

October 18, 2022

Project No: RPQ No. TP-0000008807 – Metrorail Public Address System Replacement

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 TO BE PLACED ON THIS PROJECT. If you are interested in participating as a Small Business Enterprise – Construction (SBE-CON) firm 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 12:00 PM, FRIDAY, OCTOBER 21, 2022.

The letter of availability may be sent via facsimile transmission to (305) 375-3160 or 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

Email: jescalante@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: Jhonnatan Escalante

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	e not acceptable or	usabie.)	
CONTRACT TITLE:	•		
PROJECT NUMBER:			
Estimated Contract Amount:	\$2,485,000.00		
(Scope of work and minimum	requirements for	this project is at	tached.)
NAME OF SMALL BUSINESS	S ENTERPRISE CO	ONSTRUCTION	FIRM (SBE/CONS)
ADDRESS	CITY		ZIP CODE
Certification Expires:DATE			
Telephone:	***Bonding Ca	pacity:	
PRINT NAME AND TI	TLE		
SIGNATURE OF COMPAN	Y REPRESENTAT	ΓIVE	DATE
Currently Awarded Project (Name of Project and Owne	•	Contract Amount	Anticipated Awards

VERIFICATION OF AVAILABILITY TO BID

CONTRACT TITLE: Metrorail Public Address System Replacement

PROJECT NUMBERS: RPQ No. TP-0000008807

ESTIMATED CONTRACT AMOUNT: \$2,485,000.00

PROJECT DESCRIPTION:

The scope of the work for this project includes but is not limited to:

Replace and improve Public Address Systems on the Metrorail System.

The Public Address System shall be an integrated with an existing Station Controller Unit (SCU) in each of the Metrorail Stations.

All components on the Public Address System shall reside on the Metrorail SCADA Network and be IP Network addressable and remotely configurable over the SCADA Network. All monitoring and reporting shall also occur over the SCADA Ethernet Network.

Required Contractor's Certification:

- 1. At the time of Bid and pursuant to the requirements of Section 10-3 of the Code of Miami-Dade County, Florida and these Solicitation and Contract Documents, the Bidder must hold a valid, current, and active:
 - a. Certificate of Competency from the County's Construction Trades Qualifying Board as an Electrical Contractor or a General Engineering Contractor, or;
 - b. Certification, as an electrical contractor provided by the State of Florida Electrical Contractors" Licensing Board, pursuant to the provisions of Section 489.511 of the Florida Statutes (F.S.), or:
- 2. Pursuant to Section 255.20, F.S. and in lieu of the above, the County may consider a bid from a Bidder that is a duly licensed Contractor in good standing that has been prequalified and considered eligible by the Florida Department of Transportation (FDOT) under Section 337.14, F.S. and Chapter 14-2, Florida Administrative Code, to perform the work described in the Contract Documents. Contractors seeking consideration under this Paragraph shall submit along with the Bid Documents for review and consideration, current copy(ies) of their FDOT Certificate(s) of Qualification, Certification of Work Underway, and Status of Contract(s) On Hand. Acceptable FDOT prequalification(s) necessary to perform the Work specified in the Contract Documents include the Electrical Work Class.

Experience Requirement:

The Bidder must demonstrate that it has full-time personnel with the necessary experience performing railroad maintenance services. In addition, it must have verifiable experience with high voltage and low voltage work. Demonstrate the experience requirement by:

Providing a detailed description of at least three (3) projects similar in detail to the Project's Scope of Work described in these Solicitation Documents and in which the Bidder is currently engaged or has completed within the past ten years. List and describe the aforementioned projects and state whether the work was performed for the County, other government clients, or similar size private entities.

Contractor Qualifications Questionnaire

This questionnaire will assist SBD in identifying the qualified vendors that "comply" to provide 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: jescalante@miamidade.gov or via fax (305) 375-3160 attention Jhonnatan Escalante.

Proposer (PRIME) ca Required.	n perform the Scope of Work outlined and have the license
,	eets the experience requirements listed: at least three (3) projects in the past ten (10) years
Proposer (PRIME) ha	s enough bonding capacity for this project
I certify that to the best of m	y 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 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**