



City of Austin

Founded by Congress, Republic of Texas, 1839

Capital Contracting Office, PO Box 1088, Austin, Texas 78767 Telephone 512/974-7181

April 29, 2020

To: Consultants Requesting RFQ Package

SUBJECT: Request for Statements of Qualifications (RFQ) for providing Professional Engineering Services for the 2020 CIP Construction Materials Testing, Geotechnical, & Forensic Engineering Services Rotation List
Solicitation Number: CLMP302 - **ADDENDUM No. 4**

This Addendum No. 4 modifies the RFQ issued March 23, 2020 for the above subject project.

Addendum No. 4

1. REFERENCE- Scope of Services, Technician Certification - page 9

DELETE THE FOLLOWING:

- Structural Steel – Technicians inspecting and testing structural steel connections Welding (AWS CWI or ICC Structural Steel and Welding SI) and bolted connections (ICC Structural Steel and Bolting SI) and must be certified American Institute of Structural Steel (AISC). For Nondestructive Testing (ASNT) NDT Level II, or higher.

REPLACE WITH THE FOLLOWING:

- Structural Steel – Technicians inspecting structural steel *welded* connections must have one of the following certifications: IBC, AWS, CWI, or ICC Structural Welding SI. Technicians inspecting structural steel *bolted* connections must have the following certification: IBC or ICC Structural Steel and Bolting SI. For Nondestructive Testing, the technician must be an ASNT NDT Level II inspector, or higher. The most stringent requirements govern.

2. REFERENCE – ADDENDUM 2 Scope of Services, Technician Certification, page 4 of 5

DELETE THE FOLLOWING:

- Concrete – Technicians performing concrete testing must be certified as an American Concrete Institute (ACI) Concrete Field-Testing Technician Grade I or NICET Level II Associate Engineering Technician in Concrete. ACI certified technicians must pass an annual ACI performance evaluation test. Firms shall provide proof that ACI certified technicians have passed the ACI annual performance evaluation tests.

REPLACE WITH THE FOLLOWING:

- Concrete – Technicians performing concrete testing must be certified as an American Concrete Institute (ACI) Concrete Field-Testing Technician Grade I or NICET Level II Associate Engineering Technician in Concrete.

3. REFERENCE - MBE/WBE Procurement Program

ADD - The MBE/WBE No Goals Form and MBE/WBE No Goals Utilization Plan will replace the MBE/WBE Compliance plan for the firms submitting a proposal solely for Category C. Firms submitting proposals for Category A, Category B, or any combination of Categories A, B, or C are still required to complete the existing compliance plan and/or perform Good Faith Effort (GFE) if goals are not achieved.

4. REFERENCE – Evaluation Criteria, Consideration Item 1, page 2

ADD – When submitting for Category C.

- This form will replace the MBE/WBE Compliance plan for the firms submitting a proposal solely for Category C.

Attach the following:

- **No Goals Utilization Form**
- **No Goals Utilization Plan (if applicable)**

All other information in the Solicitation remains unchanged. Please remember this solicitation is currently in a “No Contact” period and all inquiries should be directed to the appropriate contact persons listed in the solicitation. If you have questions regarding this process and project related questions, you may contact me at (512) 974-7055 or kitty.tunnell@austintexas.gov.

Sincerely,



Kitty Tunnell, Procurement Specialist IV
Professional Services Division
Capital Contracting Office

cc: Jay Ulary, P.E., PMP, Consulting Engineer, PWD
Jeremy Wall, Procurement Supervisor, CCO
Rachelle Delouis, Business Development Counselor II, SMBR

Attachments: MBE/WBE No Goals Form
MBE/WBE No Goals Utilization Plan

**MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISE (MBE/WBE)
PROCUREMENT PROGRAM
Subcontracting/Sub-Consulting (“Subcontractor”) Utilization Form**

SOLICITATION NUMBER: RFQS 6100 CLMP302

SOLICITATION TITLE: 2020 CIP Construction Mat Testing, Geo & Forensic Eng Svs RL

In accordance with the City of Austin’s Minority and Women-Owned Business Enterprises (M/WBE) Procurement Program (Program), Chapters 2-9A/B/C/D of the City Code and M/WBE Program Rules, this Solicitation was reviewed by the Small and Minority Business Resources Department (SMBR) to determine if M/WBE Subcontractor/Sub-Consultant (“Subcontractor”) Goals could be applied. Due to insufficient subcontracting/subconsultant opportunities and/or insufficient availability of M/WBE certified firms, SMBR has assigned no subcontracting goals for this Solicitation. However, Offerors who choose to use Subcontractors must comply with the City’s M/WBE Procurement Program as described below. Additionally, if the Contractor seeks to add Subcontractors after the Contract is awarded, the Program requirements shall apply to any Contract(s) resulting from this Solicitation.

