

**ARLINGTON COUNTY, VIRGINIA
OFFICE OF THE PURCHASING AGENT**

INVITATION TO BID NO. 23-DES-ITBPW-432

B I D F O R M

**ELECTRONIC BIDS WILL BE RECEIVED BY THE COUNTY VIA VENDOR REGISTRY NOT LATER THAN 2:00
P.M., NOVEMBER 21, 2022.**

FOR PROVIDING ON-CALL OUTDOOR LIGHTING SYSTEM MAINTENANCE, REPAIR, AND REBUILD SERVICES
IDENTIFIED HEREIN IN ACCORDANCE WITH THE DRAWINGS, SPECIFICATIONS, TERMS AND CONDITIONS
OF THIS SOLICITATION

**BIDDERS SHALL FURNISH ALL NECESSARY LABOR, EQUIPMENT, MATERIALS, TOOLS, PARTS,
SUPPLIES, TRANSPORTATION, SUPERVISION AND ALL INCIDENTALS NECESSARY TO PERFORM
THE WORK AS SET FORTH IN ACCORDANCE WITH THE SPECIFICATIONS AND PRICE SCHEDULE
(ATTACHMENT A). ALL PRICES INCLUDE PROVISION AND INSTALLATION. THE COUNTY RESERVE
THE RIGHT TO ADD EQUIPMENT AND MAINTENANCE PERSONNEL.**

**Bidders shall enter the Unit Prices on Attachment A-Price Schedule and enter the Grand Total
from Attachment A below:**

Grand Total from Attachment A: \$ _____

**Bidder shall enter all positions, equipment and their hourly rate for who will be working on
this contract.**

POSITIONS UTILIZED	PREVAILING WAGE HOURLY RATE FOR PERSONELL	EQUIPMENT HOURLY RATE	TOTAL RATE (PW HR. RATE X EQUIP. HR.RATE)
Foreman			
Laborer			
Lineman			
Welder with accessories			
Concrete Finisher			
Utility truck with Driver			
Dump truck with Driver			
Pole truck with Driver			
Aerial lift truck with Driver			
Backhoe with Operator			
Air Compressor with air tools and Driver			
Pole trailer			
Cable trailer			
TOTAL RATE			

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 SIGNATURE:

PRINT NAME AND TITLE:

ADDRESS:

CITY/STATE/ZIP:

TELEPHONE NO.:

E-MAIL ADDRESS:

THIS ENTITY IS INCORPORATED
IN:

THIS ENTITY IS A:

(check the applicable
option)

CORPORATION ☐

LIMITED PARTNERSHIP ☐

GENERAL PARTNERSHIP ☐

UNINCORPORATED
ASSOCIATION ☐

LIMITED LIABILITY COMPANY ☐

SOLE PROPRIETORSHIP ☐

IS BIDDER AUTHORIZED TO TRANSACT BUSINESS IN THE COMMONWEALTH
OF VIRGINIA?

YES ☐ NO ☐

IDENTIFICATION NO. ISSUED TO THE ENTITY BY THE
SCC:

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

VIRGINIA CONTRACTOR'S LICENSE NUMBER:

ENTITY'S DUN & BRADSTREET D-U-N-S NUMBER: (if available):

HAS YOUR FIRM OR ANY OF ITS PRINCIPALS BEEN DEBARRED, ENJOINED, OR YES ☐ NO ☐

SUSPENDED FROM SUBMITTING BIDS TO ARLINGTON COUNTY, VIRGINIA,
OR ANY OTHER STATE OR POLITICAL SUBDIVISION WITHIN THE PAST THREE
YEARS?

HAS YOUR FIRM DEFAULTED ON ANY PROJECT IN THE LAST YES ☐ NO ☐
THREE YEARS?

HAS YOUR FIRM HAD ANY TYPE OF BUSINESS, CONTRACTING OR TRADE YES ☐ NO ☐
LICENSE, REGISTRATION OR CERTIFICATION REVOKED OR SUSPENDED IN
THE PAST THREE YEARS?

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 APPLICABLE 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 OWNED: ☐ NEITHER: ☐

The undersigned certifies that (Bidder Name) _____ is currently registered with the Virginia State Board of Contractors as required by the Code of Virginia. Certificate Number _____ for a Class _____ License was issued on the _____ day of _____, 20 _____. The undersigned further certifies that the registration fee and all renewal fees required under law have been paid.

MINIMUM BIDDER QUALIFICATIONS:

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

- **Company Qualifications:** 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.
- **Provide a copy of Virginia Class A License and a copy of the VDOT prequalification certificate with bid.**
- **Project Experience:** Bidders shall provide a list of three (3) similar 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:**
 - Lead Worker/Foreman has VDOT Intermediate Work Zone Traffic Control Certification ([ATTACH TO YOUR BID SUBMISSION](#)) YES ☐ NO ☐

COMPLETE THE PRICING SHEET PROVIDED WITH THE BID DOCUMENTS AS ATTACHMENT A TO ITB NO. 23-DES-ITBPW-432 AND SUBMIT IT WITH YOUR BID.

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

THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLOWING:

THE OFFICIAL COPY OF THE SOLICITATION DOCUMENTS, WHICH INCLUDES ANY ADDENDA, IS THE ELECTRONIC COPY THAT IS AVAILABLE FROM THE [VENDOR REGISTRY](#) WEBSITE.

VENDORS ARE REQUIRED TO REGISTER ON [VENDOR REGISTRY](#) IN ORDER TO SUBMIT A RESPONSE TO THIS INVITATION TO BID. **NO RESPONSES WILL BE ACCEPTED AFTER THE BID DUE DATE AND TIME.**

POTENTIAL BIDDERS ARE RESPONSIBLE FOR DETERMINING THE ACCURACY AND COMPLETENESS OF ALL SOLICITATION DOCUMENTS THEY RECEIVE FROM ANY SOURCE, INCLUDING THE COUNTY.

The undersigned acknowledges receipt of the following Addenda:

ADDENDUM NO. 1 DATE: _____ INITIAL: _____

ADDENDUM NO. 2 DATE: _____ INITIAL: _____

ADDENDUM NO. 3 DATE: _____ INITIAL: _____

TRADE SECRETS OR PROPRIETARY INFORMATION:

Trade secrets or proprietary information submitted by a Bidder in connection with a procurement transaction will not be subject to public disclosure under the Virginia Freedom of Information Act. Pursuant to Section 4-111 of the Arlington County Purchasing Resolution, however, a Bidder seeking to protect submitted data or materials from disclosure must, before or upon submission of the data or materials, identify the data or materials to be protected and state the reasons why protection is necessary.

Please mark one:

☐ No, the bid that I have submitted does not contain any trade secrets and/or proprietary information.

☐ Yes, the bid that I have submitted does contain trade secrets and/or proprietary information.

If Yes, you must clearly identify below the exact data or materials to be protected and list all applicable page numbers, sections, and paragraphs of the bid that contain such data or materials:

State the specific reason(s) why protection is necessary and why the identified information constitutes a trade secret or is proprietary:

If you fail above to identify the data or materials to be protected or to state the reason(s) why protection is necessary, you will not have invoked the protection of Section 4-111 of the Purchasing Resolution. Accordingly, upon the award of a contract, the bid will be open for public inspection consistent with applicable law.

CERTIFICATION OF NON-COLLUSION: The undersigned certifies that this bid is not the result of or affected by (1) any act of collusion with another person engaged in the same line of business or commerce (as defined in Virginia Code §§ 59.1-68.6 *et seq.*) or (2) any act of fraud punishable under the Virginia Governmental Frauds Act (Virginia Code §§ 18.2-498.1 *et seq.*).

CONTACT PERSON AND MAILING ADDRESS FOR DELIVERY OF NOTICES

Provide the name and address of the person who is designated to receive notices and other communications regarding this solicitation. Refer to the “Notices” section in the draft Contract Terms and Conditions for information regarding delivery of notices.

NAME:

ADDRESS:

E-MAIL:

ACKNOWLEDGEMENT OF COUNTY COVID-19 VACCINATION POLICY

I, _____(hereinafter 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 basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

Signed: _____ **Date:** _____

Name of Bidder: _____

INSURANCE CHECKLIST

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

COVERAGES REQUIRED

COVERAGE MINIMUM(S)

COVERAGES REQUIRED

LIMITS (FIGURES DENOTE MINIMUMS)

- ☒ 1. Workers' Compensation..... Statutory limits of Virginia
- ☒ 2. Employer's Liability.....\$500,000/accident, \$500,000/disease, \$500,000/disease policy limit
- ☒ 3. Commercial General Liability.....\$1,000,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- ☒ 4. Premises/Operations.....\$500,000 CSL BI/PD each occurrence, \$ 1 Million annual aggregate
- ☒ 5. Automobile Liability.....\$1 Million BI/PD each accident, Uninsured Motorist
- ☒ 6. Owned/Hired/Non-Owned Vehicles.....\$1 Million BI/PD each accident, Uninsured Motorist
- ☒ 7. Independent Contractors.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- ☒ 8. Products Liability.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- ☒ 9. Completed Operations.....\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate
- ☒ 10. Contractual Liability (Must be shown on Certificate).....\$1 Million CSL BI/PD each occurrence, \$ 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
- ☐ c. Medical Malpractice.....\$1 Million per occurrence/claim
- ☐ d. Medical Professional Liability.....\$1 Million per occurrence/claim
- ☒ 15. Miscellaneous E&O/ Professional Liability\$1 Million per occurrence/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 per occurrence
- ☐ 19. Garagekeepers Liability.....\$500,000 Comprehensive, \$500,000 Collision
- ☐ 20. Inland Marine-Bailee's Insurance..... \$ _____
- ☐ 21. Moving and Rigging Floater..... Endorsement to CGL
- ☐ 22. Dishonesty Bond.....\$ _____
- ☒ 23. Builder's Risk..... Provide Coverage in the full amount of contract
- ☐ 24. XCU Coverage..... Endorsement to CGL
- ☐ 25. USL&H..... Federal Statutory Limits
- ☒ 26. Carrier Rating shall be Best's Rating of A-VII or better or its equivalent
- ☒ 27. Notice of Cancellation, nonrenewal or material change in coverage shall be provided to County at least thirty (30) days prior to action.
- ☒ 28. The County shall be named Additional Insured on all policies except Workers Compensation, Errors and Omissions/Professional Liability and Auto.
- ☒ 29. Certificate of Insurance shall show Bid Number and Bid Title.
- ☒ 30. Environmental Impairment Liability, including coverage of on-site clean up.....BI/PD \$3 Million per occurrence/\$6 Million Aggregate
- ☐ a. 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:
- ☐ X 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.....\$2 Million 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.

BIDDER NAME: _____

AUTH. SIGNATURE: _____