



Request for Proposals

Sidewalk Construction Services

Date Issued: July 1, 2016

Due: July 13 – 4:00 PM

I. Background Information

The Greater Syracuse Land Bank's mission is to acquire and stabilize vacant and abandoned properties in order to facilitate their return to productive use. The Land Bank owns a variety of properties including both vacant and improved lots, most improvements are residential but some are commercial. The majority of our properties are located in the City of Syracuse and are obtained via municipal tax foreclosure. Properties are acquired, cleaned-out, stabilized, assembled together when necessary, and listed for sale. Property are typically listed in as-is condition and buyers are expected to fully renovate within 12 months. Occasionally a property is renovated first prior to sale. The condition of these properties, and their sidewalks, vary at the time the Land Bank acquires them.

The Land Bank is seeking to enter into a bulk contract for sidewalk replacement between July 2016 and December 2017. Typical lots vary between 33' – 40' of sidewalk per property although corner properties may have 140' or more of sidewalk. We are seeking to retain the lowest qualified contractor who will be 'on call' to replace sidewalks as needed for a set price per square foot.

II. Scope of Work and Requirements of Bidders

A. Scope of Work

Contractor will be 'on call' to complete sidewalk replacement as ordered by the Land Bank. Jobs must be completed within 30 days of order/notice to proceed. All sidewalk replacement must meet or exceed current City Code.

- Obtain Sidewalk Construction Permits
- Excavate existing sidewalk (spoils to be removed from site by contractor)
- Frame and pour new sidewalk
- Payment will be processed net 15 after the Land Bank inspects the completed sidewalk.

B. Insurance Requirements

The successful bidder shall be required to provide for itself and maintain at its own cost and expense until the completion of the work the following forms of insurance:

- a. Commercial General Liability ("CGL") coverage with limits of liability not less than One Million Dollars (\$1,000,000.00) per occurrence and not less than Two Million Dollars (\$2,000,000.00) annual aggregate. If CGL coverage contains a General Aggregate Limit, such General Aggregate Limit shall apply

separately to each Property. CGL coverage shall be written on ISO occurrence form GC 00 01 (1093) or a substitute form providing equivalent coverage.

b. Comprehensive Automobile Liability coverage on owned, hired, leased, or non-owned autos with limits of not less than One Million Dollars (\$1,000,000.00) per accident.

c. Workers' Compensation and Employers' Liability in form and amounts required by law.

The Land Bank shall be named as an additional insured on the policies required by subparagraphs (a) and (b) above (Greater Syracuse Property Development Corporation, 431 E. Fayette Street, Suite 375; Syracuse NY 13202). The successful bidder shall furnish certificates of insurance to the Land Bank and corresponding policy endorsement setting forth the required coverage hereunder prior to commencing any work, and such policies shall contain an endorsement requiring the carrier to give at least ten days' prior notice of cancellation to the Land Bank. All insurance required shall be primary and non-contributing to any insurance maintained by the Land Bank. The successful bidder shall ensure that any subcontractors hired carry insurance with the same limits and provisions provided herein. The successful bidder agrees to cause each subcontractor to furnish the Land Bank with copies of certificates of insurance and the corresponding policy endorsements setting forth the required coverage hereunder prior to any such subcontractor commencing any work.

C. Non-Collusive Bidding Certification

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of his knowledge and belief:

- (1) The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor; and
- (2) Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and
- (3) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

III. Proposal Requirements

- Quote your price 1) per square foot for single-pour sidewalk replacement and for 2) two-pour sidewalk replacement. Assume all jobs will require excavation and removal of existing sidewalk. Please also provide 3) a rate for any additional work that may be needed such as tree removal.
- Describe your experience as it pertains to sidewalk construction/replacement work.
- Describe your capacity and how many employees you currently have – if needed, how many sidewalk jobs could you complete in a week. Affirm that you will be able to complete a sidewalk replacement within 30 days of receiving an order/notice to proceed from the Land Bank.
- Attach either your relevant insurance certificates described above or affirm your ability to obtain the required insurance coverage upon awarding of the contract.

