SUPPLEMENTAL BIDDER RESPONSIBILITY CRITERIA

2015 Priority Storm and Sewer Repairs

These forms shall be completed in their entirety and submitted by the apparent two lowest Bidders to the Contracting Agency by 12:00 P.M. (noon) of the second business day following the bid submittal deadline.

Failure to submit and meet the requirements as stated in Section 1-02 of the Special Provisions shall be grounds for rejection of the bid. The City of Olympia will be the sole judge in determining if the prospective contractor meets the minimum experience requirements.

Ontra	<u>actor</u> .
Name:	<u>. </u>
	SS:
	e:
	ct Person:
4.	Subcontractor Responsibility : Attach standard subcontract form for review and a written description of its procedure for validating the responsibility of subcontractors.
5.	Claims Against Retainage and Bonds:
	Instructions to Bidders: Check the appropriate box
	☐ The Bidder <u>has not</u> had claims against retainage and bonds in the three (3) years prior to the bid submittal date.
	 Alternatively, the Bidder <u>has</u> had claims against retainage and bonds in the three (3) years prior to the bid submittal date.

If the Bidder <u>has</u> had claims against retainage and bonds in the three (3) years prior to the bid submittal date, submit a list of public works projects completed during this period that have had claims against retainage and bonds and include name of Project, Owner and contact information for the Owner, a list of claims filed against retainage and/or payment bond for any of the projects listed; and a written explanation of circumstances surrounding each claim and the ultimate resolution of the claim.

6. Public Bidding Crime:

Instruc	nstructions to Bidders: Check the appropriate box		
		er and/or its Owners have not been convicted of a contract in the five (5) years prior to the bid	
		that the Bidder and/or its Owners <u>have</u> been n a public works contract in the five (5) years prior to	
contra		ricted of a crime involving bidding on a public works ng the date of the conviction and a description of the	
(Date)		(Signature)	
		(Print Name)	
		(Title)	

7. Termination for Cause/Termination for Default

Instruc	ctions to Bidders: Check the appropriate	e box
		ler has not had any public works contracts terminated a government agency in the five (5) years prior to the
		s that the Bidder <u>has</u> had public works contracts default by a government agency in the five (5) years
the five termina	e (5) years prior to the bid submittal date ated for cause or terminated for default	cts terminated for cause or terminated for default in e, provide a written explanation for all contracts by identifying the Project contract that was minated the contract, the date of the termination, and g the termination.
(Date)		(Signature)
		(Print Name)
		(Title)

8. Lawsuits

Instructions to Bidders: Check the appropriate	box
	er <u>has not</u> had any lawsuits with judgments entered prior to the bid submittal date that demonstrate a entracts.
	that the Bidder <u>has</u> had any lawsuits with judgments) years prior to the bid submittal date that the terms of contracts.
prior to the bid submittal date that demonstrate	•
(Date)	(Signature)
	(Print Name)
	(Title)

9. Completion of Similar Projects

• The bidder must have completed at least three (3) projects totaling a minimum of 20,000 linear feet using the CIPP rehabilitation technology for a municipality in the two (2) years prior to the bid submittal date for this project.

"Municipality" means the state or a municipality authorized by Washington law to contract to contract for the execution of a public work, all as defined in RCW 39.04.010.

#1	Owner's Name and Contact Information:				
	Name of Owners Representative:				
	Project Name:				
	Awarded Contract Amount:				
	Final Contract AmountCompletion Date:				
	Project Description:				
	Linear Feet of CIPP Installed				
#2	Owner's Name and Contact Information:				
	Name of Owners Representative:				
	Project Name:				
	Awarded Contract Amount:				
	Final Contract Amount				
	Completion Date:				
	Project Description:				
	Linear Feet of CIPP Installed				

