



**BROWARD COUNTY HOUSING AUTHORITY  
SOLICITATION NUMBER QR 17-257- R  
QUOTATION REQUEST**

**ADA COMPLIANT RAMP / PARKING SPACES SERVICES**

**FOR**

**EVERGLADES HEIGHTS**

**QUOTE DUE DATE: OCTOBER 17, 2017, 2:00 PM, EST**

*Please check BCHA's web site for addenda and changes before submitting your quote.*

**CONTACT: ANTHONY J. CARIVEAU, MPA, CPPO, CPPB, FCCN  
PURCHASING DIRECTOR  
BROWARD COUNTY HOUSING AUTHORITY  
4780 NORTH STATE ROAD 7  
LAUDERDALE LAKES, FL 33319  
TELEPHONE: 954-739-1114, EXTENSION 1316  
E-MAIL: acariveau@bchafl.org**

## ADA COMPLIANT RAMP/PARKING SPACES

### 1. INTRODUCTION

The Broward County Housing Authority (herein after, "BCHA") is a Public Housing Agency established in June 1969 under the U.S. Housing Act of 1937 and Chapter 421 of the Florida Statutes and is an Independent Special District of the State of Florida.

The mission of Broward County Housing Authority, its affiliates and instrumentalities (hereinafter, jointly referred to as "BCHA") is to create, provide and increase high quality housing opportunities for Broward County residents through effective and responsive management and responsible stewardship of public and private funds.

The United States Department of Housing and Urban Development ("HUD"), a federal agency, partially funds and monitors operations of the BCHA. Nothing contained in this RFP or in the contract resulting from the selection process shall be construed to create any contractual relationship between the successful Proposer and HUD.

BCHA maintains a website at <http://www.bchafl.org> with information for clients, landlords, prospective business partners, and the public at large.

### 2. STATEMENT OF WORK

The Broward County Housing Authority (BCHA) as a Public Housing Authority existing under Florida statutes, and on behalf of related instrumentalities and single asset affiliated entities are actively soliciting quotations from qualified, licensed and insured contractors to provide conversion of parking spaces to **ADA Compliant Ramp/ Parking Spaces** - two (2) spaces at vacant lots located at 2400 NW 22<sup>nd</sup> Street, Ft. Lauderdale, Fl. 33311 in Broward County Florida, in accordance with the specifications as set forth in this quotation request.

### 3. CONTRACTOR RESPONSIBILITIES

**Standard Service Requirements:** Except as specifically excluded, contractor shall be responsible for providing all services, permits (if required), licenses, materials, labor, supplies, tools and equipment necessary to meet the service requirements contained within this solicitation.

3.1 Contractor shall be familiar with all laws and regulations that may in any way affect the work. The cost/fees for permits must be included in the contractor's price and paid for by the contractor.

3.2 Any penalties or fines imposed on BCHA or contractor for failure to obtain required licenses or permits shall be the sole responsibility of the contractor.

3.3 Contractor will remove all work related debris from BCHA sites daily. BCHA dumpsters and trash receptacles **MAY NOT** be used for this purpose. All debris must be handled and disposed of in accordance with all Federal, State and Local ordinances.

- 3.4 **Personnel:** All employees of the contractor shall be considered to be, at all times the sole employees of the Contractor, under his sole direction and not an employee or agent of BCHA. BCHA may require the contractor to remove an employee if it deems the employee to be careless, incompetent, insubordinate or otherwise objectionable and whose continued employment on BCHA property is not in the best interest of BCHA.
- 3.4 **Employee Identification:** Contractor's personnel must be appropriately attired, courteous and conduct themselves in a professional manner consistent with UPCS requirements. While working on BCHA property, all contractors' inspectors shall wear clearly displayed photo identification badges at shirt pocket height showing they are employees of the contractor. The badges shall be provided by the contractor at the contractor's expense.
- 3.5 Contractor shall be responsible for informing their personnel that under no circumstances are they permitted to accept food or drink from any tenant.
- 3.6 Smoking is **NOT** permitted in any BCHA residential unit or facility.
- 3.7 Contractor's employees must call Property Manager to check in and provide them with the following information: Company name, Building name and nature of work to be performed.
- 3.8 **Davis Bacon Wages are applicable for this project.**
- 3.9 **HUD General Conditions:** Bidders are subject to General Conditions for Construction Contracts, HUD Form 5370-EZ, at <http://portal.hud.gov/hudportal/documents/huddoc?id=5370-EZ.docx>.
- 3.10 Contractor shall fully complete the work within **30 days** from the issue date of the permit. No grace period shall be honored unless previously established and written authorization is granted by the Project Manager.
- 3.11 In the event that the contractor fails to complete the work within the timeframe set forth, and in compliance with the specifications and requirements contained within this solicitation, BCHA reserves the right to pursue alternate remedies which may include the termination of the contract for default.
- 3.12 All parts, materials and work furnished shall be of good quality and free from any defects and shall at all times be subject to BCHA's inspection and approval. Neither BCHA's inspection nor failure to inspect shall relieve contractor of any obligation hereunder. Upon completion of work, if in BCHA's or any inspecting entity's reasonable opinion, any work fails to conform to specifications, or is otherwise defective or unsatisfactory, contractor shall promptly remedy the same at contractor's expense.
- 3.13 All deficiencies in service shall be immediately corrected by the contractor. All corrections shall be made within two (2) business days after such deficiencies are verbally reported to the contractor by BCHA personnel.