- Please indicate whether your company is a NY State Certified M/WBE (see attached).
- Please provide two professional references.

Submit responses in person or via the mail to:

Attn: Ben Gray
Greater Syracuse Land Bank
431 East Fayette Street, Suite 375
Syracuse, NY 13202

Alternatively, responses may be emailed to bgray@syracuselandsbank.org. Please title the subject line: "Sidewalk Construction Services RFP."

Note: Submissions must be received by **Wednesday, July 13, 2016 at 4:00pm**

The Land Bank's board of directors will vote to approve the winning bidder's contract on July 19, 2016

Exhibit "A" – MWBE Utilization Plan

Greater Syracuse Property Development Corporation

M/WBE Utilization Plan

INSTRUCTIONS: This form MUST be submitted with any bid, or proposal prior to the contract award. This Utilization Plan must contain a detailed description of the supplies and/or services to be provided by each NYS-certified Minority and Women-owned Business Enterprise (M/WBE), including the offeror if a NYS-certified MWBE, and estimated (or actual if known) annual dollar value under the contract and reflect the MWBE participation goals specified in the contract or procurement document.

Will there be M/WBE participation for services under this contract?

☐ Yes complete this form ☐ No, please complete request for waiver form.

*Please note if the percentage of M/WBE participation in your utilization plan does not equal or exceed the contract goals you must complete a partial waiver form in addition to this utilization plan.

Services to be provided: _____ Solicitation Number _____

Total Contract Amount: _____ MBE \$ Goal: _____ WBE \$ Goal: _____

General/Prime Contractor Information

Offeror/ Contractor Name: _____

Address: _____ Email: _____

Business Phone: _____ Cell Phone: _____ Other: _____

Tax I.D. or SS #: _____

General/Prime Contractor is MBE ☐ WBE ☐ Dual ☐ Not W/MBE ☐ (check one)

List below the names of all proposed Minority/Women Business Enterprises joint venture enterprises, subcontractors, consultants, or suppliers, that are certified by the State of New York, the services they will provide, the amount of money they will receive, the date the project will start and its estimated date of completion.

Name: _____	☐ MBE ☐ WBE ☐ Dual	Description of Scope of Work Subcontracts/Supplies/Services ☐ Direct (Spending directly fulfilling contract obligations) Description: _____ ☐ Indirect (Spending in Support of Company operations) Description: _____ ☐ Copies of Written Agreements attached	Value \$ _____
Address: _____			Percentage of Contract
City, State, Zip: _____			_____ %
Telephone: _____			
Email: _____			
Federal ID No. _____			
Name: _____	☐ MBE ☐ WBE ☐ Dual	☐ Direct (Spending directly fulfilling contract obligations) Description: _____ ☐ Indirect (Spending in Support of Company operations) Description: _____ ☐ Copies of Written Agreements attached	Value \$ _____
Address: _____			Percentage of Contract
City, State, Zip: _____			_____ %
Telephone: _____			
Email: _____			
Federal ID No. _____			

Exhibit “A” – MWBE Utilization Plan

☐ Vendor Certification: I hereby certify that the information supplied in this utilization plan is true and correct.

SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR/CONTRACTOR’S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 142, AND THE ABOVE REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NON-COMPLIANCE AND/OR TERMINATION OF THE CONTRACT.

Signature : _____ Date: _____

Print Name: _____ Telephone Number: _____

Title: _____ Email: _____

Exhibit "B"

REQUEST FOR WAIVER

Please see page two for documentation requirements. By submitting this form and the required information, the offeror/contractor certifies that every Good Faith Effort has been taken to promote M/WBE participation pursuant to the M/WBE participation set forth under the contract or proposal.

Contract Overview

Offeror/Contractor Name: _____ Telephone: _____

Address: _____ Federal ID No. _____ SFS Vendor ID: _____

City, State, Zip: _____ Solicitation/Contract No. _____

Email: _____

Type of Procurement: Competitive Bid ☐ Other ☐ Bid Response Due Date: _____ Est. or Actual Cost _____

Waiver Request Fill All Boxes with an X or N/A and provide justification (attach additional pages if needed)

1. ☐ MBE Waiver- A waiver of the MBE Goal for this procurement is requested. ☐ Total ☐ Partial
2. ☐ WBE Waiver - A waiver of the WBE Goal for this procurement is requested. ☐ Total ☐ Partial
3. ☐ Waiver- Pending ESD Certification - Check here if subcontractors or suppliers of Contractor are not certified M/WBE but an application for certification has been filled with Empire State Development.
Subcontractor/Supplier Name: _____ Date of filling: _____ Reference submission instruction on page 2, item 1.
4. ☐ Vendor does not subcontract construction/professional services.
5. ☐ Vendor subcontracts some of this type of work but at lower than bids/solicitation describes.
6. ☐ Vendor has solicited NYS Certified M/WBE firms for purposes in complying with participation goals without success.
Please see requirements: Reference submission Instruction on page 2, items 2-10.
7. ☐ Other: _____

Provide a summary of your justification for requesting a waiver.

☐ By checking this box you verify that you went through the NYS ESD M/WBE Directory of Certified firms to view companies that you may be currently using or may use on this bid.

SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR/CONTRACTOR'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE IS-A, 5 NYCRR PART 142, AND THE ABOVE REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR TERMINATION OF THE CONTRACT

Exhibit "B"
REQUEST FOR WAIVER

Vendor Certification: I HEREBY AFFIRM THAT THE INFORMATION SUPPLIED IN SUPPORT OF THIS WAIVER REQUEST IS TRUE AND CORRECT AND THAT THIS REQUEST IS MADE IN GOOD FAITH

_____ sworn to before me this ____ day of ____ 20____

Signature

Date

Notary Public

Print Name

Seal:

Title_____

Company_____

REQUIREMENTS AND DOCUMENT SUBMISSION INSTRUCTIONS

To be considered, the Request for Waiver form must be accompanied by supporting documentation for items 1-10, as listed below. If a Waiver Pending ESD Certification is requested, please see note below. Copies of the following Information and all relevant supporting documentation must be submitted along with the request.

Supporting Documentation:

1. Provide any other information you deem relevant which may help us in evaluating your request for a waiver.
2. Provide the names of general circulation, trade association, and MWBE-oriented publications in which you solicited certified MWBEs for the purposes of complying with your participation goals.
3. Provide a list identifying the date(s) that all solicitations for certified MWBE participation were published in any of the above publications and the text of said solicitation(s).
4. Provide a list of all certified MWBEs appearing In *the* NYS Directory of Certified Firms that were solicited in writing for purposes of complying with the certified MWBE participation levels.
5. Provide copies of notices, dates of contact, letters and other correspondence as proof that solicitations were made in writing and copies of such solicitations, *or* a sample copy of the solicitation, if an identical solicitation was made to all *certified* MWBEs.
6. Provide copies of responses made by certified MWBEs to your solicitations.
7. Provide a description of any contract documents, plans or specifications made available to certified MWBEs for purposes of soliciting their bids, and the date and manner in which these documents were made available.
8. Provide documentation of any negotiations between the Offeror/Contractor, and/or MWBE(s) undertaken for purposes of complying with the certified MWBE participations goals.
9. Provide the name, title, address, telephone number, and email address of the Offeror/contractor's representative authorized to discuss this waiver request.
10. Copy of notice of application receipt for MWBE certification issued by Empire State Development (ESD).

Note: Unless a Total Waiver has been granted, Offeror/Contractor will be required to submit all reports and documents pursuant to the provisions set forth in the Contract, as deemed appropriate by the Corporation and the State, to determine MWBE compliance.

FOR AUTHORIZATION USE ONLY

Reviewed By: _____ Date: _____ Waiver Granted: Yes ____ No ____
_ Total Waiver _ Partial Waiver _ Conditional Waiver _ ESD Certification Waiver