



October 16, 2014

Re: RPQ P0154 One Year Countywide Contract for Rehabilitation of Manholes inflow and Infiltration Repair for PSIP Projects

The above-referenced contract is being considered for small business contract measures. **PLEASE NOTE THAT YOUR PARTICIPATION IN THE AVAILABILITY TO BID PROCESS IS VITAL IN ORDER FOR MEASURES/GOALS TO BE PLACED ON THIS PROJECT.** If you are interested in participating as a CSBE to perform work in connection with this project and meet the requirements listed in this letter, please complete and return the attached Verification of Availability to Bid **by Tuesday October 21, 2014, at 1:00 P.M.** It is asked that **all pages are returned completed in its entirety. Failure to do so 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) 375-3160 or via email to coralee@miamidade.gov.** If you have any questions, please contact me at (305) 375-3115.

Sincerely,

Coralee Taylor
Internal Services Department
Small Business Development Division
111 NW 1st Street, 19 fl
Miami, FL 33128
☐ (305) 375-3115 | ☐ (305) 375-3160
coralee@miamidade.gov

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VERIFICATION OF AVAILABILITY TO BID

INTERNAL SERVICES DEPARTMENT (ISD)
SMALL BUSINESS DEVELOPMENT (SBD) DIVISION
COMMUNITY SMALL BUSINESS ENTERPRISE PROGRAM
111 N.W. 1ST STREET, 19th FLOOR
MIAMI, FLORIDA 33128
PHONE: 375-3111 FAX: 375-3160

PROGRAM COORDINATOR: Coralee Taylor

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: One Year Countywide Contract for Rehabilitation of Manholes inflow and Infiltration Repair for PSIP Projects

PROJECT NUMBER: RPQ P0154

Estimated Contract Amount: \$919,367.00

(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

CONTRACT TITLE: One Year Countywide Contract for Rehabilitation of Manholes inflow and Infiltration Repair for PSIP Projects

PROJECT NUMBER: RPQ P0154

ESTIMATED AMOUNT: \$919,367.00

PROJECT DESCRIPTION

The Project consists of furnishing all labor, material and equipment for rehabilitation of approximately 415 manholes anywhere within the limits of Miami-Dade County, Florida, as ordered by the Department during a one year period. This is a non-exclusive contract, and as such, the Department does not guarantee that the full amount of the Contract will be issued to the Contractor. The actual amount of Work Orders assigned will be the prerogative of the Department in its sole discretion and dependent only upon its needs.

The project shall include, but not be limited to, cleaning of the manhole structures; surface preparation; concrete repair and restoration; furnishing and installing concrete protective coating; sealing exterior voids of leaks with a chemical grout; cleaning and restoring exposed reinforcing; rehabilitation of the manhole bench and flow channels; furnishing and installing plugs, thru plugs and thru pipe as required; bypass pumping of sewage, if necessary; traffic control; legal disposal of debris; furnishing and utilizing all required safety equipment; and all other appurtenant and miscellaneous related items and work necessary for a completed project at various locations throughout Miami-Dade County. The Miami Dade County Ordinance No.90-143 is applicable to this Project. The Contractor shall review the "Supplemental General Conditions" and the "Wage and Benefit Schedule" that are included within these documents. This project is work order driven and each work order will take about 20 to 30 days to complete.

Qualifications

The Contractor shall have completed **a minimum of (15) fifteen manhole rehabilitations or similar structures within the past 10 years.** Two verifiable references are required with Project Name, Organization Name, Contact Person, Phone Number, Date of Work and Work Performed. Submit experience history with a minimum of two references along with the bid. The work shall have been completed with the Contractor's own forces or key personnel.

The experience of key senior personnel with other firms may be counted toward the experience requirement, if acceptable to the Engineer. Should such evidence not be satisfactory to the Engineer, whose decision shall be final, the bid will be considered non-responsive, and the second low bidder will be considered for award. In the event a firm consists of executives, supervisors and other senior field staff (key employees) that would have met these minimum experience requirements with a prior firm, the Miami-Dade Water and Sewer Department reserves the right to qualify the firm based on WASD's sole determination and evaluation of the knowledge and prior experience of these key employees employed by the new firm.

There is an approved product list of products that can be used in the WASD system. The project requires a Contractor experienced with rehabilitation of sewer manholes and has the coating manufacturer's product application certification.

License Requirements:

Primary Trades for this project are General Engineering, Pipeline Engineering, Pipe Line Contractor and Underground Utility / Excavation.

Contractor Qualifications Questionnaire

This questionnaire will assist SBD in identifying the qualified contractors that “comply” to perform the aforementioned scope of work. Indicate yes “Y” or no “N” on the empty line on the left side of this questionnaire and forward it completely filled out to this e-mail address: coralee@miamidade.gov or via fax (305) 375-3160 attention Mrs. Coralee Taylor.

_____ Proposer (PRIME) meets the licensing, experience, as well as other requirements as outlined above and is interested in this solicitation.

_____ Proposer (PRIME) DOES NOT meet the requirements as outlined above

_____ I will not be interested in this project because:

Similar contracts (Name of Project and Owner)	Project Completion Date	Contract Amount	Project Contact Person & Telephone for Verification

I certify that to the best of my knowledge all the information provided is verifiable and correct.

COMPANY NAME: _____

NAME OF REPRESENTATIVE: _____

TITLE: _____ SIGNATURE: _____

TELEPHONE NUMBER: _____ E-Mail Address: _____