



July 22, 2015

Project No: **E15-WASD-13 Geotechnical Services, Special Inspections, Structural Assessments, Soils, Foundations and Materials Testing Services related to the Improvement, Upgrades and Expansions of Water and Wastewater Treatment Plants, Pump Stations, Collection, Distribution and Transmission Piping, and all related Facilities as necessary to ensure Quality Control/Assurance for Water and Sewer Department's Capital Improvement Projects**

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 Prime** (certified in **Technical Categories 9.01, 9.02 & 9.03**) or **SBE-A&E Sub-Consultant** (certified in **Technical Categories 9.01, 9.02, 9.03, 9.04, 9.05, 9.06, 10.02, 10.05, 10.06 &/or 10.07**) to perform services in connection with this project. Please complete and return the attached Verification of Availability letter by **2:00PM, MONDAY, JULY 27, 2015.**

The letter of availability may be sent **via email to [twj@miamidade.gov](mailto:twj@miamidade.gov)** or **facsimile transmission to (305) 375-3160**. If you have any questions, please contact me at (305) 375-3123.

Sincerely,

**Tyrone White**

Contract Certification Specialist  
Small Business Development Division  
Miami-Dade County Internal Services Department  
Phone: (305) 375-3123  
Fax: (305) 375-3160  
Email: [twj@miamidade.gov](mailto:twj@miamidade.gov)



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

**VERIFICATION OF AVAILABILITY**

INTERNAL SERVICES DEPARTMENT (ISD)  
SMALL BUSINESS DEVELOPMENT (SBD) 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

**CONTRACT SPECIALIST: Tyrone White**

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: Geotechnical Services, Special Inspections, Structural Assessments, Soils, Foundations and Materials Testing Services related to the Improvement, Upgrades and Expansions of Water and Wastewater Treatment Plants, Pump Stations, Collection, Distribution and Transmission Piping, and all related Facilities as necessary to ensure Quality Control/Assurance for Water and Sewer Department's Capital Improvement Projects

E15-WASD-13

CONTRACT ESTIMATED AMOUNT: 3 contracts, \$10,000,000.00 each

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

**PRIME – Must be certified in 6.01, 6.02, & 6.03**

**(Check If Your Firm Is Certified In All 3 TC's) - \_\_\_\_\_**

**SUB-CONSULTANTS – (Check Each Applicable Category)**

**6.01**\_\_\_\_ **6.02**\_\_\_\_ **6.03**\_\_\_\_ **6.04**\_\_\_\_ **9.05**\_\_\_\_  
**9.06**\_\_\_\_ **10.02**\_\_\_\_ **10.05**\_\_\_\_ **10.06**\_\_\_\_ **10.07**\_\_\_\_

\_\_\_\_\_  
NAME OF SMALL BUSINESS ENTERPRISE - A & E FIRM                      CERTIFICATION EXPIRATION DATE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
ZIP CODE

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Bonding Capacity: N/A

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

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

\_\_\_\_\_  
DATE

## DESCRIPTION OF PROJECT

**Project Title:** Geotechnical Services, Special Inspections, Structural Assessments, Soils, Foundations and Materials Testing Services related to the Improvement, Upgrades and Expansions of Water and Wastewater Treatment Plants, Pump Stations, Collection, Distribution and Transmission Piping, and all related Facilities as necessary to ensure Quality Control/Assurance for Water and Sewer Department's Capital Improvement Projects

**Project Number:** E15-WASD-13

**Department:** Miami-Dade Water & Sewer Dept.

**Estimated Cost:** \$3 contracts, \$10,000,000.00 each

### Technical Categories:

<b>Technical Category (TC)</b>	<b>Description</b>	<b>TC Percentage</b>
<b>9.01 Prime</b>	<b>Soils, Foundations and Materials Testing-Drilling, Subsurface Investigations and Seismographic Services</b>	45%
<b>9.02 Prime</b>	<b>Soils, Foundations and Materials Testing-Geotechnical and Materials Engineering Services</b>	20%
<b>9.03 Prime</b>	<b>Soils, Foundations and Materials Testing-Concrete and Asphalt Testing Services</b>	14%
9.04 Other	Soils, Foundations and Materials Testing-Non-destructive Testing and inspections	2%
9.05 Other	Soils, Foundations and Materials Testing-Roof Testing and Consulting	3%
9.06 Other	Soils, Foundations and Materials Testing- Material Testing/Consulting/Training	5%
10.02 Other	Environmental Engineering-Geology Services	6%
10.05 Other	Environmental Engineering-Contamination Assessment and Monitoring	1%
10.06 Other	Environmental Engineering-Remedial Action Plan Design	2%
10.07 Other	Environmental Engineering-Remedial Action Plan/Implementation/Operation/Maintenance	2%
	<b>TOTAL</b>	<b>100%</b>

### SCOPE OF SERVICES

Miami-Dade County has the need to establish Professional Services Agreements (PSA) to provide soils, foundations, geotechnical and materials testing services plus special structural integrity assessments, threshold building inspections, and other special inspections as necessary for the new facilities, refurbishments, design and construction of all projects included in the CIP schedule. The work will be assigned as required by WASD for each of the selected firms available within the agreements.