#### **4. LICENSING AND INSURANCE INFORMATION**

- 4.1 Before a contract pursuant to this Quotation Request (QR) is executed, the apparent successful Contractor must hold all necessary, applicable professional licenses required by the State of Florida and all regulatory agencies necessary to complete the Service. The Contractor shall obtain, at the Contractor's expense, any permits, certificates and licenses as may be required in the performance of work specified. All required licenses

shall remain active and valid during the entire duration of the subsequent contract. BCHA may require any or all Contractors to submit evidence of proper licensure.

- 4.2 A copy of the contractor's business license allowing the contractor to provide such services within Broward County, Florida;
- 4.3 An original certificate evidencing the contractor's current worker's compensation carrier and coverage amount. BCHA will not accept state waiver of worker's compensation insurance liability;
- 4.4 An original certificate evidencing General Liability coverage evidencing a minimum of \$1,000,000 each occurrence, general aggregate minimum limit of \$1,000,000, together with damage to premises and fire damage of \$50,000 and medical expenses any one person of \$5,000 with a deductible of not greater than \$1,000;
- 4.5 An original certificate showing the contractor's vehicle insurance coverage in a combined single limit of \$1,000,000. For every vehicle utilized during the term of this contract, when not owned by the entity, each vehicle must have evidence of vehicle insurance coverage with limits of no less than \$50,000/\$100,000 and medical pay of \$5,000 must each be furnished with the proposer's response.
- 4.6 Contractor agrees, and hereby authorizes its insurer, to notify BCHA of any substantial change in such insurance coverage described herein. Substantial change includes, but not limited to, events such as cancellation, non-renewal, reduction in coverage, or receipt of a claim against such coverage with potential recovery in excess of twenty percent (20%) of available coverage. BCHA shall be notified at least 30 days in advance of cancellation, non-renewal or adverse change;
- 4.7 The premium cost of all insurance purchased by the Contractor for protection against risks assumed by virtue of the contract shall be borne by the Contractor and is not reimbursable by BCHA;
- 4.8 BCHA reserves the right, but not the obligation, to review and revise any insurance requirements, including limits, coverages and endorsements, based upon insurance market conditions affecting the availability and affordability of coverage. Additionally, BCHA reserves the right, but not the obligation, to review and reject any insurance policies, certificates of insurance, or insurer failing to meet the criteria stated herein;

## **5. Compliance with Law**

While conducting business with BCHA, Proposer shall comply with all applicable Federal, State and local laws, regulations, ordinances and requirements, applicable to the work described herein including, but not limited to, those applicable laws, regulations and requirements governing equal employment opportunity strategies, subcontracting with small and minority firms, women's business enterprise, and labor surplus area firms, equal opportunity for businesses and unemployed and underemployed persons as referenced in Section 3 of The Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u ("Section 3"), the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the Davis-Bacon Act, and shall provide for such compliance in the contract documents as required. It is the policy of BCHA that all proposers that conduct business with BCHA must be authorized and/or licensed to do business in Florida. Proposer is responsible for contacting their local city and county authorities and the State of Florida to ensure that Proposer has complied with all laws and

is authorized and/or licensed to do business in Florida. All applicable fees associated therewith are the responsibility of Proposer.

5.1.1 Proposers are subject to General Conditions of the Contract – Construction, HUD Form-5370, at [https://portal.hud.gov/hudportal/documents/huddoc?id=DOC\\_12133.pdf](https://portal.hud.gov/hudportal/documents/huddoc?id=DOC_12133.pdf)

5.1.2 Proposers are subject to General Contract Conditions – Non-Construction, HUD Form 5370-C, at <http://portal.hud.gov/hudportal/documents/huddoc?id=5370-C1.docx>.

5.1.3 Proposers are subject to 24 CFR 135, Economic Opportunities for Low- and Very Low-Income Persons commonly referred to as Section 3, at [http://www.access.gpo.gov/nara/cfr/waisidx\\_98/24cfr135\\_98.html](http://www.access.gpo.gov/nara/cfr/waisidx_98/24cfr135_98.html). The proposer shall be required to, as detailed therein, “to the greatest extent feasible provide economic opportunities to low- and very-low income persons,” meaning, if the proposer must hire anyone to help with the work, he/she must submit a work plan showing how he/she will give first preference to such jobs to Section 3 persons.

## 5 CONTACTS:

For technical questions regarding the commodities/services listed in this quote, contact Derick Morgan (Project Manager) at 954-739-1114 ext. 2327.

For information regarding bidding procedures, terms and conditions, contact Anthony Cariveau at 954-739-1114 ext. 1316 or by email at: [acariveau@bchafl.org](mailto:acariveau@bchafl.org).

## 6 CONTRACT SERVICE STANDARD

All work performed pursuant to this solicitation must conform and comply with all applicable federal, state, and local laws, statutes, and regulations.

