



December 23, 2013

Re: Project No. ITB 13-11571-JE
Park Plaza West Garages Mixed Retail Phase 2

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 in this letter, please complete and return the attached Verification of Availability to bid **by Friday, December 27, 2013, at 1:00 P.M.** It is asked that all pages are returned completed in their entirety. Failure to complete 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 at laurie@miamidade.gov.** If you have any questions, please contact me at (305) 375-3121.

Sincerely,

Laurie Johnson, Section Supervisor
Internal Services Department
Small Business Development (SBD) Division

Please access the new Project Review Process at <http://www.miamidade.gov/business/contracting-opportunities.asp>

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: **Laurie Johnson**

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: Park Plaza West Garages Mixed Retail Phase 2

PROJECT NUMBER: ITB 13-11571-JE

Estimated Contract Amount: \$1,394,073.75

(Scope of work and minimum requirements for this project are 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: Park Plaza West Garage Mixed Retail Phase 2

PROJECT NUMBER: ITB 13-11571-JE

PROJECT DESCRIPTION

Renovation of an existing open-air corridor. This renovation includes new finishes, new specialty metal ceiling, new specialty flooring and new lighting throughout the existing corridor. The corridor also includes the renovation of public bathrooms, as well as new impact resistant roll-down doors at the north entrance of the Lobby at Park Plaza West corridor.

PROJECT CRITERIA:

SPECIAL REQUIREMENTS: General Contractor shall have experience of successfully completing a minimum of two (2) projects with similar (in size and scope as this project) of retail mixed-use development projects, experience of successfully completing a minimum of one (1) project within the last five (5) years, a Retail development project of approximately 10,000 square feet. Contractor shall also have knowledge, experience, and familiarity with current codes and requirements of authorities having jurisdiction; Agency for Health Care Administration (AHCA) & City of Miami, and knowledge and experience of construction phasing and re-routing access path due to high traffic areas.

Contractor Qualifications Questionnaire

This questionnaire will assist the SBD to identify 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: laurie@miamidade.gov or via fax (305) 375-3160 attention Mrs. Laurie Johnson.

_____ Proposer has knowledge, experience and familiarity with current codes and requirements of authorities having jurisdiction: Agency for health Care Administration (AHCA) & City of Miami, knowledge and experience of construction phasing and re-rouring access path due to high traffic.

_____ Proposer must have completed no less than two (2) projects with similar (in size and scope as this project) of retail mixed use facility project

Retail development projects of approx. 10,000 square feet. completed (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: _____