME AND TITLE	:						
ADDRESS:							
CITY/STATE/ZIP:							
TELEPHONE NO.:	E-M	IAIL ADD	RESS:				
THIS ENTITY IS INCORPO	PRATED						
THIS ENTITY IS A:	CORPORATION		LIMIT	ED PAR	TNER	SHIP	
(check the applicable option)	GENERAL PARTNERSHIP		10	NINCOF ASS	RPOR/ OCIA		
	LIMITED LIABILITY COMPANY		SOLE I	PROPRI	ETOR	SHIP	
IS BIDDER AUTHORIZED OF VIRGINIA?	TO TRANSACT BUSINESS IN T	HE COM	MONWEALTH	YES		NO	
IDENTIFICATION NO. IS SCC:	SUED TO THE ENTITY BY TH	E					
	Virginia State Corporation Con its bid explaining why it is not		· ·		equir	emen	t must
VIRGINIA CONTRACTOR	'S LICENSE NUMBER:						
HAS YOUR FIRM OR ANY SUSPENDED FROM SUB	TREET D-U-N-S NUMBER: (if and of the control of the	ARRED, E	NJOINED, OR Y, VIRGINIA,			NO	
HAS YOUR FIRM D THREE YEARS?	EFAULTED ON ANY PROJ	ECT IN	THE LAST	YES		NO	
	ANY TYPE OF BUSINESS, CON I OR CERTIFICATION REVOKE					NO	

HAS YOUR FIRM AND ITS PRINCIPALS CRIME RELATING TO ITS CONTRACTIN	-		YES		NO	
HAS YOUR FIRM BEEN FOUND IN VIO ITS CONTRACTING BUSINESS (LICENS HOUR LAWS, PREVAILING WAGE LA RESULT OF SUCH VIOLATION WAS T DAMAGES, OR ANY OTHER PENALTY I	SING LAWS, TAX LAWS, V AWS, ENVIRONMENTAL) W THE PAYMENT OF A FINE,	VAGE AND /HERE THE BACK PAY	YES		NO	
IS YOUR FIRM PREQUALIFIED BY THE V	IRGINIA DEPT. OF TRANSPO	ORTATION?	YES		NO	
IF YOUR FIRM IS NOT PREQUALITRANSPORTATION, YOUR FIRM EN EMPLOYS UNDER THE PROJECT WORKING ON THE PROJECT, THE OS SAFETY ESTABLISHED BY THE U.S. DEP	SURES THAT ALL CRAFT /ILL HAVE COMPLETED, HA 10-HOUR TRAINING CO	LABOR IT PRIOR TO	YES		NO	
BIDDER STATUS: MINORITY OWI	NED: U WOMAN OW	NED:		NEIT	HER:	
The undersigned certifies that (Bidder Nisser is currently registered with the Virginia Certificate Number, 20 The undersign required under law have been paid.	State Board of Contractors for a Class License	s as required was issued	on th	ne		_day of
TIME LIMIT FOR PROJECT: SUBSTA	FINAL COMPLETION – 45 CA		AYS FR)N	
LIQUIDATED DAMAGES:	SUBSTANTIAL COMPLETION FINAL COMPLETION - \$1,12			DAY		

MINIMUM BIDDER QUALIFICATIONS:

In a separate attachment, Bidders shall provide the following documentation:

<u>Company Qualifications</u>: Proof of three (3) continuous years of construction contract experience conducting public works infrastructure and street improvement projects in an urban environment. The experience shall be work of similar size and scope, construction, re-construction, and maintenance.