## 7 CONTRACT PAYMENT

7.1 Following the performance of work, the contractor will submit an invoice to Accounts Payable Department, Broward County Housing Authority, 4780 N. State Road 7, Lauderdale Lakes, Florida, 33319 or by email at [payments@bchafl.org](mailto:payments@bchafl.org).

7.2 Contractor’s invoices shall reflect the prices established for the items on this Contract for all orders placed by BCHA even though the Contract number and/or correct prices may not be referenced on each order. Only properly submitted invoices will be officially processed for payment. Invoices submitted without required information will be returned for entry of the missing information and will not be paid until properly completed.

7.3 All invoices must be itemized showing: Contractor’s name, remit to address, purchase order number, service location, site name and prices per the contract, itemized in order to facilitate contract auditing.

7.4 Each invoice must detail the service and location at which performed, accompanied by a copy of the work order signed by the BCHA Contact Person indicating satisfactory completion of work.

7.5 BCHA will pay the properly completed and authorized invoice within thirty (30) days of receipt. BCHA will pay invoices by check.

7.6 All checks will be mailed.

## 8 SCOPE OF WORK

### 8.1 General Requirements

The specifications pertaining to this solicitation involves the conversion of existing parking spaces to ADA Compliant Ramp/Parking Spaces (2 spaces). The contractor will be required to perform all work and furnish all labor, materials and permits, including but not limited to following:

- Cut and remove concrete as needed
- Ramp existing sidewalk to be ADA compliant (see picture #4)
- Install new ADA Mat
- Paint and stripe new ADA spaces as per code
- Install appropriate signage as needed and compliant with current ADA code
- Paint disabled logo on resealed ADA parking spaces
- Service is desired with 30 days after issuance of permit.

The location of proposed spaces is indicated by an “X” on provided survey, see Attachment D and Photos 1, 2, 3 & 4

**The awarded contractor shall commence work within (5) days following the issuance of permit. All work shall be performed to the best standard of workmanship and meet the latest requirements of the South Florida Building Code and National Electric Code, as well as adhering to all state, county and municipal codes, guidelines and regulations.**

## 9 SOLICITATION BACKGROUND AND ANTICIPATED SCHEDULE

9.1 BCHA is seeking to obtain quotations from firms qualified to perform services as described within the Scope of Work at location listed above.

9.2 This solicitation is subject to the BCHA Procurement Policy, as revised September 26, 2017, a copy of which is available at [www.bchafl.org](http://www.bchafl.org).

## 10 SITE VISIT

It is highly recommended that proposers visit the project site. BCHA will not be held responsible for incorrect fee proposals due to contractor’s misunderstanding of requirements,

measurements, and services required. BCHA staff will only be available to show the site at the time listed below.

10.1.1 Should bidder not visit site, BCHA will not be held responsible for incorrect fee bids due to contractor’s misunderstanding of requirements, size and services required at the site. Questions must be submitted in writing.

| Location   | Date & Time                                    | Site Contact  |
|--|--|---|
| <b>Everglades Heights:</b><br>2400 NW 22 <sup>nd</sup> Street, Ft.<br>Lauderdale , Fl. 33311 | <b>OCTOBER 04,<br/>           2017 @ 10 AM</b> | Derick Morgan<br>(Property Mgr.)<br>Tel: 954-739-1114 Ext. 2327 |

**11 BID SUBMISSION:**

Bid submission should include **pages 1 through 8** of this solicitation. All required sections should be completed. **Do not submit Attachment A. All required sections should be completed. Bidder is responsible for the completeness of all forms and the submission of the required documents.** Bids may be submitted by email at [Purchasing@bchafl.org](mailto:Purchasing@bchafl.org).

**12 BID EVALUATION DOCUMENTATION AND MEETING:**

In order to verify that the Bidder has adequately incorporated all elements of the Work and the requirements of the Contract Documents in its bid prices, the Bidder shall, upon request of the Owner, promptly make available for the Owner’s review a complete itemization and breakdown of its Total Bid amount, a description of the Bidder’s understanding of the Work, and a proposed schedule. Prior to award, upon request of the Owner, the Bidder and proposed subcontractors and suppliers shall attend a bid evaluation meeting with the Owner, and shall bring to the meeting any documents requested by the Owner to assist the Owner in evaluating the bid and the Bidder’s understanding of the Project. In the event the Bidder refuses to provide the requested information or attend the bid evaluation meeting, the Owner may reject the bid as non-responsive.

**REMAINDER OF PAGE INTENTIONALLY LEFT BLANK**

**13 PROPOSED FEES**

All prices submitted are to be on the form below.

