

# ISSUING DEPARTMENT INPUT DOCUMENT

## CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION

New   
  OTR   
  Sole Source   
  Bid Waiver   
  Emergency   
 Previous Contract/Project No. RTQ-00646

Contract   
  Re-Bid   
  Other – Access of Other Entity Contract   
 LIVING WAGE APPLIES:  YES  NO

Requisition No./Project No.: EVN0000224   
 TERM OF CONTRACT 5 YEAR(S) WITH 0 YEAR(S) OTR

Requisition /Project Title: Liquid Level Control Systems, Parts, Repairs and Installation

Description: This Request to Qualify (RTQ) will establish a Prequalified Pool of Suppliers/Vendors (Pool) that will be used to solicit liquid level control systems, parts, repairs and installation services for Miami-Dade County.

Issuing Department: SPD   
 Contact Person: Sherry Y. Crockett   
 Phone: 305.375.4693

Estimate Cost: \$1,625,000

Funding Source: Proprietary Funds

### ANALYSIS

<b>Category:</b>	<u>89066</u>				
Contract/Project History of previous purchases three (3) years Check here <input type="checkbox"/> if this is a new contract/purchase with no previous history.					
	<b><u>EXISTING</u></b>	<b><u>2<sup>ND</sup> YEAR</u></b>	<b><u>3<sup>RD</sup> YEAR</u></b>		
<b>Contractor:</b>	<u>Multiple Vendors</u>				
<b>Small Business Enterprise:</b>					
<b>Contract Value:</b>	<u>\$1,000,000</u>				
<b>Comments:</b>	<u></u>				

Continued on another page (s):     YES     NO

### RECOMMENDATIONS

	Set-Aside	Subcontractor Goal	Bid Preference	Selection Factor
<b>SBE</b>	<u></u>	<u></u>	<u></u>	<u></u>

**Basis of Recommendation:**

<b>Signed:</b> <u>Sherry Y. Crockett</u>	Date sent to SBD: <u>March 1, 2023</u>
	Date returned to SPD: <u></u>

**SECTION 2**  
**ADDITIONAL/SPECIAL TERMS AND CONDITIONS**

**2.1 PURPOSE**

This Request to Qualify (RTQ) will establish a Prequalified Pool of Suppliers/Vendors (Pool) that will be used to solicit liquid level control systems, parts, repairs and installation services for Miami-Dade County (County). Placement in the Pool is **not** a contract between the County and the Supplier/Vendor, but an acknowledgement that the Supplier/Vendor meets the qualifications as outlined throughout this RTQ. Supplier Vendor Submittals are accepted throughout the term of the RTQ for placement in such Pool.

**2.2 DEFINITIONS**

**Invitation to Quote (ITQ)** – Shall refer to the solicitation of quotes from the Pool for specific goods and/or services; and awarded based on lowest price, or other quantifiable criteria.

**Prequalified Pool of Suppliers/Vendors (Pool)** – Shall refer to business entities/individuals determined by the County's Strategic Procurement Department, as meeting the minimum standards of business competence, financial ability, and/or product quality for placement in the Pool, and which may submit quote or proposal, at the time of need.

**Submittal** – Shall refer to all information, attachments and forms submitted in response to this RTQ.

**Supplier/Vendor** – Shall refer to a business entity/individual responding to this RTQ.

**Work Order Proposal Request (WOPR)** – shall refer to a competitive process involving the solicitation of proposals, by the Strategic Procurement Department, from the Pool for specific goods and/or services; and evaluated and awarded based on best value.

**2.3 TERM**

The Pool shall be established on the first calendar day of the month succeeding approval by the Board of County Commissioners, or designee, unless otherwise stipulated in the Purchase Order issued by the County. The Pool shall expire on the last day of the last month of the five-year term.

**2.4 QUALIFICATION CRITERIA**

Supplier/Vendor shall meet the following criteria to be considered for placement in the Pool and for participation in future solicitations:

**Group A: Purchase of New Systems, Installation Services, Parts and Accessories**

1. Supplier/Vendor shall be the Original Equipment Manufacturer, agent, distributor or reseller of the Original Equipment Manufacturer (OEM).

Supplier/Vendor shall provide current letters from the manufacturers and/or representative of the brands proposed, designating the vendor as an agent, distributor, or reseller. The letter must be dated within six (6) months of the Vendors/Supplier submittal and must be signed by an authorized representative.

2. Supplier/Vendor shall provide contact information to include name, email address and phone number for primary (required) and secondary (optional) staff within your firm who will be responsible for coordination and execution of orders and deliveries.

### **Group B: Repair Services**

This group may be used to purchase repair services inclusive of parts.

1. Supplier/Vendor shall provide three signed professional references on the referenced company's letterhead, to demonstrate that Supplier/Vendor that have received repair services to their liquid level control systems. In lieu of the references from the Supplier/Vendor or Supplier's/Vendor's Subcontractor, the County will consider the references from Supplier's Vendor's key personnel in accordance with Resolution No. 1122-21. The County must be able to ascertain from Supplier/Vendor provided references, to its satisfaction, at the County's sole discretion, that Supplier/Vendor holds sufficient experience and capacity in providing repair services for liquid level control systems.
2. Supplier/Vendor shall provide a detailed list of their key technical personnel including their role, years of experience and qualifications. In addition, the contact information of the shop manager shall be included which may be used for any industry standard questions.

Supplier/Vendor shall provide all of the specified information, documents and attachments listed above with their Submittal as proof of compliance with the requirements of this RTQ. However, the County may, at its sole discretion and in its best interest, allow Suppliers/Vendors to complete, supplement or supply the required documents throughout the term of the RTQ. It shall be the sole right of the County to determine the number of Suppliers/Vendors which will be included in the Pool. During the term of the RTQ, the County reserves the right to add or delete Suppliers/Vendors as it deems necessary, and in its best interest.

### **2.5 INSURANCE**

Insurance is **not** required in order to be prequalified under this RTQ. Insurance requirements will be detailed in the subsequent ITQ or WOPR.

### **2.6 SPOT MARKET QUOTES**

Suppliers/Vendors in the Pool will be invited to participate in future spot market competition, as needed. The spot market competition will be in the form of an ITQ or WOPR that will include the specific goods and/or services required, and may include provisions, as applicable, such as:

- Small Business Enterprise (SBE) Measures
- Warranty Requirements
- Liquidated Damages/Living Wage
- Insurance Requirements

### **2.7 COMPLIANCE WITH STANDARDS**

All items to be purchased under this bid shall be in accordance with all governmental standards, to include, but not limited to, those issued by the American National Standards Institute (ANSI), the American Society for Testing Materials (ASTM), the Environmental Protection Agency (EPA), The Instrument Society of America (ISA), the International Standards Organization (ISO), the National Fire Protection Association (NFPA), the National Institute of Safety Hazards (NIOSH), the National Sanitation Foundation (NSF), and the Occupational Safety and Health Administration (OSHA). All products shall be UL approved.

**SECTION 3**  
**SCOPE OF WORK/TECHNICAL SPECIFICATIONS**

**3.1 SCOPE OF WORK/TECHNICAL SPECIFICATIONS**

Supplier/Vendor shall be capable of providing liquid level control systems, parts and installation services for the Miami Dade Water and Sewer Department on an “as needed basis” for various lift stations located throughout Miami Dade County.

**3.2 GOODS/SERVICES TO BE PROVIDED**

***Group A: Purchase of New Systems, Installation Services, Parts, and Accessories***

The following is a representative listing of brands presently installed in County facilities. This list is neither exclusive nor complete.

- ABB Group
- ABS
- Automated Tool Control
- Digital Control Corp.
- Flygt
- Motor Protection Electronics
- Multitrode
- Schneider Electric
- Square D
- Xylem

All replacement parts shall be new and of the same quality or brand name as that being replaced. Substitutions will be permitted only with prior authorization of the County.

***Group B: Repair Services***

**Repairs** – Vendors shall make repairs and/or replace parts as needed, as a result of inoperability, malfunction, or faultiness of the active systems. Prior to acceptance by a County representative, the systems shall be inspected to ensure that they meet the specifications and/or merchantability of the systems in accordance with OEM standard.

All replacement parts shall be new and of the same quality or brand name as that being replaced. Substitutions will be permitted only with prior authorization of the County.

**3.3 NEW SYSTEM GENERAL REQUIREMENTS**

In the event a new installation services is required, the newly installed system shall meet the following requirements:

1. The system shall be a standard integrated package that includes a modular unit so that it can be easily retrofitted into existing panels or moved from existing panels to new ones.
2. All Components of the control system shall be designed for use in wastewater collection systems and must be compatible with the harsh environment normally associated with this type of application.
3. The installed control system shall be a fully automatic controller.
4. The system shall be designed so that the purging process does not over pressurize the bubbler pressure transducer.
5. The control system shall be designed to control the water pumps using relays connected to motor starters.

