

ARLINGTON COUNTY, VIRGINIA  
OFFICE OF THE PURCHASING AGENT

INVITATION TO BID NO. 24-DES-ITBPW-403

B I D F O R M

ELECTRONIC BIDS WILL BE RECEIVED BY THE COUNTY VIA VENDOR REGISTRY NOT LATER THAN 1:00 P.M.,  
JANUARY 25, 2024.

FOR PROVIDING ON-CALL ROOF REPAIR AND REPLACEMENT SERVICES  
IDENTIFIED HEREIN IN ACCORDANCE WITH THE TERMS AND CONDITIONS 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 SIGNATURE:

\_\_\_\_\_

PRINT NAME AND TITLE:

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

CITY/STATE/ZIP:

\_\_\_\_\_

TELEPHONE NO.:

E-MAIL ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

THIS ENTITY IS INCORPORATED

IN:

\_\_\_\_\_

THIS ENTITY IS A:

CORPORATION

LIMITED PARTNERSHIP

*(check the  
applicable option)*

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 SUSPENDED 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 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.

**LIQUIDATED DAMAGES:**

Value of Task Order	Liquidated Damages
\$0 to \$10,000	\$100/Day
\$10,001 to \$50,000	\$250/Day
Over \$50,000	\$500/Day

**MINIMUM BIDDER QUALIFICATIONS:**

**Company Qualifications:**

- Bidders shall have 5 years of experience in providing roofing maintenance, repair and replacement services. Bidders shall provide a list of a minimum of five (5) projects for On-call Roof Repair and Replacement Services, of similar size and scope, that have been executed during the past five (5) years for consideration of application to the below individual requirements. Each project shall meet all of these requirements and bidders can submit separate projects for each requirement.

BID FORM, PAGE 3 OF 6

- Have completed at least five (5) roof replacement project within the past (5) five years in occupied building.
- Have completed at least three (3) roof repair, retrofit, and replacement projects with a construction value of \$500K or greater within the past five (5) years.

Bidders' list shall include the following information to show compliance with the experience criteria:

- Project Name and Location
- Project description and scope of work
- Project managers' contact details (telephone and email).

BID FORM, PAGE 4 OF 7

- Project period of performance (start date, scheduled completion, and actual completion date)
- Final contract value

The Bidder shall be certified by at least two (2) manufacturers per each roof type listed to install build-up, single-ply, and modified bitumen roofs.

• **Staffing Qualifications:**

Submit resumes of all key personnel proposed for this contract that have experience as designated key personnel in similar size and type of projects.

- Designated Project Manager
- Designated Project Superintendent(s)/Supervisor - shall have a minimum of ten (10) years' experience in roofing projects
- Designated Safety Officers - shall have a minimum of five (5) years' experience in roofing projects

• Bidders shall complete the following and submit with their bid:

1. Attachment A – Green Roof Qualification Form
2. Attachment B – Green Roof Reference Form
3. Safety Plan including documentation of OSHA Fall Protection Devices.

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 an Offeror in connection with a procurement transaction will not be subject to public disclosure under the Virginia Freedom of Information Act. Pursuant to Section 4-112 of the Arlington County Purchasing Resolution, however, an Offeror seeking to protect submitted data or materials from disclosure must, before or upon submission of the data or materials, identify the specific data or materials to be protected and state the reasons why protection is necessary. Please note that designation of an entire bid, proposal, or prequalification application or of line-item prices or the total bid amount is prohibited.

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:

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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:

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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: \_\_\_\_\_