- A. Instructions: Please indicate the cost:
- B. Price shall include all labor, materials, equipment, permits and associated costs.
- C. Schedule of value and time schedule may be requested prior to award.

| DESCRIPTION  | Total Price                            |
|--|--|
| <p><b><u>Conversion of existing parking spaces to ADA Compliant Ramp/Parking Spaces:</u></b></p> <p>Parcel A: 2400 NW 22<sup>nd</sup> Street, Fort Lauderdale, Fl. 33311</p> | <p>\$ _____</p> <p><b>Lump Sum</b></p> |

**TOTAL**      \$ \_\_\_\_\_

By completing and submitting this form and all other documents within this bid submission, the undersigned proposer hereby certifies and understands that:

1. he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and that if BCHA discovers that any information entered herein to be false, such shall entitle BCHA to not consider or make award of to cancel any award with the undersigned party;
2. he/she is agreeing to abide by all terms and conditions pertaining to this solicitation document as issued by BCHA including an agreement to execute a contract form; and
3. he/she has the ability to sign and bind the firm or company to the services to be performed within the fees proposed.

|                 |  |
|-----------------|--|
| Signature       |  |
| Title           |  |
| Date Signed     |  |
| Printed Name    |  |
| Firm or Company |  |
| Telephone #     |  |

**Conversion of existing parking spaces to ADA Compliant Ramp/Parking/Parking Spaces Service:**

Service is desired **within 5 calendar days** following issuance of Permit. Failure to meet this service date may be deemed as non-responsive.

Please indicate service time after Permit: \_\_\_\_\_ calendar days.



# ATTACHMENT A

General Decision Number: FL170099 08/04/2017 FL99

Superseded General Decision Number: FL20160099

State: Florida

Construction Type: Residential

County: Broward County in Florida.

RESIDENTIAL CONSTRUCTION PROJECTS (consisting of single family homes and apartments up to and including 4 stories).

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.20 for calendar year 2017 applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.20 (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2017. The EO minimum wage rate will be adjusted annually. Additional information on contractor requirements and worker protections under the EO is available at [www.dol.gov/whd/govcontracts](http://www.dol.gov/whd/govcontracts).

| Modification Number | Publication Date |
|---------------------|------------------|
| 0                   | 01/06/2017       |
| 1                   | 07/14/2017       |
| 2                   | 08/04/2017       |

\* ELEC0728-002 03/01/2017

|                  | Rates    | Fringes |
|------------------|----------|---------|
| ELECTRICIAN..... | \$ 30.50 | 11.43   |

-----  
ENGI0487-012 07/01/2013

|  | Rates    | Fringes |
|--|----------|---------|
| OPERATOR: Backhoe.....   | \$ 28.32 | 8.80    |
| OPERATOR: Crane  |          |         |
| All Tower Cranes (Must have 2 operators) Mobile, Rail, Climbers, Static-Mount; All Cranes with Boom Length 150 Feet & Over (With or without jib) Friction, Hydro, Electric or Otherwise; Cranes 150 Tons & Over (Must have 2 |          |         |

# ATTACHMENT A

operators); Cranes with 3  
 Drums (When 3rd drum is  
 rigged for work); Gantry &  
 Overhead Cranes; Hydro  
 Cranes Over 25 Tons but  
 not more than 50 Tons  
 (Without  
 Oiler/Apprentice);  
 Hydro/Friction Cranes  
 without Oiler/Apprentices  
 when Approved by Union; &  
 All Type of Flying Cranes...\$ 29.05      8.80  
 Cranes with Boom Length  
 Less than 150 Feet (With  
 or without jib); Hydro  
 Cranes 25 Tons & Under, &  
 Over 50 Tons (With  
 Oiler/Apprentice).....\$ 28.32      8.80  
 OPERATOR: Oiler.....\$ 22.99      8.80

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 IRON0272-003 02/01/2017

Rates      Fringes

IRONWORKER, ORNAMENTAL,  
 REINFORCING AND STRUCTURAL.....\$ 24.51      9.48

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 LABO1652-002 06/01/2013

Rates      Fringes

LABORERS  
 Common or General.....\$ 14.50      4.92  
 Plaster Tender.....\$ 15.00      4.92

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 PAIN0365-005 08/01/2014

Rates      Fringes

PAINTER, Includes Brush,  
 Roller and Spray (Excludes  
 Drywall Finishing/Taping).....\$ 15.75      7.88

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 SFFL0821-003 07/01/2016

Rates      Fringes

SPRINKLER FITTER (Fire  
 Sprinklers).....\$ 27.38      15.37

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 SHEE0032-007 12/01/2013

Rates      Fringes

# ATTACHMENT A

SHEET METAL WORKER, Includes  
 HVAC Duct Installation  
 (Excludes Metal Roof  
 Installation).....\$ 23.50      12.18

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 SUFL2009-095 06/08/2009

Rates      Fringes

BRICKLAYER.....\$ 20.00      0.00

CARPENTER, Includes Cabinet  
 Installation (Excludes  
 Drywall Hanging).....\$ 21.17      0.86

CEMENT MASON/CONCRETE FINISHER...\$ 16.19      0.00

DRYWALL FINISHER/TAPER.....\$ 19.22      0.00

DRYWALL HANGER.....\$ 15.69      0.00

FENCE ERECTOR.....\$ 11.00      0.00

GLAZIER.....\$ 20.00      0.00

HVAC MECHANIC (Installation  
 of HVAC Unit Only, Excludes  
 Installation of HVAC Pipe and  
 Duct).....\$ 13.75      0.00

LABORER: Mason Tender - Brick...\$ 11.51      0.00

LABORER: Mason Tender -  
 Cement/Concrete.....\$ 10.46      0.00

LABORER: Pipelayer.....\$ 11.79      0.00

LABORER: Roof Tearoff.....\$ 9.00      0.00

LABORER: Landscape and  
 Irrigation.....\$ 9.15      0.00

OPERATOR: Asphalt Paver.....\$ 11.63      0.00

OPERATOR: Backhoe Loader  
 Combo.....\$ 17.04      0.00

OPERATOR: Bulldozer.....\$ 13.67      0.00

OPERATOR: Distributor.....\$ 11.41      0.00

OPERATOR: Excavator.....\$ 13.50      0.00

OPERATOR: Forklift.....\$ 17.50      0.00

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|   |          |      |
|---|----------|------|
| OPERATOR: Grader/Blade.....   | \$ 15.50 | 0.00 |
| OPERATOR: Loader.....   | \$ 16.48 | 0.00 |
| OPERATOR: Roller.....   | \$ 10.62 | 0.00 |
| OPERATOR: Screed.....   | \$ 10.93 | 0.00 |
| OPERATOR: Trackhoe.....   | \$ 15.68 | 0.00 |
| OPERATOR: Tractor.....  | \$ 10.20 | 0.00 |
| PLUMBER.....  | \$ 25.00 | 1.17 |
| ROOFER, Includes Built Up,<br>Modified Bitumen, and Shake &<br>Shingle Roofs (Excludes Metal<br>Roofs)..... | \$ 14.50 | 0.00 |
| ROOFER: Metal Roof.....   | \$ 16.99 | 0.00 |
| TILE SETTER.....  | \$ 16.65 | 0.00 |
| TRUCK DRIVER, Includes Dump<br>Truck.....   | \$ 10.22 | 0.00 |
| TRUCK DRIVER: Lowboy Truck.....   | \$ 12.10 | 0.00 |

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WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

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Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at [www.dol.gov/whd/govcontracts](http://www.dol.gov/whd/govcontracts).

Unlisted classifications needed for work not included within

# ATTACHMENT A

the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

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The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of "identifiers" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

## Union Rate Identifiers

A four letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than "SU" or "UAVG" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing this classification and rate.

## Survey Rate Identifiers

Classifications listed under the "SU" identifier indicate that no one rate prevailed for this classification in the survey and the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

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Survey wage rates are not updated and remain in effect until a new survey is conducted.

## Union Average Rate Identifiers

Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

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## WAGE DETERMINATION APPEALS PROCESS

1.) Has there been an initial decision in the matter? This can be:

- \* an existing published wage determination
- \* a survey underlying a wage determination
- \* a Wage and Hour Division letter setting forth a position on a wage determination matter
- \* a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations  
Wage and Hour Division  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an

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interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

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END OF GENERAL DECISION

**BROWARD COUNTY HOUSING AUTHORITY  
SOLICITATION NUMBER QR 17-257-R  
REQUEST FOR QUOTATION  
ADA COMPLIANT RAMP/PARKING SPACE FOR EVERGADES HEIGHT SERVICES**

|  |
|--|
| <b>PROFILE OF FIRM FORM – ATTACHMENT B</b> |
|--|

1. Proposer Information

|  |  |
|--|--|
| Name of Firm                                     |  |
| Address  |  |
| City, State, Zip                                 |  |
| Telephone  |  |
| Fax  |  |
| E-Mail Address                                   |  |
| Year Established                                 |  |
| Year Established in Florida                      |  |
| Former Names (if applicable)                     |  |
| Parent Company and Date Acquired (if applicable) |  |

2. Complete and attach IRS Form W-9, found at <http://www.irs.gov/pub/irs-pdf/fw9.pdf> . This completed form should be submitted with the proposal, or must be submitted within three (3) working days of the BCHA’s request.

3. Debarred Statement: Has the firm, or any principal(s) ever been debarred from providing any services to the federal government, any state government, or any local government agency?

Yes     No

If yes, please attach a full detailed explanation, including dates, circumstances and current status.

4. Disclosure Statement: Does this firm or any principal(s) have any current, past personal or professional relationship with any Commissioner or Officer of BCHA?

Yes     No

If yes, please attach a full detailed explanation, including dates, circumstances and current status.

5. This business is owned and operated by persons at least 51% of the following ethnic background:

Asian/Pacific  / Black  /Hasidic Jew  /Hispanic  /Native  Americans /White

6. This business qualifies as: Section 3 / Small Business / Woman Owned

7. Non-Collusive Affidavit: The undersigned party submitting this proposal hereby certifies that such proposal is genuine and not collusive and that said proposer entity has not colluded, conspired, connived or agreed, directly



or indirectly, with any proposer or person, to put in a sham proposal or to refrain from proposing, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the proposal fee of affiant or of any other proposer, to fix overhead, profit, or cost element of said proposal fee, or that of any other proposer or to secure any advantage against BCHA or any person interested in the proposed contract; and that all statements in said proposal are true.

Continue on next page.

