

ARLINGTON COUNTY, VIRGINIA

INVITATION TO BID NO. 21-DES-ITB-177

B I D F O R M

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

**BIDS WILL BE OPENED AT 2:00 P.M., ON AUGUST 31, 2020**

FOR PROVIDING ELECTRICAL MAINTENANCE AND REPAIR WORK FOR VARIOUS COUNTY AND LEASED FACILITIES 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 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 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.*

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

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?

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

BIDDER STATUS: MINORITY OWNED:  WOMAN OWNED:  NEITHER:

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 AT: [HTTPS://VRAPP.VENDORREGISTRY.COM/BIDS/VIEW/BIDSLIST?BUYERID=A596C7C4-0123-4202-BF15-3583300EE088](https://vrapp.vendorregistry.com/bids/view/bidslst?buyerid=A596C7C4-0123-4202-BF15-3583300EE088).

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.

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

**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?**

**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

**BIDDER STATUS:**      **MINORITY OWNED:**       **WOMAN OWNED:**       **NEITHER:**

THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLOWING:

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

**BID FORM PRICE SHEET**

1. HOURLY LABOR RATES

HOURLY RATES INCLUDE THE PROVISION OF ALL THINGS NECESSARY FOR PERFORMING REPAIRS, INSPECTION, AND MAINTENANCE, INCLUDING BUT NOT LIMITED TO, LABOR, TOOLS, TRANSPORTATION TO, FROM AND BETWEEN JOBS, PARKING, TOOLS-OF-THE-TRADE, MEANS FOR ACCESS, AND CONSUMABLE SUPPLIES. BIDDER MUST BID ON ALL 3 POSITIONS AND LINE ITEMS TO BE DEEMED RESPONSIVE.

LINE ITEM	POSITION	REGULAR HOURLY RATE	OVERTIME RATE (Work before 7:00am and after 5:00pm, weekends and holidays)
1	Project Manager	\$	
2	Electrician (Journeyman or Master Electrician)	\$	\$
3	Electrician Helper	\$	\$
	Sub-Total	\$	\$
<b>GRAND TOTAL</b> ( <i>add both Regular Hourly Rate Sub-Total and Overtime Rate Sub-Total for Grand Total Amount</i> )		\$	

In addition to the completed and properly executed Bid Form, Bidders must provide the following information with their bids. Bids submitted without this documentation, or bids submitted by bidders who do not meet these requirements, may be subject to rejection:

- A. Resumes and certifications of the staff to be assigned to work on County property under this contract, as below:
  - a. Resume of one (1) Master Electrician demonstrating 5 years of experience in the electrical field. A copy of the Master tradesman certification from the Virginia Board of Contractors.
  - b. Resumes of three (3) Journeyman Electricians demonstrating 5 years of experience in the electrical field. Copies of the Journeyman tradesman certifications from the Virginia Board of Contractors for each of them.
  - c. Resumes of four (4) Electrician Helpers demonstrating 1 year of experience in the electrical field.
  
- B. Bidders can provide up to five (5) references for similar work, all of which must be within the past three (3) years. Only commercial or governmental references will be accepted as meeting this requirement. Include contact name, phone number and e-mail address of the contact

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

- C. person, the organization name, dates of service and a brief description of the work performed. Invalid phone numbers and/or e-mail addresses will not be considered a valid reference.

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 of the bid that contain such data or materials:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

State the specific reason(s) why protection is necessary:

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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: \_\_\_\_\_

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

REFERENCES

Bidders can provide up to five references for similar services that have been provided by the Bidder within the past 3 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: \_\_\_\_\_

REFERENCE 3: Contact Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Contract/Project Name: \_\_\_\_\_  
Contract/Project Dates (from-to): \_\_\_\_\_  
Contract/Project  
Description: \_\_\_\_\_

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

REFERENCE 4: Contact Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Contract/Project Name: \_\_\_\_\_  
Contract/Project Dates (from-to): \_\_\_\_\_  
Contract/Project  
Description: \_\_\_\_\_

REFERENCE 5: Contact Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Contract/Project Name: \_\_\_\_\_  
Contract/Project Dates (from-to): \_\_\_\_\_  
Contract/Project  
Description: \_\_\_\_\_

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



**ATTACHMENT A**  
**INSURANCE CHECKLIST**

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

**COVERAGES REQUIRED**

**COVERAGE MINIMUM(S)**

- X\_1. Workers' Compensation ..... Statutory limits of Virginia
- \_\_2. Employer's Liability ..... \$100,000 accident, \$100,000 disease, \$500,000 disease policy limit
- X\_3. Commercial General Liability ..... \$1,000,000 CSL BI/PD each occurrence, \$2 Million annual aggregate
- \_\_4. Premises/Operations ..... \$500,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- X\_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 ..... \$500,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- \_\_8. Products Liability ..... \$500,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- \_\_9. Completed Operations ..... \$500,000 CSL BI/PD each occurrence, \$1 Million annual aggregate
- \_\_10. Contractual Liability (Must be shown on Certificate) ..... \$500,000 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 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 ..... \$ Limits as set forth in Virginia Code 8.01.581.15
- X\_15. Miscellaneous E&O ..... \$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. Crime and Employee Dishonesty Coverage ..... \$ \_\_\_\_\_
- \_\_23. Builder's Risk ..... Provide Coverage in the full amount of Contract, including any amendments
- \_\_24. XCU Coverage ..... Endorsement to CGL
- \_\_25. USL&H ..... Federal Statutory Limits
- \_\_26. Carrier Rating shall be A.M. Best Co.'s Rating of A-VII or better or equivalent
- \_\_27. Notice of Cancellation, nonrenewal or material change in coverage shall be provided to County at least 30 days prior to action.
- \_\_28. The County shall be an Additional Insured on all policies except Workers Compensation and Auto and Professional Liability.
- \_\_29. Certificate of Insurance shall show Bid Number and Bid Title.
- \_\_30. OTHER INSURANCE REQUIRED: \_\_\_\_\_

**INSURANCE AGENT'S STATEMENT:**

I have reviewed the above requirements with the Offeror named below and have advised the Offeror of required coverages not provided through this agency.

AGENCY NAME: \_\_\_\_\_

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

**OFFEROR'S STATEMENT:**

If awarded the Contract, I will comply with all Contract insurance requirements.

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

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