



August 16, 2021

Project No: A21-PROS-03, Professional Services for the Larry and Penny Thompson Memorial Park Renovation

The above-referenced contract is being considered for small business contract measures. **PLEASE NOTE THAT YOUR PARTICIPATION IN THE AVAILABILITY TO PROPOSE PROCESS IS VITAL IN ORDER FOR A SMALL BUSINESS MEASURE TO BE PLACED ON THIS PROJECT.** If you are interested in participating as a **SBE-A&E Sub-Consultant** to perform services in connection with this project. Please complete and return the attached Verification of Availability letter by **5:00 PM, Wednesday, AUGUST 18, 2021.**

The letter of availability may be sent **via email to jescalante@miamidade.gov**. If you have any questions, please contact me at (305) 375-3192.

Sincerely,

Jhonnatan Escalante
Capital Improvement Project Analyst
Miami-Dade County Internal Services Department
Small Business Development Division
111 NW 1st Street #19 Floor, Miami, FL 33128
☎Office: (305) 375-3192 | 📠Fax: (305) 375-3160
Email: jescalante@miamidade.gov

How can ISD serve you better?
Give us your feedback [here!](#)
Connect With Us on [Twitter](#) | [Facebook](#) | [Instagram](#)

Please familiarize yourself with SBD's Website: <http://www.miamidade.gov/smallbusiness/>

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 ANALYST: **Jhonnatan Escalante**

I am herewith submitting this letter of verification of availability and capability to propose at such time as this project is advertised. (NOTE: Please provide all the information requested; incomplete and/or incorrect verifications are not acceptable or usable.)

CONTRACT TITLE AND NUMBER: Professional Services for the Larry and Penny Thompson Memorial Park Renovation

A21-PROS-03

CONTRACT ESTIMATED AMOUNT: \$2,125,000.00

*****CHECK BELOW IF YOU ARE RESPONDING AS A SUB-CONSULTANT*****

SUB-CONSULTANT certified in:

- TC 5.01 (Port and Waterways Systems – Engineering Design)** - _____
- TC 8.00 (Telecommunications Systems)** - _____
- TC 11.00 (Structural Engineering)** - _____
- TC 16.00 (Civil Engineering)** - _____
- TC 17.00 (Engineering Construction Management)** - _____
- TC 20.00 (Landscape Architecture)** - _____

NAME OF SMALL BUSINESS ENTERPRISE - A & E FIRM

CERTIFICATION EXP. DATE

ADDRESS

CITY

ZIP CODE

Telephone: (___ ___) ___ ___ - ___ ___

PRINT NAME AND TITLE

SIGNATURE OF COMPANY REPRESENTATIVE

DATE

DESCRIPTION OF PROJECT

Project Title: Professional Services for the Larry and Penny Thompson Memorial Park Renovation
Project Number: A21-PROS-03
Department: Parks, Recreation and Open Spaces Department
Estimated Cost: \$2,125,000.00

TECHNICAL CERTIFICATION CATEGORIES

TYPE	CODE	DESCRIPTION	Percentage
PRIME	14.00	Architecture	22.00%
PRIME	18.00	Architectural Project Management	12.00%
TYPE	CODE		
Sub	5.01	Engineering Design	8.00%
Sub	8.00	Telecommunications Systems	2.00%
Sub	11.00	Structural Engineering	7.00%
Sub	12.00	Mechanical Engineer	6.00%
Sub	13.00	Electrical Engineer	6.00%
Sub	15.01	Land Surveying	5.00%
Sub	15.03	Underground Utility Location	3.00%
Sub	16.00	Civil Engineer	13.00%
Sub	17.00	Engineering Construction Management	10.00%
Sub	20.00	Landscape Architecture	6.00%
		Total	100.00%

Scope of Services:

Miami-Dade County Parks, Recreation and Open Spaces Department (PROS) seek an architectural design service professional for full design services of the Larry and Penny Thompson Memorial Park Lakeside Concession Renovation. The renovation of the facility including the refurbishment of the lake side concession stand facility and renovations of the lakeside grounds including but not limited to Restrooms Interior, Concession Building Interior, Patio Area (under roof), Grounds Lakeside, Grounds Entrance and Accessory Amenities (storage areas).

The presence of bats roosting in the building at the lake side area must be confirmed immediately prior to the beginning of construction, which should be outside of the maternity season for all bat species. If bats are present, a qualified contractor must be hired to perform an exclusion. The official dates when exclusions are prohibited are between April 16 through August 14, according to regulation by the Florida Fish and Wildlife Conservation Commission (FWC). However, the Federally Endangered Bonneted Bat may have a maternity season that could begin or end outside of this window depending on the temperature and other weather/environmental factors. Therefore, it is critical that surveys are conducted immediately prior to any work commencement on the building roof or associated structures where bats might be roosting.

The selected consultant will report directly to PROS's Project Manager.

Consultant Qualifications Questionnaire

This questionnaire will assist SBD in identifying the qualified consultants that “comply” to perform the aforementioned scope of service(s). 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: jescalante@miamidade.gov or via fax (305) 375-3160 attention Jhonnatan Escalante.

_____ Proposer (Sub-Consultant) is certified in one of the following TCs: 5.01, 8.00, 11.00, 16.00, 17.00 or 20.00.

_____ Proposer (Sub-Consultant) is willing to participate in this project as sub-consultant and has previous experience as sub-consultant performing one of the TCs above.
(Please list previous experience below)

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: _____

SIMILAR PROJECTS AS PRIME OR SUB-CONTRACTOR

Please list your firm's history of "Projects with Similar Scopes of Services":

Project Title: _____
Client Name: _____
Contact #: (____) _____ - _____ / _____
Contract Amount: \$ _____
Scope of Service(s):

Project Title: _____
Client Name: _____
Contact #: (____) _____ - _____ / _____
Contract Amount: \$ _____
Scope of Service(s):

Project Title: _____
Client Name: _____
Contact #: (____) _____ - _____ / _____
Contract Amount: \$ _____
Scope of Service(s):

REASONS & COMMENTS