WASD intends to retain three (3) qualified firms under three (3) separate Non-Exclusive PSA. The proposals received for this project will be reviewed and ranked by the Competitive Selection Committee (CSC) members. The three (3) highest ranked responsive and responsible firms will be selected and forwarded to the County Mayor for negotiations and award. The term of the contract is for a ten (10) year period.

Maximum compensation for each PSA is \$10,000,000, plus contingency in accordance with Ordinance 00-65.

No minimum amount of work or compensation will be assured to the retained consultant. The County reserves the right to re-use the work products of the retained consultant and to retain other consultants to provide the same or similar services at its sole discretion.

**Is your firm able to satisfy the contract's scopes of service(s)?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Does your firm have experience satisfying similar scopes of service(s)?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(If yes, please list prior experience on the next page)**

**Prime Minimum Requirements**

The Prime consultant submitting for this solicitation shall be a full service geotechnical/materials testing engineering firm experienced in similar facilities. Qualified firms shall have proven successful experience with quality assurance/ quality control, testing and inspection work, condition evaluation and special structural assessments, threshold building inspections, special inspections and with proven history of performance. The successful experience on the above items shall be demonstrated prior to the date of this solicitation. The Prime consultant shall provide a list of members of the proposed team, identifying the project/contract Manager, and the team leaders for key specialties.

The Prime consultant shall provide descriptions of at least one (1) successfully completed project(s) where similar services of each listed technical categories were provided prior to the date of this solicitation. The descriptions shall include the client (i.e., municipality or agency), key project staff, the project name, a summary of the work performed, the contract amount, the schedule (to include start and completion dates), the specific role of the Prime firm, the achievements (e.g., projects delivered on schedule, dollars saved, new technologies utilized), and a client reference and contact information. Also the Prime also must have a Construction Materials Engineering Council Certification for a laboratory that is located in Miami-Dade County.

**Is your firm certified in 9.01, 9.02, & 9.03?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Is your firm able to meet the requirements of the Prime?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Sub-consultant Minimum Requirements**

The Sub-consultants shall also provide a description of at least one (1) project(s) that is relevant to the scope of work that they will be performing under this PSA. The descriptions shall include the client (i.e., municipality or agency), key project staff, a summary of the work performed, the contract amount, the schedule (to include start and completion dates) the specific role of the Sub-consultant firm, the project's achievements, and client reference and contact information.

**Is your firm able to meet the requirements of the Sub?**

Yes \_\_\_\_\_ No \_\_\_\_\_

## Sub-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: [twj@miamidade.gov](mailto:twj@miamidade.gov) or via fax (305) 375-3160 attention Mr. Tyrone White.

\_\_\_\_\_ Proposer (PRIME) has experience completing projects with a similar size and scope as this project, meets the requirements to qualify and can perform the services as required.

\_\_\_\_\_ Sub-consultant (SUB) has experience completing projects of similar size and scope, and can perform the service(s) as required.

\_\_\_\_\_ Proposer/Subcontractor (Proposer/SUB) DOES NOT have experience completing projects with similar size and scope as this project and DOES NOT meet the requirements as indicated in the contract.

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: \_\_\_\_\_

**PLEASE LIST YOUR FIRMS HISTORY OF SIMILAR PROJECTS, REASON(S) WHY YOUR FIRM DOES NOT MEET THE EXPERIENCE REQUIREMENTS (IF APPLICABLE) AND ANY COMMENTS YOU MAY HAVE ON THE NEXT PAGE**

# SIMILAR PROJECTS AS PRIME OR SUB-CONTRACTOR

Please submit your firm's resume or list your firm's history of "Projects with Similar Scopes of Services" below:

Project Title: \_\_\_\_\_

Client Name: \_\_\_\_\_

Contact #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ / \_\_\_\_\_

Contract Amount: \$ \_\_\_\_\_

Scope of Service(s):

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Project Title: \_\_\_\_\_

Client Name: \_\_\_\_\_

Contact #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ / \_\_\_\_\_

Contract Amount: \$ \_\_\_\_\_

Scope of Service(s):

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Project Title: \_\_\_\_\_

Client Name: \_\_\_\_\_

Contact #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ / \_\_\_\_\_

Contract Amount: \$ \_\_\_\_\_

Scope of Service(s):

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## REASONS & COMMENTS

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