<u>Project Experience:</u> Bidders shall provide a complete list of projects completed within the last five (5) years involving the same size, and scope. The County will randomly contact at least five (5) of the references provided. For each project, Bidders shall list the following information to show compliance with the experience criteria:

- Project Name
- Project description and scope of work
- Owner Project manager's name, telephone number and email address
- Work start date, scheduled completion, and actual completion date

• Initial contract cost and final contract cost

Staffing Qualifications: Resumes of the proposed Site Supervisor, Safety Project Officer and Environmental Project Officer assigned to this work, who have the requirements as described in the scope of work.	YES	NO	
(ATTACH TO YOUR BID SUBMISSION)			
OSHA 10 Certification (ATTACH TO YOUR BID SUBMISSION)	YES	NO	
VDOT Flagger Certification, or American Traffic Safety Services Association Flagger Certification, or any other VDOT approved flagger Certification (ATTACH TO YOUR BID SUBMISSION)	YES	NO	
VDOT Erosion & Sediment Control Contractor Certification (ATTACH TO YOUR BID SUBMISSION)	YES	NO	

COMPLETE THE PRICING SHEET PROVIDED WITH THE BID DOCUMENTS AS ATTACHMENT B TO ITB NO. 23-DES-ITBPW-335 AND SUBMIT IN MICROSOFT EXCEL FORMA IT WITH YOUR BID.

FAILURE TO SUBMIT THE PRICING SHEET WITH THE BID WILL DEEM THE BIDDER NONRESPONSIVE.

STIPULATED PRICE ITEMS

The Contractor agrees to perform related work for the following items at the stipulated prices shown:

#	ITEM DESCRIPTION	UNIT	PRICE
1	Concrete Pier, Cradle, or Encasement	CY	\$200.00
2	Rock Excavation	CY	\$150.00
3	Crusher Run VDOR #25 or Approved Equal	CY	\$100.00
4	Over Excavation	CY	\$65.00
5	Test Pits	EA	\$550.00
6	Select Borrow	CY	\$70.00

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THE UNDERSION	GNED UNDERSTANDS	AND ACKNOWLE	DGES THE FOLLOWING:	
			ENTS, WHICH INCLUDES AN NOOR REGISTRY WEBSITE.	NY ADDENDA, IS THE
			REGISTRY IN ORDER TO SUE	
			MINING THE ACCURACY ANI 1 ANY SOURCE, INCLUDING T	
Γhe undersigne	ed acknowledges recei	pt of the followin	ng Addenda:	
ADDEN	DUM NO. 1	DATE:	INITIAL:	<u></u>
ADDEN	DUM NO. 2	DATE:	INITIAL:	_ _
ADDEN	DUM NO. 3	DATE:	INITIAL:	
Frade secrets or cransaction will pursuant to Secondary t	I not be subject to petion 4-111 of the Arlited data or materials tify the data or materials	nation submitted oublic disclosure ington County Pu from disclosure	by a Bidder in connection under the Virginia Freedor irchasing Resolution, however must, before or upon subjud and state the reasons why page 1	m of Information Act er, a Bidder seeking to mission of the data o
Please	mark one:			
	, the bid that I have rmation.	submitted does	<u>not</u> contain any trade secre	ets and/or proprietary
☐ Yes,	the bid that I have sul	omitted <u>does</u> con	tain trade secrets and/or pro	oprietary information.
		•	the exact data or materials t, and paragraphs of the bid	

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	State the specific reason(s) why protection is necessary and why the identified information constitutes a trade secret or is proprietary:
is necessary, yo	to identify the data or materials to be protected or to state the reason(s) why protection u will not have invoked the protection of Section 4-111 of the Purchasing Resolution. on the award of a contract, the bid will be open for public inspection consistent with
by (1) any act o defined in Virgi	OF NON-COLLUSION: The undersigned certifies that this bid is not the result of or affected f collusion with another person engaged in the same line of business or commerce (as nia Code §§ 59.1-68.6 et seq.) or (2) any act of fraud punishable under the Virginia rauds Act (Virginia Code §§ 18.2-498.1 et seq.).
Provide the na communications	ON AND MAILING ADDRESS FOR DELIVERY OF NOTICES and address of the person who is designated to receive notices and other regarding this solicitation. Refer to the "Notices" section in the draft Contract Terms and information regarding delivery of notices.
NAME:	
ADDRES	S:
E-MAIL:	

