City of Spartanburg

Procurement and Property Division Post Office Drawer 5107, SC 29304-1749 Phone (864) 596-2049 - Fax (864) 596-2365

Legal Notice Request for Proposal for Removal and Replacement of Roof

August 20, 2020

NOTICE IS HEREBY GIVEN – The City of Spartanburg is seeking proposal from vendors to provide construction services for Removal and Replacement of the existing roof at Fire Station 2 located at 905 Union Street Spartanburg, SC. All work to comply with the specifications developed by the city to provide quality workmanship.

Proposal No: 2021-09-08-06

The City of Spartanburg, hereby, notifies all proposers that it will affirmatively ensure that all disadvantaged and women's business enterprises will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of gender, race, color or national origin in consideration for an award.

The City of Spartanburg reserves the right to reject any or all proposals or to waive any informality in the qualifications process. Proposals may be held by the City of Spartanburg for a period not to exceed sixty (60) days from the date of the opening of Proposals for the purpose of reviewing the Proposals and investigating the qualifications of prospective parties, prior to awarding of the Contract. The vendor that is awarded the proposal will be required to be a licensed roofing Contractor, obtain a City of Spartanburg Business License and all the required Building Permits.

The Pre-Bid meeting will be held at the Building Maintenance Office Building 305 West Henry Street Spartanburg, SC 29304 on Tuesday, September 1, 2020, 10:00 AM. Please remember due to the COVID-19 concerns we must remain vigilant about social distancing practices. In this season of uncertainty, there is the need to put your and our employee's safety first. Attendees will practice appropriate physical separation (six feet or more) as we go about our work. Please wear masks. Attendees must have temperatures checked.

Email: tmcabee@cityofspartanburg.org.

Complete proposal package also available at https://www.cityofspartanburg.org/bid-opportunities by following the links for Invitations for Bids.

Sealed Proposals shall be submitted to Carl Wright, Procurement and Property Manager on or before Tuesday September 8, 2020 no later than 3 PM, City Hall, 145 West Broad Street at which time they will be publicly opened and read aloud in the Training Room, same location. Attendees will practice appropriate physical separation (six feet or more) as we go about our work. Please wear masks. Attendees must have temperatures to be checked.

Proposals can be hand delivered or mailed to the following address:

City of Spartanburg P.O. Box 5107 145 W. Broad Street Spartanburg, SC. 29304

Attn: Procurement and Property Division

For further information and complete Proposal Package, please contact the Procurement and Property office at (864) 596-2049. Complete proposal package also available at www.cityofspartanburg.org by following the links for Invitations for bids. The following Proposal Number Must be placed on the outer envelope in order for the bid to be Stamped in as accepted on time:

Proposal No: 2021-09-08-06

Exhibit A

CONSTRUCTION SERVICES

Removal and Replacement of the existing roof at Fire Station 2

SCOPE OF WORK

General

The purpose of this work is to provide construction services for the Removal and Replacement of the existing roof at Fire Station 2

Construction Phase

All work shall be warranted for a period not less than one (1) year from the date of acceptance.

- 1. Tear off the existing roofs (3) and haul from the premises.
- 2. Fully adhere one (1) layer of polyiscocyanurate roof insulation for a total R-value of 20 in low rise foam adhesive.
- 3. Install four (4) retrofit roof drains.
- 4. Install a fully adhered 60 mil white PVC FleeceBack roof systems in low rise foam adhesive as per manufacture's specifications.
- 5. Install ½ inch plywood on all flashing surfaces.
- 6. Flash all walls and roof penetrations as per manufacture's specifications.
- 7. Fabricate and install 24 gauge prefinished Kynar 500 counter flashing.
- 8. Fabricate and install PVC coated metal eave strip.
- 9. Furnish minimum (2) year workmanship warranty.
- 10. Full cleanup of all work areas are expected during and after the work is done.

Submit all questions in writing to: No questions will be answered verbally.

Tony McAbee
Building Maintenance Manager
City of Spartanburg
tmcabee@cityofspartanburg.org

TABLE A CONTRACTOR

I certify that I own sufficient equipment to complete this project. Also below are sub-contractors that will work on this project.

Company Name	
Contractor/Owner Signature	Date
	<u>SUBCONTRACTORS</u>
Company Name	Owner / Agent / Contact
Address	City / State / Zip
Federal ID No. or SS	
Email Address	Office Phone Number
Cell Phone Number	
Company Name	Owner / Agent / Contact
Address	City / State / Zip
Federal ID No. or SS	
Email Address	Office Phone Number
Cell Phone Number	

Table B

Contractor References

<u>List only references you have completed work for in the last twelve months.</u>

Company Name:	Federal ID or SS#	
Street Address:		
City, State, Zip:		
Company Name:	Federal ID or SS#	
Street Address:	Telephone #:	
City, State, Zip:	Fax #:	
Company Name	Federal ID or SS#	
Company Name:		
Street Address:		
City, State, Zip:	Fax #:	
Company Name:		
Street Address:	Telephone #:	
City, State, Zip:	Fax #:	
a v	F 1 175 00#	
Company Name:		
Street Address:		
City, State, Zip:	Fax #:	
Company Name:	Federal ID or SS#	
Street Address:	Telephone #:	
City, State, Zip:	Fax #:	
Company Name		
* · V · · · · ·		
Contractor/Owner Signature	 Date	

Exhibit B

Immigration Reform Act:

Read and Sign

Contractor agrees to verify the hiring eligibility of its employees as required under South Carolina's Eligible Immigration Reform Act, S.C. Code Ann., § 41-8-10, et seq. by either registering and participating in the Federal Work Authorization Program (E-Verify) pursuant to the Statute or employ only workers who at the time of their employment possess a valid South Carolina Driver's License or Identification Card or are eligible to obtain same or possess a valid Driver's License or Identification Card from another state deemed by the Director of the Department of Motor Vehicles to have requirements at least as strict as those in South Carolina. Contractor certifies that it will comply with the Statute in its entirety and agrees to provide the Owner with documentation to establish applicability of the Statute to the Contractor and compliance by same.

I		
Contractors Name		
in the Federal Work Authorization Pr	ogram (E-Verify) pursuant to the Statute o	n Act by either registering and participating or employing only workers who at the time of
	th Carolina Driver's License or Identification	
	entification Card from another state which e requirements at least as strict as South Ca	
•	-	o establish the applicability of the Statute to
		Statute with all regards. This certification and
Project.	re that the Contractor verify the hiring elig	ibility of its employees before and during the
110ject.		
	Name of Contractor (Subcontractor, etc.)	
		-
	Contractors Signature	

Date

Exhibit C

Insurance Requirements

Winner will provide COI

CITY OF SPARTANBURG INSURANCE REQUIREMENTS FOR CONTRACTORS AND VENDORS

Revised July 1, 2016

NOTE: DO NOT BID ON THIS PROJECT IF YOU CANNOT MEET THE FOLLOWING INSURANCE REQUIREMENTS

CONTRACTOR'S/VENDORS LIABILITY AND OTHER INSURANCE: The Contractor/Vendor shall purchase and maintain with a company acceptable to the City and authorized to do business in the State of South Carolina, such insurance as will protect him from claims under workers' compensation laws, disability benefit laws or other similar employee benefit laws; from claims for damages because of bodily injury, occupational sickness or disease, or death of his employees, and claims insured by usual personal injury liability coverage; from claims for damages because of bodily injury, sickness or disease, or death of any person other than his employees, including claims insured by usual bodily injury liability coverage; and from claims for injury to or destruction of tangible property, including loss of use resulting there from - any or all of which may arise out of or result from the Contractor/Vendor operation under the contract documents, whether such operations be by himself or any subcontractor or anyone directly or indirectly employed/volunteering by any of them or for whose acts any of them may be legally liable. This insurance shall be written for not less than the limits of liability specified below, or required by law.

Automobile Liability: The amounts of such insurance shall not be less than: <u>Combined Single Limit - \$1,000,000</u>; <u>Split Limits:</u> Bodily injury per person - \$500,000; Bodily Injury per Occurrence - \$1,000,000; and Property Damage - \$500,000

Commercial General Liability: The amounts of such insurance shall not be less than: Each Occurrence - \$1,000,000; Damage to Rented Premises - \$100,000; Med Expenses (per person) \$5,000; Personal & Advertising Injury - \$1,000,000; General Aggregate - \$2,000,000; and Products Completed Operations Aggregate - \$2,000,000. This coverage shall be on an "Occurrence" basis. Coverage shall include Premises and Operations; Products and Completed Operations; Medical Expense in reference to General Liability, and Contractual Liability. Bodily injury and property damage liability shall protect the Contractor and any subcontractor performing work under this contract from claims of bodily injury, Personal & Advertising injury, and property damage which could arise from operations of this contract whether such operations are performed by the Contractor, any subcontractor or anyone directly or indirectly employed by either.

This insurance shall include coverage for products/completed operations, personal injury liability and contractual liability assumed under the indemnity provision of this contract and broad form property damage, explosion, collapse and underground utility damage stating if policy is written on an occurrence basis. Any policy written on a claim made basis must be approved by the City of Spartanburg in advance.

Property Insurance including Builders Risks-Property coverage will name the City of Spartanburg as loss payee in instances where the City has an interest in the property unless otherwise requested.

Workers' Compensation and Employer's Liability – This coverage shall meet the <u>STATUTORY</u> requirement of the State of South Carolina. Employers Liability shall be in the amount of \$500,000 each accident and disease - each employee and \$500,000 disease - policy limit. Sole Proprietors, Partners, Members of LLC and Corporate officers will not be excluded from coverage.

Employers Liability: Each Accident - \$1,000,000; Disease each employee - \$1,000,000; Disease Policy Limit - \$1,000,000

• This is part of Workers' Compensation coverage

Umbrella Liability: Each Occurrence – TBD; Aggregate – TBD

This coverage should be required for high hazard operations including excavation, roofing, water tower installation, painting, repair and removal, large construction projects. Should also consider for certain high hazard special event activities such as fireworks displays, inflatables, mechanical rides, etc.

Professional Liability: Per Occurrence - \$1,000,000; Aggregate - \$1,000,000

This coverage should be required for professional services such as accountant, attorneys, architects, design, engineering and most consultants.

The Contractor/Vendor shall provide the City with insurance certificates certifying that the foregoing insurance is in force; and such insurance certificates shall include provisions that the insurance shall not be cancelled, allowed to expire or be materially changed without giving the City thirty (30) days advance notice by registered mail.

The City of Spartanburg, its employees, and agents shall be named as additional insured under the Contractor/Vendor's general liability policies.

The Contractor is advised that if any part of the work under the contract is sublet, he shall require the subcontractor(s) to carry insurance as required above. However, this will in no way relieve the Contractor/Vendor from providing full insurance coverage on all phases of the project/event, including any that is sublet.

When certain work is to be performed inside right-of-way owned by railroads, South Carolina Department of Transportation or other Agencies, both the Contractor and any subcontractor may be required to furnish individual insurance certificates made in favor by the controlling agency, with limits as established by that agency.

Cancellation and Re-issuance of Insurance: If any insurance required to be provided by the Contractor should be canceled or changed by the insurance company or should any such insurance expire during the period of this contract, the Contractor shall be responsible for securing other acceptable insurance to provide continuous coverage during the life of this contract.

Failure of the Contractor/Vendor to maintain continuous coverage as specified herein will result in this project/event being shut down and any payments due, or to become due, withheld until such time as adequate, acceptable insurance is restored. This would be in addition to any legal recourse open to the City under breach of contract.

All coverage's and provisions shall be in place, and documentation of such coverage shall be provided to the City of Spartanburg, before any work can began.

**All emailed Certificates of Insurance can be forwarded to: kbooker@cityofspartanburg.org

** All Certificate of Insurance submitted via postal mail can be sent to:

City of Spartanburg 145 W. Broad St. Spartanburg, SC 29306 Attn: Kenneth Booker

Exhibit D Sample of Corporate / Company Resolution

A RESOLUTION

FOR THE PURPOSE OF AUTHORIZING SPARTANBURG CITY		TO EXECUTE AN CONTRACT WITH
WHEREAS,	will or has submitted a bid rices; and	d/proposal to Spartanburg City of Spartanburg
WHEREAS,	may be or has been awar	rded a contract to provide good or services to
WHEREAS,	mpt)) State or Local)	
NOW THEREFORE BE IT RESOLVED the		other appropriate governing body) of (Name of Individual) to execute a contract
vith Spartanburg City of Spartanburg in		
ADOPTED AND APPROVED this d	ay of, 20	
NAME ATTESTED	of organization [(signature)
		(

Title: _____

Exhibits E AFFIDAVIT OF NON-COLLUSION

I state	that I am	(title) of	(name of firm) and that I am
autho	rized to make this	s affidavit on behalf of my firm, and its owners, directors, and	d officers. I am the person responsible in my firm
for the	e price(s) and the	amount of this Offer.	
I state	that:		
(1)	The price(s) as	and amount of this Offer have been arrived at independe any other Proposer or potential Proposer.	ntly and without consultation, communication or
(2)	That neither th	e price(s) nor the amount of this Offer, and neither the appen disclosed to any other firm or person who is a Proposer of	
(3)	No attempt has	been made or will be made to induce any firm or person to r than this Offer, or to submit any intentionally high or non-	
(4)	The Offer of m	ny firm is made in good faith and not pursuant to any agree to submit a complementary or other noncompetitive Offer.	ement or discussion with, or inducement from, any
(5)		· · · · · · · · · · · · · · · · · · ·	ates, subsidiaries, officers, directors and employees
	to bidding on a I state thatrepresentations which this Offe treated as frauccontract.	r any act prohibited by State or Federal law in any jurisdict ny public contract, except as described in the attached apper (name of fir are material and important, and will be relied on by the Ci er is submitted. I understand and my firm understands that lulent concealment from the City of Spartanburg of the true.	ndix. m) understands and acknowledges that the above ty of Spartanburg in awarding the contract(s) for t any misstatement in this affidavit is and shall be
	(Authorized	Signature)	
	(Name of C	ompany/Position)	
	Sworn to and	d subscribed before me this day of	, 20
		Notary	
		My Commission Expires:	

Exhibit F GOOD FAITH DOCCUMENTATION MUST ACCOMPANY THE BID DOCUMENT

City of Spartanburg, hereby, notifies all proposers that it will affirmatively ensure that all disadvantaged and women's business enterprises will be afforded full opportunity to submit bids in response to this invitation and will not be discriminated against on the grounds of gender, race, color, or national origin in consideration for an award. Each proposer shall attest that they engaged in good faith efforts in an endeavor to achieve the City's M/WBE goal of 10%.

Any questions or any assistance please contact Mrs. Natasha Pitts. Contact Information

Phone 864-596-3449

Email npitts@cityofspartanburg.org

INTENT TO PERFORM CONTRACT WITH OWN WORKFORCE

PERFORM 100% OF THE WORK REQUIRED, THE BIDDER WILL PROVIDE A LIST OF SUBCONTRACTORS TO PERFORM AND WILL PERFORM ALL ELEMENTS OF THE WORK PROJECT WITH HIS/HER OWN CURRENT WORK FORCES; AND IF THE BIDDER DOES NOT STATES THAT THE BIDDER DOES NOT CUSTOMARILY SUBCONTRACT ELEMENTS OF THIS TYPE OF PROJECT, AND NORMALLY PERFORMS AND HAS THE CAPACITY I HERBY CERTIFY THAT IT IS OUR INTENT TO PERFORM 100% OF THE WORK REQUIRED FOR THE ABOVE PROJECT. IN MAKING THIS CERTIFICATION, THE BIDDER

THE BIDDER AGREES TO PROVIDE ANY INFORMATION OR DOCUMENTATION TO THE CITY OF SPARTANBURG IN SUPPORT OF THE ABOVE STATEMENT.

COMMITMENTS HEREIN SET FORTH. THE UNDERSIGNED HEREBY CERTIFIES THAT HE OR SHE HAS READ THIS DOCUMENTATION AND IS AUTHORIZED TO BIND THE BIDDER TO THE

verification by the Minority & Women Business Enterprise Program Coordinator and that submission of said information is an assertion of its accuracy. properly apprised of the upcoming City of Spartanburg project. Bidders/Responders are advised that the information contained herein is subject to The listing of an MWBE shall constitute a representation by the bidder/responder to City of Spartanburg that such MWBE has been contacted and These documents are a part of this solicitation and contract. You are required to fill out this information.

I certify that the above information is true to the best of my knowledge:

Notary Seal	
	vo ai y signature
	Detail Circuit
day of20	subscribed and sworn to before me this
)ate:
	litle:
	signature:

THIS DOCUMENT MUST BE PROVIDED WITH THE SUBMITTAL AND SIGNED BY THE PERSON SIGNING THE SUBMITTAL

MWBE Good Faith Effort Participation Commitment Contract

This form should be filled out completely and *included in your bid document*. This form should also be accompanied by an executed Letter of Intent from each Sub-Contractor firm listed in this form. You may use additional sheets if necessary.

BID NO:	DATE:
PROJECT NAME:	ADDRESS:
PRIME CONTRACTOR:	CITY: STATE:
CONTACT PERSON:	EMAIL:
TELEPHONE: ()	FAX: ()
	The second secon

MWBE SUBCONTRACTORS

									COMPANY
								CLASS	MWBE
									CITY, STATE
									CONTACT
MBE-B - Amer		Tota	Total					94	PHONE
MBE-B - African American MBE-S - Asian American MBE-H - Hispanic American WBE - American Woman MBE N/A - Native American	MWBE CLASSIFICATION	Total Contract Amount	Total MWBE Participation					PERFORMED	TYPE OF WORK TO BE
IBE-S - Asian American MBE-H - Hispa Woman MBE N/A - Native American	SIFICATION	\$	\$	\$	\$	\$	\$	AMOUNT	SUBCONTRACT % OF WORK
BE-H - Hispanic /e American			%	%	%	%	%		% OF WORK

NON-MWBE SUBCONTRACTORS

	\$	Total Contract Amount	Tot				
%	\$	Total Non-MWBE Participation	Total N				
%	\$						
%	\$	100 PM					14 199
%	\$						
%	\$						
	AMOUNT	PERFORMED				CLASS	
% OF WORK	SUBCONTRACT	TYPE OF WORK TO BE	PHONE	CONTACT	CITY, STATE	MWBE	COMPANY



Removal and Replacement of the existing roof at Fire Station 2

City of Spartanburg
P.O. Box 5107
145 W. Broad Street
Spartanburg, SC. 29304
Email:
cwright@cityofspartanburg.org

Proposer has examined this Request for Proposal, the Advertisement for this Request for Proposal, and the following Addenda (receipt of which is hereby acknowledged):

Ву:		
-,·		(Signature)
		(Printed Name)
Title:		-
Date:		
Address:	Email:	
City:	State:	Zip:
Telephone:	Fax:	
Addenda Number:	Date:	
Addenda Number:	Date:	
Please sign	understanding you be	ave seen all addendums
	understanding you no	ave seen an addendums.
BASE PRICE for Total Cost Rem Removal and Replacement of the	oval existing roof at Fire	\$ Station 2
BASE PRICE for Total Cost Rem Removal and Replacement of the Please complete the provided pro	oval existing roof at Fire soposal sheet which o	\$ Station 2
BASE PRICE for Total Cost Rem Removal and Replacement of the Please complete the provided pro	oval existing roof at Fire soposal sheet which o	\$Station 2 utlines the cost.
BASE PRICE for Total Cost Rem Removal and Replacement of the Please complete the provided pro	oval existing roof at Fire soposal sheet which o Title:	\$Station 2 utlines the cost.