Instructions:

- a.) Offerors who do not intend to use Subcontractors shall check the “NO” box and follow the corresponding instructions.
- b.) Offerors who intend to use Subcontractors shall check the applicable “YES” box and follow the instructions. **Offers that do not include the following required documents shall be deemed non-compliant or nonresponsive as applicable, and the Offeror’s submission may not be considered for award.**

NO, I DO NOT intend to use Subcontractors/Sub-consultants.

Instructions: Offerors that do not intend to use Subcontractors shall complete and sign this form below (**Subcontracting/Sub-Consulting (“Subcontractor”) Utilization Form**) and include it with their sealed Offer.

YES, I DO intend to use Subcontractors /Sub-consultants.

Instructions: Offerors that do intend to use Subcontractors shall complete and sign this form below (**Subcontracting/Sub-Consulting (“Subcontractor”) Utilization Form**), and follow the additional Instructions in the (**Subcontracting/Sub-Consulting (“Subcontractor”) Utilization Plan**). Contact SMBR if there are any questions about submitting these forms.

Offeror Information			
Company Name			
City Vendor ID Code			
Physical Address			
City, State Zip			
Phone Number		Email Address	
If the Offeror City of Austin M/WBE certified?	<input type="checkbox"/> NO <input type="checkbox"/> YES	Indicate one: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> MBE/WBE Joint Venture	

Offeror Certification: I understand that even though SMBR did not assign subcontract goals to this Solicitation, I will comply with the City’s M/WBE Procurement Program if I intend to include Subcontractors in my Offer. I further agree that this completed **Subcontracting/Sub-Consulting Utilization Form**, and if applicable my completed **Subcontracting/Sub-Consulting Utilization Plan**, shall become a part of any Contract I may be awarded as the result of this Solicitation. Further, if I am awarded a Contract and I am not using Subcontractor(s) but later intend to add Subcontractor(s), before the Subcontractor(s) is hired or begins work, I will comply with the City’s M/WBE Procurement Program and submit the **Request For Change** form to add any Subcontractor(s) to the Project Manager or the Contract Manager for prior authorization by the City and perform Good Faith Efforts (GFE), if applicable. I understand that, if a Subcontractor is not listed in my **Subcontracting/Sub-Consulting Utilization Plan**, it is a violation of the City’s M/WBE Procurement Program for me to hire the Subcontractor or allow the Subcontractor to begin work, unless I first obtain City approval of my **Request for Change** form. I understand that, if a Subcontractor is not listed in my **Subcontracting/Sub-Consulting Utilization Plan**, it is a violation of the City’s M/WBE Procurement Program for me to hire the Subcontractor or allow the Subcontractor to begin work, unless I first obtain City approval of my **Request for Change** form.

Name and Title of Authorized Representative (Print or Type)

Signature/Date

**MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISE (MBE/WBE)
PROCUREMENT PROGRAM
Subcontracting/Sub-Consulting (“Subcontractor”) Utilization Plan**

SOLICITATION NUMBER:

SOLICITATION TITLE:

INSTRUCTIONS: Offerors who DO intend to use Subcontractors may utilize M/WBE Subcontractor(s) or perform Good Faith efforts when retaining Non-certified Subcontractor(s). Offerors must determine which type of Subcontractor(s) they are anticipating to use (CERTIFIED OR NON-CERTIFIED), check the box of their applicable decision, and comply with the additional instructions associated with that particular selection.

I intend to use City of Austin CERTIFIED M/WBE Subcontractor/Sub-consultant(s).

Instructions: Offerors may use Subcontractor(s) that ARE City of Austin certified M/WBE firms. Offerors shall contact SMBR (512-974-7600 or SMBRComplianceDocuments@austintexas.gov) to confirm if the Offeror’s intended Subcontractor(s) are City of Austin certified M/WBE and if these firm(s) are certified to provide the goods and services the Offeror intends to subcontract. If the Offeror’s Subcontractor(s) are current valid certified City of Austin M/WBE firms, the Offeror shall insert the name(s) of their Subcontractor(s) into the table below and must include the following documents in their sealed Offer:

- Subcontracting/Sub-Consulting Utilization Form (completed and signed)
- Subcontracting/Sub-Consulting Utilization Plan (completed)

I intend to use NON-CERTIFIED Subcontractor/Sub-Consultant(s) after performing Good Faith Efforts.

Instructions: Offerors may use Subcontractors that ARE NOT City of Austin certified M/WBE firms ONLY after Offerors have first demonstrated Good Faith Efforts to provide subcontracting opportunities to City of Austin M/WBE firms.