6. Licensing and Insurance Information

|  |                              |
|--|------------------------------|
| Business License Jurisdiction, Number, and Expiration Date         |                              |
| Worker's Comp Carrier, Policy Number, and Expiration Date          |                              |
| General Liability Carrier, Policy Number, and Expiration Date      |                              |
| Professional Liability Carrier, Policy Number, and Expiration Date | <b>NOT APPLICABLE ( N/A)</b> |
| Vehicle Insurance Carrier, Policy Number, and Expiration Date      |                              |

7. Copies of license and insurance certificates should be submitted with the proposal, or must be submitted within three (3) working days of the BCHA's request.

8. Verification Statement: The undersigned proposer hereby states that by completing and submitting this form he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and agrees that if BCHA discovers that any information entered herein to be false, such shall entitle BCHA to not consider or make award of to cancel any award with the undersigned party.

|                 |  |
|-----------------|--|
| Signature       |  |
| Title           |  |
| Date Signed     |  |
| Printed Name    |  |
| Firm or Company |  |

**BROWARD COUNTY HOUSING AUTHORITY  
SOLICITATION NUMBER QR 17-257-R  
REQUEST FOR QUOTATION  
ADA COMPLIANT RAMP/PARKING SPACE FOR EVERGLADES HEIGHTS**

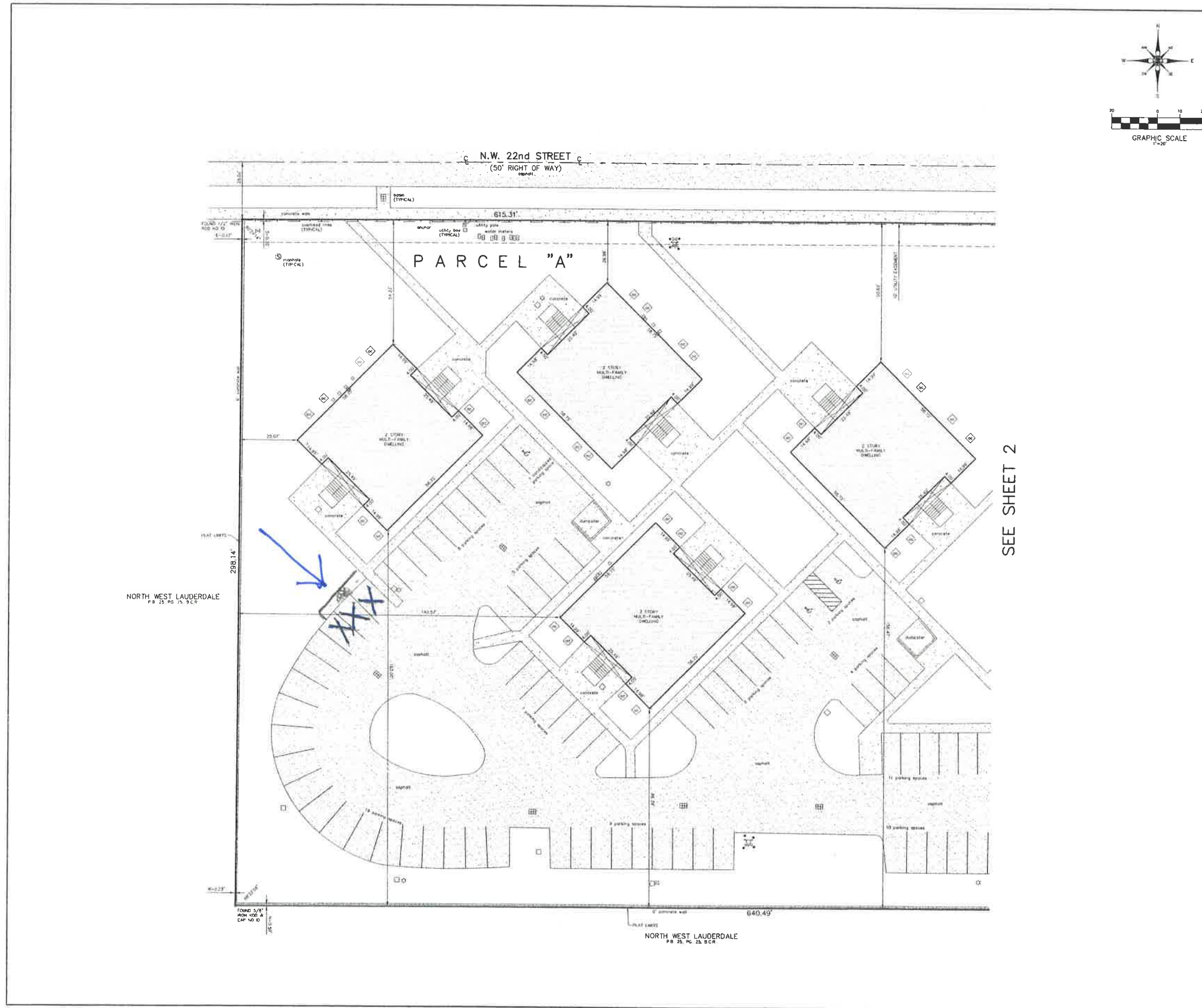
PROPOSED SERVICES – ATTACHMENT C

Instructions: Complete this form by indicating the appropriate response or by indicating “N/A” if not applicable. Attach additional sheets if necessary.

1. Describe the methodology, equipment, and supplies to be utilized to perform services as described in the Scope of Work section.

2. Describe the experience of the company and staff expected to be assigned to this contract.

ATTACHMENT D



SEE SHEET 2

**ACCURATE LAND SURVEYORS, INC.**  
L.B. #3635

1150 E. ATLANTIC BLVD.  
POMPANO BEACH, FLORIDA 33060  
TEL (954) 782-1441  
FAX (954) 782-1442

## BOUNDARY SURVEY

**LEGEND OF ABBREVIATIONS:**

|          |                                   |          |                             |
|----------|-----------------------------------|----------|-----------------------------|
| A        | = CENTRAL ANGLE                   | SO. FT.  | = SQUARE FEET               |
| A        | = ARC LENGTH                      | P.C.P.   | = PERMANENT CONTROL POINT   |
| CB       | = CHORD BEARING                   | P.B.C.R. | = PALM BEACH COUNTY RECORDS |
| R        | = RADIUS                          | P        | = PLAT                      |
| R.W.     | = RIGHT OF WAY                    | N&D      | = NAIL & DISC               |
| P.C.     | = POINT OF CURVATURE              | P.O.C.   | = POINT OF COMMENCEMENT     |
| P.T.     | = POINT OF TANGENCY               | P.O.B.   | = POINT OF BEGINNING        |
| WM       | = WATER METER                     | AC       | = AIR CONDITIONER           |
| OH       | = OVERHANG                        | FOUND.   | = FOUND                     |
| N        | = NORTH                           | CHATT.   | = CHATTAHOOCHEE             |
| S        | = SOUTH                           | F.P.L.   | = FLORIDA POWER & LIGHT     |
| E        | = EAST                            | N.T.S.   | = NOT TO SCALE              |
| W        | = WEST                            | B.C.R.   | = BROWARD COUNTY RECORDS    |
| CONC.    | = CONCRETE                        | D.C.R.   | = DADE COUNTY RECORDS       |
| D.B.     | = DEED BOOK                       | P.B.     | = PLAT BOOK                 |
| CLF      | = CHAIN LINK FENCE                | O.R.B.   | = OFFICIAL RECORDS BOOK     |
| BLVD.    | = BOULEVARD                       | F.F.     | = FINISHED FLOOR            |
| ENCH     | = ENCH                            | GARAGE   | = GARAGE                    |
| I.P.     | = IRON PIPE                       | CL       | = CENTERLINE                |
| I.R.     | = IRON ROD                        | MH       | = MANHOLE                   |
| P.R.M.   | = PERMANENT REFERENCE MONUMENT    | (M)      | = MEASURED                  |
| N.G.V.D. | = NATIONAL GEODEIC VERTICAL DATUM | LP       | = LIGHT POLE                |
| U.E.     | = UTILITY EASEMENT                | □        | = LIGHT                     |
| D.E.     | = DRAINAGE EASEMENT               | (B)      | = BOLLARD                   |
| A.E.     | = ANCHOR EASEMENT                 | (S)      | = BASIN                     |
| MAINT.   | = MAINTENANCE                     | (H)      | = HYDRANT                   |
| EASEM.   | = EASEMENT                        | (V)      | = VALVE                     |
| ELEV.    | = ELEVATION                       | (U)      | = UTILITY BOX               |
| B.M.     | = BENCHMARK                       | (M)      | = MANHOLE                   |

**STREET ADDRESS:**  
2400 NW 22nd Street Fort Lauderdale, Florida 33311

**LEGAL DESCRIPTION:**  
Parcel "A", BCHA-FL-79-7, according to the Plat thereof as recorded in Plat Book 120, Page 6, of the Public Records of Broward County, Florida.

**NOTES:**

- Unless otherwise noted field measurements are in agreement with record measurements.
- Bearings shown hereon are based on a bearing of N/A.
- The lands shown hereon were not abstracted for ownership, rights of way, easements, or other matters of records by Accurate Land Surveyors, Inc.
- Ownership of fences and walls if any are not determined.
- This survey is the property of Accurate Land Surveyors, Inc. and shall not be used or reproduced in whole or in part without written authorization.
- This survey is made for the exclusive use of the certified hereon, to be valid one year from the date of survey as shown hereon.
- This survey was made for mortgage and title purposes only and is not valid for design or construction purposes.

**EASEMENTS ACCORDING TO THE AFOREMENTIONED PLAT:**  
10' utility easement along the North and East boundary.

**ENCROACHMENTS ACCORDING TO THE AFOREMENTIONED PLAT:**  
Driveway, entry walk, fence and wall in 10' utility easement along the North boundary  
Asphalt and fence in 10' utility easement along the East boundary.