**INSURANCE CHECKLIST**

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

**COVERAGES REQUIRED**

**LIMITS (FIGURES DENOTE MINIMUMS)**

- Workers' Compensation**.....Statutory limits of Virginia
- Employer's Liability**.....\$500,000/accident, \$500,000/disease, \$500,000/disease policy limit
- Commercial General Liability**..... \$1,000,000 CSL BI/PD each occurrence, \$2 Million annual aggregate
  - Premises/Operations**.....\$1, Million CSL BI/PD each occurrence, \$ 2 Million annual aggregate
  - Independent Contractors**.....\$1 million CSL BI/PD each occurrence, \$2 Million annual aggregate
  - Products Liability**..... \$1 million CSL BI/PD each occurrence, \$2 Million annual aggregate
  - Completed Operations**..... \$1 million CSL BI/PD each occurrence, \$2 Million annual aggregate
  - Contractual Liability (Must be shown on Certificate)**... \$1 million CSL BI/PD each occurrence, \$2 Million annual aggregate
  - Personal and Advertising Injury Liability**.....\$1 million each offense, \$2 Million annual aggregate
  - Moving and Rigging Floater**.....Endorsement to CGL
  - XCU Coverage**.....Endorsement to CGL
- Automobile Liability**.....\$1 million CSL BI/PD each accident, Uninsured Motorist
  - Owned/Hired/Non-Owned Vehicle**.....\$1 million BI/PD each accident, Uninsured Motorist
  - Motor Carrier Act (MCS-90) and CA9948 (or equivalent) Endorsements** .....\$ 2 million BI/PD each accident, Uninsured Motorist
- Umbrella/Excess Liability**.....\$1 million Bodily Injury, Property Damage and Personal Injury
- Per Project Aggregate for General Liability or Umbrella/Excess Liability (check coverage)**
- Professional Liability/ Errors and Omission (E&O)**
  - a. Architects and Engineers**.....\$1 million per occurrence/claim
  - b. Asbestos Removal Liability** .....\$3 million per occurrence/claim
  - c. Medical Malpractice**.....\$2.55 million per occurrence/claim or the statutory VA annual claim cap whichever is greater.
  - Miscellaneous E&O**.....\$1 million per occurrence/claim
- Motor Cargo Insurance**.....\$ \_\_\_\_\_ (to the total value of the goods being transported)
- Garage Liability**.....\$1 million Bodily Injury, Property Damage per occurrence
- Garage Keepers Liability**.....\$1Million Comprehensive, \$1 Million Collision
- Inland Marine-Bailee's Insurance**..... \$ \_\_\_\_\_ (maximum value of goods under Contractor's care)
- Crime Liability/ Employee Dishonesty insurance or Dishonesty Bond**.....\$ \_\_\_\_\_  
(Maximum value of revenue or goods that can be taken at one time)
- Builder's Risk**.....\$ \_\_\_\_\_ (Provide Coverage in the full amount of contract)
- USL&H**.....Federal Statutory Limits
- Carrier Rating shall be Best's Rating of A-VII or better or its equivalent**
- Notice of Cancellation, nonrenewal or material change in coverage shall be provided to County at least thirty (30) days prior to action.**
- The County shall be named Additional Insured on all policies except Workers Compensation, Errors, and Omissions/Professional Liability and auto.**
- Certificate of Insurance shall show Contract Number and Bid Title.**
- Environmental Impairment Liability, including coverage of on-site clean up**.....BI/PD \$3 Million per occurrence or \$6 Million Aggregate
  - a. 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 add #16 from this checklist.**
- Cyber insurance with Technology E&O**..... \$2 Million per occurrence
- OTHER INSURANCE REQUIRED:** \_\_\_\_\_

**BIDDER'S STATEMENT:**

If awarded the contract, I will comply with contract insurance requirements.

BIDDER NAME: \_\_\_\_\_

AUTH. SIGNATURE: \_\_\_\_\_

PRICE BID OF CONTRACTOR

**Regular and Emergency Repair Services:** Bidder(s) shall provide an hourly rate for Roof Repair and Replacement Services in accordance with the scope of services, and terms and conditions identified herein. Prices shall include all direct and indirect costs such as travel, disposal fees, permits, profit and overhead, warranties, supervision, etc. Portal to Portal charges shall not be allowed.

**Labor Rates – Regular Time – 7:00 a.m. to 4:00 p.m. Monday through Friday.**

**Labor Rates – Overtime – 4:01 p.m. to 6:59 a.m. Monday through Friday, Weekends and Holidays.** All overtime rates shall be time and half.

Costs incurred for; material acquisition; handling, delivery, and movement of Contractor-owned or rented equipment; project administration; inspections; disposal fees; estimates and administrative duties are overhead and must be included in the fully burdened hourly labor rates.

Position	Base Hourly Rate	Direct and Indirect Cost	Fully Burdened Hourly Rate
Project Manager			\$ _____
Project Superintendent/Supervisor			\$ _____
Crew Foreman			\$ _____
DEQ Stormwater Inspector			\$ _____
Helper/Laborer			\$ _____

The Contractor shall always have during the contract term a minimum of two (2) five-person project crews. When combined, should compose of a project superintendent/supervisor, a crew foreman, and eight helpers/laborers.

