



March 22, 2012

Re: Project No. JMH-ITB-12-10457-JA  
Campus Wide Fire Sprinkler Upgrade

Dear Sir or Madam:

The above-referenced contract is being considered for small business contract measures. If you are interested in participating as a CSBE to perform work in connection with this project and meet the requirements listed on Page 3 of this letter, please complete and return the attached Verification of Availability to bid **by Tuesday, March 27, 2012, at 1:00 P.M.** It is asked that **Pages 2 and 4 are returned completed in their entirety. Failure to complete Pages 2 and 4 will result in this Verification of Availability to Bid Letter not being considered.**

Please review the enclosed description of the project.

The letter of availability may be sent **via facsimile transmission to (305) 375-2343 or via email at kellyd@miamidade.gov.** If you have any questions, please contact me at (305) 375-3136.

Sincerely,

A handwritten signature in cursive script that reads "Kelly Duncombe". The signature is written in dark ink and is positioned above the typed name and title.

Kelly Duncombe  
Sustainability, Planning & Economic Enhancement Department (SPEED)  
Small Business Development Division

Please access the new Project Review Process at <http://www.miamidade.gov/sba/reports-pra-csbe.asp>

**VERIFICATION OF AVAILABILITY TO BID**

SUSTAINABILITY, PLANNING & ECONOMIC ENHANCEMENT DEPARTMENT (SPEED)  
 SMALL BUSINESS DEVELOPMENT DIVISION  
 COMMUNITY SMALL BUSINESS ENTERPRISE PROGRAM  
 111 N.W. 1ST STREET, 19<sup>th</sup> FLOOR  
 MIAMI, FLORIDA 33128  
 PHONE: 375-3111 FAX: 375-3160

PROGRAM COORDINATOR: **Kelly Duncombe**

I am herewith submitting this letter of verification of availability and capability to bid, provided the proposed scope of work attached. (**NOTE:** Please provide all the information requested; incomplete and/or incorrect verifications are not acceptable or usable.)

**CONTRACT TITLE:** **Campus Wide Fire Sprinkler Upgrade**

**PROJECT NUMBER:** **JMH-ITB-12-10457-JA**

**Estimated Contract Amount:** **\$1,500,000**

**(Scope of work and minimum requirements for this project is attached.)**

\_\_\_\_\_  
 NAME OF COMMUNITY SMALL BUSINESS ENTERPRISE (CSBE)

\_\_\_\_\_  
 ADDRESS CITY ZIP CODE

Certification Expires: \_\_\_\_\_  
 DATE

Telephone: \_\_\_\_\_ **\*\*\*Bonding Capacity:** \_\_\_\_\_

\_\_\_\_\_  
 PRINT NAME AND TITLE

\_\_\_\_\_  
 SIGNATURE OF COMPANY REPRESENTATIVE DATE

Currently Awarded Projects (Name of Project and Owner)	Project Completion Date	Contract Amount	Anticipated Awards

## **VERIFICATION OF AVAILABILITY TO BID**

To establish a contract that includes adding fire sprinkler heads and coverage to any areas required by code. This work is shown on FX sheets. This work also necessitates added fire sprinkler main lines, connections to risers, extensions of risers and other associated work. The scope of work includes adding fire sprinkler coverage in existing elevators. The work involving coordination with the facility and providing temporary partitions and separations as required for AHCA (Agency for Health Care Administration) approvals is shown on the M sheets (Infection Control Risk Assessment (ICRA) protection drawings). The scope of work also includes the replacement and/or restoration of finishes inclusive of floor, walls, ceilings, draft stops, fire safing and all other work to match existing conditions and, in some cases, to enhance existing conditions. Work to be done during non-patient hours (night work) is specified on the M sheets. Adding fire sprinkler coverage in the elevators will require updating and thus replacing breakers with new shunt trip breakers, new fire alarm devices and connecting the new devices to the existing fire alarm system as required. Also, the work includes the addition of flow and tampers switches and associated fire alarm work.

### **MINIMUM REQUIREMENTS:**

Bidders shall have a minimum of three (3) years experience on similar projects. (Similar projects to include working knowledge of complete fire sprinklers upgrade and certification to health care facilities to surrounding active patient care areas (ICRA), and familiar with current codes/requirements per authorities having jurisdiction (AHCA & City of Miami) and must provide evidence of three (3) successfully completed AHCA projects. Bidder must also provide evidence of two (2) successfully completed projects that demonstrate knowledge and experience of Class II or higher ICRA precautions in the past five (5) years. In addition, the bidder's proposed mechanical, electrical (conduit work and boxes for fire alarm, and several of the elevators need to be retrofitted with shunt trip breakers due to the installation of fire sprinklers), fire sprinkler/plumbing (specific to the fire sprinkler) subcontractors must have successfully completed a minimum of three (3) AHCA projects in the past five (5) years. Electrical subcontractor must show evidence of having worked on at least one PHT project on a project involving fire alarm with the PHT's fire alarm vendor as a subcontractor. Bidders must provide this information with the bid response. The bidder will be notified in writing and given the opportunity to submit the required information within five (5) calendar days. Should the bidder fail to submit the required information within the stated timeframe, his/her bid may be considered non-responsive and ineligible for consideration.

Bidder shall provide at a minimum, project description, location, point of contact, value, project duration (estimated and actual) and status/outcome of the above mentioned projects. The outcome of those projects shall be substantiated with supportive references from the respective clients. Include client name and contact information.

Have the capability to provide a performance and payment bond for the project. JHS reserves the right to require performance and payment bonds from the successful bidder. Have the financial capacity to undertake a project of this magnitude. JHS reserves the right to require current financial and financial institution information from the bidder prior to contract award.

Does your company have at least three (3) years experience on similar projects (fire sprinklers upgrade and certification to Healthcare Facilities to surrounding active patient care areas (ICRA), and familiar with current codes/requirements per authorities having jurisdiction (AHCA and City of Miami)?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

**Please list all AHCA projects completed.**

Name of Project Completed With AHCA/IRCA Review/Requirements	Value of Project	Project Completion Date	Anticipated Awards

**Please list all projects which were completed in the last five (5) years which required Class III or higher ICRA precautions.**

Name of Projects Completed With IRCA Review/Requirements	Value of Project	Project Completion Date	Anticipated Awards

**Please list all Public Health Trust (PHT) projects completed in the last five (5) years.**

Name of Project Completed With AHCA/IRCA Review/Requirements	Value of Project	Project Completion Date	Anticipated Awards

\_\_\_\_\_  
 NAME OF COMMUNITY SMALL BUSINESS ENTERPRISE (CSBE)

\_\_\_\_\_  
 PRINT NAME AND TITLE

\_\_\_\_\_  
 SIGNATURE OF COMPANY REPRESENTATIVE