**FLOOD INFORMATION:**  
Community name and number: Unincorporated 125083  
Map and parcel number: 12011C0210F  
Index date: 10-02-97  
Panel date: 08-18-92  
Flood zone: "AH"  
Base flood elevation: 7'NGVD1929

**CERTIFY TO:**  
Broward County Housing Authority

DATE OF FIELD SURVEY: 08-06-14  
FIELD BOOK: ALS-SU-14-2418  
DRAWN BY: MLW  
CHECKED BY: MLW

| REVISIONS | DATE | BY |
|-----------|------|----|
|           |      |    |

**CERTIFICATION:**  
This is to certify that I have recently surveyed the property described in the foregoing title caption and have set or found monuments as indicated on this sketch and that said above ground survey and sketch are accurate and correct to the best of my knowledge and belief. I further certify that this survey meets Minimum Technical Standards under Rule 5A-17.002 adopted by the Florida Board of Land Surveyors, January 11, 2010.

**ROBERT L. THOMPSON (PRESIDENT)**  
 PROFESSIONAL SURVEYOR AND MAPPER NO. 3863 - STATE OF FLORIDA

SHEET 1 OF 2

SCALE 1"=20'

SKETCH NUMBER SU-14-2418



USE THE THREE SPACES SHOWN BELOW TO CONVERT INTO TWO ADA COMPLIANT PARKING SPACES





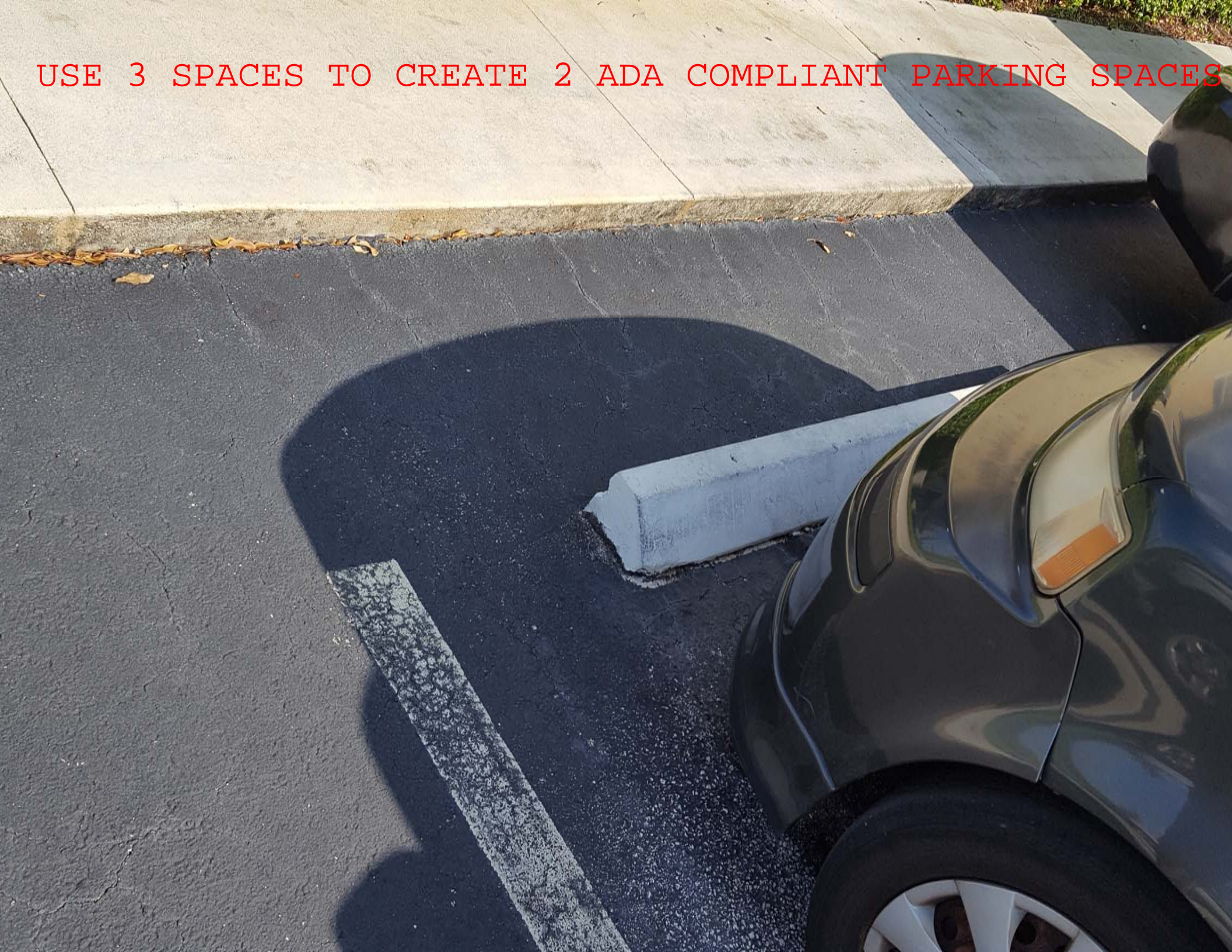
USE 3 SPACES TO CREATE 2 ADA COMPLIANT PARKING SPACES

ADA PARKING  
SPACES TO  
THE RIGHT  
OF THE ARROW --->





USE 3 SPACES TO CREATE 2 ADA COMPLIANT PARKING SPACES







EXISTING SIDEWALK 3 1/2"  
WILL NEED TO BE ADJUSTED TO  
RAMP OF CURRENT ADA STANDARD