STEP ONE: Contact SMBR for an availability list for the scope(s) of work you wish to subcontract;

STEP TWO: Perform Good Faith Efforts (Check List provided below);

STEP THREE: Offerors shall insert the name(s) of their certified or non-certified Subcontractor(s) into the table below and must include the following documents in their sealed Offer:

- Subcontracting/Sub-Consulting Utilization Form (completed and signed)
- Subcontracting/Sub-Consulting Utilization Plan (completed)
- All required documentation demonstrating the Offeror’s performance of Good Faith Efforts (see Check List below)

GOOD FAITH EFFORTS CHECK LIST –

When using NON-CERTIFIED Subcontractor/Sub-consultants(s), **ALL of the following CHECK BOXES MUST be completed in order to meet and comply with the Good Faith Effort requirements and all documentation must be included in your sealed Offer. Documentation CANNOT be added or changed after submission of the bid.**

Contact SMBR. Offerors shall contact SMBR (512-974-7600 or SMBRComplianceDocuments@austintexas.gov) to obtain a list of City of Austin certified M/WBE firms that are certified to provide the goods and services the Offeror intends to subcontract out. (Availability List). Offerors shall document their contact(s) with SMBR in the “SMBR Contact Information” table on the following page.

Contact M/WBE firms. Offerors shall contact all of the M/WBE firms on the Availability List with a Significant Local Business Presence which is the Austin Metropolitan Statistical Area, to provide information on the proposed goods and services proposed to be subcontracted and give the Subcontractor the opportunity to respond on their interest to bid on the proposed scope of work. When making the contacts, Offerors shall use at least two (2) of the following communication methods: email, fax, US mail or phone. Offerors shall give the contacted M/WBE firms at least seven days to respond with their interest. Offerors shall document all evidence of their contact(s) including: emails, fax confirmations, proof of mail delivery, and/or phone logs. These documents shall show the date(s) of contact, company contacted, phone number, and contact person.

Follow up with responding M/WBE firms. Offeror shall follow up with all M/WBE firms that respond to the Offeror’s request. Offerors shall provide written evidence of their contact(s): emails, fax confirmations, proof of mail delivery, and/or phone logs. These documents shall show the date(s) of contact, company contacted, phone number, and contact person.

**MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISE (MBE/WBE)
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SOLICITATION NUMBER:

SOLICITATION TITLE:

- Advertise.** Offerors shall place an advertisement of the subcontracting opportunity in a local publication (i.e. newspaper, minority or women organizations, or electronic/social media). Offerors shall include a copy of their advertisement, including the name of the local publication and the date the advertisement was published.

- Use a Community Organization.** Offerors shall solicit the services of a community organization(s); minority persons/women contractors'/trade group(s); local, state, and federal minority persons/women business assistance office(s); and other organizations to help solicit M/WBE firms. Offerors shall provide written evidence of their Proof of contact(s) include: emails, fax confirmations, proof of mail delivery, and/or phone logs. These documents shall show the date(s) of contact, organization contacted, phone number, email address and contact person.

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SOLICITATION NUMBER:
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(Offerors may duplicate this page to add additional Subcontractors as needed)

Subcontractor/Sub-consultant	
City of Austin Certified	<input type="checkbox"/> MBE <input type="checkbox"/> WBE Ethnic/Gender Code: <input type="checkbox"/> NON-CERTIFIED
Vendor ID Code	
Contact Person	Phone Number:
Additional Contact Info	Fax Number: E-mail:
Amount of Subcontract	\$
List commodity codes & description of services	
Justification for not utilizing a certified MBE/WBE	

Subcontractor/Sub-consultant	
City of Austin Certified	<input type="checkbox"/> MBE <input type="checkbox"/> WBE Ethnic/Gender Code: <input type="checkbox"/> NON-CERTIFIED
Vendor ID Code	
Contact Person	Phone Number:
Additional Contact Info	Fax Number: E-mail:
Amount of Subcontract	\$
List commodity codes & description of services	
Justification for not utilizing a certified MBE/WBE	

SMBR Contact Information			
SMBR Contact Name	Contact Date	Means of Contact	Reason for Contact
		<input type="checkbox"/> Phone OR <input type="checkbox"/> Email	

FOR SMALL AND MINORITY BUSINESS RESOURCES DEPARTMENT USE ONLY:

Having reviewed this plan, I acknowledge that the Offeror HAS or HAS NOT complied with these instructions and City Code Chapters 2-9A/B/C/D, as amended.

Reviewing Counselor Date

I have reviewed the completing the Subcontracting/Sub-Consultant Utilization Plan and Concur Do Not Concur with the Reviewing Counselor's recommendation.

Director/Assistant Director or Designee Date