BIDDER NAME: _____

ACKNOWLEDGEMENT OF COUNTY COVID-19 VACCINATION POLICY

ı,(h	ereinafter referred to as "Bidder"), certify that I will
comply with the COVID-19 Vaccination Policy as a	condition of contract award which may require that all
contractor employees or subcontractors who will	be working on the contract are fully vaccinated against
COVID-19, or being tested on a weekly basi	s, or are exempt pursuant to a valid reasonable
accommodation under state or federal law.	
Signed:	Date:
Name of Ridder	

Energy-Efficient Lighting Certification

1,	(hereinafter referred to as "Bidder"), b	y checki	ng "Ye	s" in	
	ow, certify the LED lighting used for the "Traffic Signal Work" portion of th	•	_		
Star Certified	d and meet the Federal Energy Management Program (FEMP) efficiency	require	ements	s. By	
checking "No	o" in the table below, I certify the LED lighting used for the "Traffic Signa	l Work"	portio	n of	
this project i	s not Energy Star Certified or meet the FEMP efficiency requirements.				
Bid Item Number	Description	Energy Star Certified and meet FEMP Efficiency Requirements.		P	
13160-C8- 03000	Traffic Signal Upgrade of Washington Blvd. & N. Sycamore St. (As outlined in the construction plan set).			NO	
Signed:	Date:				
Name of Bid	der:				

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BIDDER NAME:

INSURANCE CHECKLIST

CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS MARKED "X". **COVERAGES REQUIRED COVERAGE MINIMUM(S)** LIMITS (FIGURES DENOTE MINIMUMS) **COVERAGES REQUIRED** X 2. Employer's Liability......\$500,000/accident, \$500,000/disease, \$500,000/disease policy limit X 3. Commercial General Liability......\$1,000,000 CSL BI/PD each occurrence, \$1 Million annual aggregate X 4.Premises/Operations......\$500,000 CSLBI/PD each occurrence, \$ 1 Million annual aggregate X 8. Products Liability......\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate X 9.CompletedOperations......\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate X 10.Contractual Liability (Mustbeshown on Certificate).............\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate X 11.Personal and Advertising Injury Liability.......aggregate X 12.Umbrella\ExcessLiability.......\$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 __c. Medical Malpractice......\$1Millionperoccurrence/claim d. Medical Professional Liability......\$1 Million per occurrence/claim X 15.MiscellaneousE&O/ Professional Liability\$1Million peroccurrence/claim 17. Motor Cargo Insurance 18. Garage Liability......\$1 Million Bodily Injury, Property Damage per occurrence __19. Garagekeepers Liability.......\$500,000 Comprehensive, \$500,000 Collision __20. Inland Marine-Bailee'sInsurance......\$_____ X 21. Moving and Rigging Floater......Endorsement to CGL 22. Dishonesty Bond......\$ X 23.Builder'sRisk......ProvideCoverage inthefullamountofcontract 24.XCUCoverage Endorsement to CGL 25. USL&HFederal Statutory Limits X 26. Carrier Rating shall be Best's Rating of A-VII or better or its equivalent X 27. Notice of Cancellation, nonrenewal or material change in coverage shall be provided to County at least thirty (30) days prior to action. X 28. The County shall be named Additional Insured on all policies except Workers Compensation, Errors and Omissions/Professional Liability and Auto. X 29. Certificate of Insurance shall show Bid Number and Bid Title. X 30. Environmental Impairment Liability, including coverage of on-site clean up......BI/PD \$3 Million per occurrence/\$6 Million Aggregate In addition to environmental impairment liability, if work requires clean up, remediation, and/or removal of bio-solids, bio-hazards waste, and any hazardous or toxic material via transportation request: Business Auto Liability\$2 Million per occurrence with MCS-90 and CA9948 (or equivalent endorsements specifically referenced in the certificate of insurance __31. Cyber insurance......\$2Million per occurrence/Aggregate 32. OTHER INSURANCE REQUIRED: INSURANCE AGENT'S STATEMENT: I have reviewed the above requirements with the bidder named below and have advised the bidder of required coverages not provided through this agency. AGENCY NAME:_____ AUTH. SIGNATURE: BIDDER'S STATEMENT: If awarded the Contract, I will comply with all Contract insurance requirements.

AUTH. SIGNATURE: