LABORATORY INFORMATION MANAGEMENT SYSTEM
Estimated Cost - $4,237,000/3 years
RQET1500025 - Verification of Availability

August 27, 2015

SBD is attempting to place a Small Business Measure on RQET1500025. Please review this document to determine if your firm would be able **provide the scope of services below and is willing to participate on this solicitation.** If your firm is interested, please include *a copy of your firm's resume or list of projects or list 3 similar projects on the last page of this document*.

The deadline to respond to this Verification of Availability is 3:00 PM, Tuesday, September 1, 2015.

Tyrone White
Contract Certification Specialist
Miami-Dade County Small Business Development Division
☏Office: (305) 375-3123
🖷Fax: (305) 375-3160
Email: twj@miamidade.gov

"Help stimulate Miami's economy by supporting Small Businesses"

Please familiarize yourself with the Project Review Process Website:
http://www.miamidade.gov/smallbusiness/projects-under-review.asp

VERIFICATION OF AVAILABILITY TO PROPOSE

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**

CONTRACT SPECIALIST: **Tyrone White**
I am herewith submitting this letter of verification of availability and capability to propose, 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: **LABORATORY INFORMATION MANAGEMENT SYSTEM**

PROJECT NUMBER: **RQET1500025**

Estimated Contract Amount: $4,237,000/3 years

(Scope of work and minimum requirements for this project is attached.)

_____
NAME OF FIRM

_____
        ADDRESS   CITY   ZIP CODE

Certification Expires: _____
                                 DATE

Telephone: (__ __ __) __ __ __ - __ __ __ __

_____
        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 PROPOSE

CONTRACT TITLE: **LABORATORY INFORMATION MANAGEMENT SYSTEM**
PROJECT NUMBERS: **RQET1500025**
ESTIMATED CONTRACT AMOUNT: **$4,237,000/3 years**

SECTION 2 - SPECIAL TERMS AND CONDITIONS

2.1 INTRODUCTION

Miami-Dade County, hereinafter referred to as the "County", as represented by the Miami-Dade Police Department, hereinafter referred to as "MDPD", is soliciting proposals for a turn-key configurable commercial off-the-shelf Laboratory Information Management System (LIMS) for use in multiple areas of the Miami-Dade Police Department. The selected Proposer will be responsible for delivery of a turn-key LIMS solution inclusive of all software licensing, implementation, integration, configuration, data conversion, training, maintenance, and support services. LIMS will be used by all County law enforcement agencies and external municipal, State, and Federal agencies. For this reason, the proposed LIMS shall be configured to provide external agencies access to the LIMS via the internet based on defined user roles and security permissions.

Can your firm provide a turn-key configurable commercial off-the-shelf Laboratory Information Management System (LIMS) for use in multiple areas of the Miami-Dade Police Department?
Yes _____   **No** _____

Can your firm provide the delivery of a turn-key LIMS solution inclusive of all software licensing, implementation, integration, configuration, data conversion, training, maintenance, and support services?
Yes _____   **No** _____

2.2 OBJECTIVE

The objective of this solicitation is to obtain a Solution that completely and accurately manages the entirety of the laboratory information management solution. MDPD intends to replace its antiquated and unsupported Property and Evidence Tracking System application with a modern and state-of-the-art turn-key configurable, commercially available Laboratory Information Management System (LIMS). The Proposed LIMS shall be inclusive of all software, and licenses necessary for the proper operation of the system.

Can your firm provide a Solution that completely and accurately manages the entirety of the laboratory information management solution?
Yes _____   **No** _____

2.3 BACKGROUND

Currently, MDPD uses an internally developed Property and Evidence Tracking System (PETS) to assist in operations. PETS is a client-server application with approximately 800 users. It is written in PowerBuilder 11.5 and uses an Oracle 10g database. PETS contains the following system modules: Property and Evidence, Biology/DNA, Analytical/Chemistry, Forensic Identification (CERF, Firearms, Toolmark), Investigative/Crime Scene, Forensic Imaging, Fingerprint/Latent, Equipment Tracking System (ETS), Vehicle Tracking Systems (VTS), Career Development System (CDS), Critical Incident Logistics Unit (CILU), Warrant Tracking System (WTS), and Subpoena Tracking System (STS).

PETS provides email notifications of links made in the National Integrated Ballistic Information Network (NIBIN) and provides Chemistry reports to lead MDPD investigators. In addition, PETS makes chemistry reports available via the internet to the State Attorney's Office.

2.4 SERVICES TO BE PROVIDED

The selected Proposer will be responsible for delivery of a complete turn-key Laboratory Information System Solution inclusive of all software licensing, implementation, integration, configuration, data conversion, training, maintenance, and support services. .

Does your firm understand that it will be responsible for delivery of a complete turn-key Laboratory Information System Solution inclusive of all software licensing, implementation, integration, configuration, data conversion, training, maintenance, and support services?

Yes _____   No _____

Contractor Qualifications Questionnaire

This questionnaire will assist SBD in identifying the qualified contractors that can provide the aforementioned good(s)/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 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 work as required.**

_____ **PRIME DOES NOT have experience providing the required good(s) and/or services required by this solicitation.**

I certify that to the best of my knowledge all the information provided is verifiable and correct.

Name of Firm: _____ Certification #: _____

Representative's Name: _____

Title: _____   Signature: _____

Please respond by **3:00 PM, Tuesday, September 1, 2015.**

Any questions, feel free to contact me at the number below.

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):

_____

_____

_____

Project Title: _____

Client Name: _____

Contact #: (__ __ __) __ __ __ - __ __ __ __ / _____

Contract Amount: $_____

Scope of Service(s):

_____

_____

_____

Project Title: _____

Client Name: _____

Contact #: (__ __ __) __ __ __ - __ __ __ __ / _____

Contract Amount: $_____

Scope of Service(s):

_____

_____

_____

REASONS & COMMENTS

_____

_____

_____

_____

_____