## GREEN ROOFS

### - FIRM QUALIFICATIONS AND REFERENCES -

*The form shall be completed in its entirety or it will be considered incomplete*

#### MINIMUM FIRM QUALIFICATIONS (Must possess all three)

- 1) DEQ Certified Stormwater Management Inspector
- 2) Minimum of two (2) years of experience in maintenance of green roofs on commercial or municipal properties
- 3) Must have Personal Fall Arrest System (OSHA)

*\* Provide documentation of the Personal Fall Arrest System with the Bid submission*

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*Check one and provide name and training information below:*

#### DEQ Certified Stormwater Management Inspector

Personnel is a DEQ Certified Stormwater Management Inspector

Personnel has already taken training and is scheduled to take the exam

Personnel is scheduled for training and will take exam within six months of training completion

Name of DEQ Inspector, Dates of Training and Exam Date

*\* NOTE: It is important that the Contractor address information on minimum qualifications on the Reference Form \**

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#### PERSONNEL QUALIFICATIONS

The Contractor shall provide on-going, dedicated leadership to direct and monitor work performance. The Contractor shall have leadership on the job site at all times, and the time may be split between the Crew Foreman and Crew Chief. The Crew Foreman and Crew Chief shall have demonstrated experience and understanding of landscape maintenance and possess the following qualifications:

##### CREW FOREMAN

Professional Experience (Must possess all five):

Minimum of two (2) years of experience as a Crew Foreman

Minimum of two (2) years of experience in green roof maintenance and weed identification

Minimum of three (3) years of verifiable experience in landscape maintenance and/or installation

Demonstrated experience reading & comprehending Construction Documents

Fluent in English

*\* Submit resume(s) or qualification summary for the Foreman with the Bid submission*



IN THE CASE OF MAJOR REPAIRS OR RECONSTRUCTION, THE CONTRACTOR SHALL HAVE ON STAFF OR SUBCONTRACT THIS PERSONNEL:

- Green Roof Professional (GRP) Certification through Green Roofs for Healthy Cities, OR
- Certified Green Roof Contractor through Roofmeadow, OR
- Experience designing/installing three (3) or more commercial or municipal green roofs

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*\* Contractor shall print out and sign below \**

Contractor: Please check both:

I understand that any replacement Crew Foreman during the term of the contract MUST meet the criteria above and are subject to approval of the Contract Administrator.

I understand that non-compliance with any of the above requirements may be sufficient reason to cause rejection of the Offeror's bid and/or termination of the contract.

*By signing below, the Contractor certifies that all information described herein accurately reflects Firm qualifications*

DATE

BUSINESS NAME

NAME and TITLE

SIGNATURE

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## GREEN ROOFS

### - FIRM REFERENCES -

*The form shall be completed in its entirety or it will be considered incomplete*

#### FIRM REFERENCES

*\* REMINDER: The Contractor shall provide information on minimum qualifications below \**

Provide five (5) references from the last three (3) years for qualification verification

#### REFERENCE #1

Project Name

Project Location

Project Officer's Name

Project Officer's Phone

Project Officer's Email

Project Scope

Similarities to this  
Scope of Work

#### REFERENCE #2

Project Name

Project Location

Project Officer's Name

Project Officer's Phone

Project Officer's Email

Project Scope

Similarities to this  
Scope of Work

**REFERENCE #3**

Project Name

Project Location

Project Officer's Name

Project Officer's Phone

Project Officer's Email

Project Scope

Similarities to this  
Scope of Work

**REFERENCE #4**

Project Name

Project Location

Project Officer's Name

Project Officer's Phone

Project Officer's Email

Project Scope

Similarities to this  
Scope of Work

**REFERENCE #5**

Project Name

Project Location

Project Officer's Name

Project Officer's Phone

Project Officer's Email

Project Scope

Similarities to this  
Scope of Work

*\* REMINDER: Submit personnel resume(s) or qualification summary(ies) with the Bid submission \**

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USE THIS SPACE TO DESCRIBE ANY ADDITIONAL QUALIFICATIONS or RELEVANT EXPERIENCE (*Optional*)

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*\* Contractor shall print out and sign below \**

*By signing below, the Contractor certifies that all information described herein accurately reflects Firm qualifications.*

**DATE**

**BUSINESS NAME**

**SIGNATURE and TITLE**

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