6. The system shall not include any mercury manometers or other components containing liquid mercury.
7. The system shall not include vibrator diaphragm fish tank compressors.
8. The system shall be designed to detect failures in the bubbler system, which would prevent proper operation.
9. The system shall detect and enunciate anomalous conditions in the lift station such as high-water alarm, and air system failure.
10. The system shall include a function to measure the air flow bubbler tube. If the air flow drops below 50% of normal flow, an automatic purge shall be initiated.

**SECTION 4**  
**SUBMITTAL FORM**

**VENDOR:** \_\_\_\_\_

<b>QUALIFICATION CRITERIA TO BE COMPLETED BY ALL VENDORS</b>																								
Refer to Section 2.4, Qualification Criteria, to ensure that Submittal complies with solicitation requirements.																								
Reference Section	Requirements	Copy Attached																						
<b>Group A: Purchase of New Systems, Installation Services, Parts and Accessories</b>																								
2.4.1a	<p>Supplier/Vendor shall be the Original Equipment Manufacturer, agent, distributor, or reseller of the Original Equipment Manufacturer (OEM).</p> <p>Supplier/Vendor shall provide current letters from the manufacturers and/or representative of the brands proposed, designating the vendor as an agent, distributor, or reseller. The letter must be dated within six (6) months of the Vendors/Supplier submittal and must be signed by an authorized representative.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><u>Brands</u></td> <td style="width: 50%;"><u>Manufacturer, Agent, Distributor, or Reseller</u></td> </tr> <tr> <td><input type="checkbox"/> ABB Group</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> ABS</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Automated Tool Control</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Digital Control Corp.</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Flygt</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Motor Protection Electronics</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Multitrode</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Schneider Electric</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Square D</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> <tr> <td><input type="checkbox"/> Xylem</td> <td><input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller</td> </tr> </table> <p>Additional Brands: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<u>Brands</u>	<u>Manufacturer, Agent, Distributor, or Reseller</u>	<input type="checkbox"/> ABB Group	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> ABS	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Automated Tool Control	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Digital Control Corp.	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Flygt	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Motor Protection Electronics	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Multitrode	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Schneider Electric	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Square D	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/> Xylem	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller	<input type="checkbox"/>
<u>Brands</u>	<u>Manufacturer, Agent, Distributor, or Reseller</u>																							
<input type="checkbox"/> ABB Group	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> ABS	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Automated Tool Control	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Digital Control Corp.	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Flygt	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Motor Protection Electronics	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Multitrode	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Schneider Electric	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Square D	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
<input type="checkbox"/> Xylem	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Agent <input type="checkbox"/> Distributor <input type="checkbox"/> Reseller																							
2.4.2a	<p>Vendor/Supplier shall provide contact information to include name, email address and phone number for primary (required) and secondary (optional) staff within your firm who will be responsible for coordination and execution of orders and deliveries.</p> <p>Primary: Name: _____ Email: _____ Phone: _____</p> <p>Secondary (Optional) Name: _____ Email: _____ Phone: _____</p>	<input type="checkbox"/>																						

<b>Group B: Repair Services</b>		
2.4.1b	Supplier/Vendor shall provide three signed professional references on the referenced company's letterhead, to demonstrate that Supplier/Vendor that have received repair services to their liquid level control systems. In lieu of the references from the Supplier/Vendor or Supplier's/Vendor's Subcontractor, the County will consider the references from Supplier's Vendor's key personnel in accordance with Resolution No. 1122-21. The County must be able to ascertain from Supplier/Vendor provided references, to its satisfaction, at the County's sole discretion, that Supplier/Vendor holds sufficient experience and capacity in providing repair services for liquid level control systems.	<input type="checkbox"/>
2.4.2b	Supplier/Vendor shall provide a detailed list of their key technical personnel including their role, years of experience and qualifications. In addition, the contact information of the shop manager shall be included which may be used for any industry standard questions.	<input type="checkbox"/>
**	<p><b><i>For Informational Purpose Only:</i></b></p> <p>Please confirm if your firm can provide emergency repair services within 24-hours of notification.</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p>	