#3	Owner's Name and Contact Information:
	Name of Owners Representative:
	Project Name:
	Awarded Contract Amount:
	Final Contract Amount
	Completion Date:
	Project Description:
	Linear Feet of CIPP Installed
40.0	
10. Contr	actor Licensing/Manufacturing Certification
The fo	llowing must be submitted with this form:
1.	Documentation from the CIPP manufacturer that the Bidder is certified to install the manufacturer's product.
2.	Documentation from the CIPP manufacturer that the CIPP material and installation process meets the requirements of Section 7-22.
3.	Any and all subcontractors installing the CIPP must be licensed/certified by the manufacturer and must provide documentation of the license/certification.
<u>Ma</u>	anufacturer Information:
Na	ame:
Ac	ldress:
	none:
C	ontact Person:
11. Exper	ience of Contractor's Personnel
• Fie	eld Superintendent:
20	e field superintendent must have successfully completed three (3) projects totaling a minimum of ,000 linear feet of pipe repair using CIPP rehabilitation technology in the two (2) years prior to the submittal date.
Na	nme:
Ac	ldress:
Ph	none:

#1	Project Name:
	Owner's Name and Contact Information
	Name of Owner's Representative
	Name of Contractor:
	Completion Date:
	Linear Feet of CIPP Installed
#2	Project Name:
	Owner's Name and Contact Information
	Name of Owner's Representative
	Name of Contractor:
	Completion Date:
	Linear Feet of CIPP Installed
#3	Project Name:
	Owner's Name and Contact Information
	Name of Owner's Representative
	Name of Contractor:
	Completion Date:
	Linear Feet of CIPP Installed
	Emodi i ok of on i motaliod
ins	tallation Crew Lead:
مرا	tallation arounload shall have accumulated a minimum of two (2) years of CIDD installation
	stallation crew lead shall have accumulated a minimum of two (2) years of CIPP installation
ex	perience as crew lead during the five (5) years prior to the bid submittal deadline for this project.
Nla	ma:
Δd	me:
Ph	dress:one:
	5.1.5. <u> </u>
De	scribe CIPP Installation Crew Lead Experience (minimum 2-year requirement):
Re	sin Impregnation Crew Lead:
Re	sin impregnation crew lead shall have accumulated a minimum of two (2) years of CIPP
	pregnation crew lead experience during the five (5) years prior to the bid submittal deadline for
	s project.
	- 1
Na	me:
Ad	dress:
Ph	one:

Describe	e Resin Impregnation Crew Lead Experience (minimum 2-year requirement):	
-		
Boiler Te	echnician:	
	chnician shall have accumulated a minimum of two (2) years of CIPP experience as chnician during the five (5) years prior to the bid submittal deadline for this project.	а
Name:_		
Address		
Phone:_		
	e Boiler Technician Experience (minimum 2-year requirement):	
Lateral (Cutting Technician:	
lateral c	cutting technician shall have accumulated a minimum of two (2) years of experience a utting technician with use of robotic cutting equipment during the five (5) years prior to nittal deadline for this project.	
Nama:		
Address	<u> </u>	
Phone:	·	
Describe	e Lateral Cutting Technician Experience (minimum 2-year requirement):	

*****BIDDER NOTIFICATION******

DETERMINATION OF NON-RESPONSIBILITY

(Date)	
(Contracto	or Name) or Mailing Address)
Sent via:	Fax: 360.000.10000 Email: lowbidder@com
RE:	Project, # Notification of Determination of Non-Responsibility
Dear Sir/N	Aadam,
determina	concerns your bid for the City of Olympia, Washington, on the project. Upon review of your bid, City staff has made an initial tion that your proposal does not meet the bidder responsibility criteria for this project lowing reasons:
	e bid packet requires at (1)(a) that, <u>at the time of bid submittal</u> , the contractor must Your bid submittal failed
If you wis refer to the this determ 2016. Ple	h to submit additional information for re-consideration of this determination, please e procedure found in Section 1-02 of the Project bid packet. Any appeal of nination must be received by the City no later than p.m. on ase mark the package "NON-RESPONSIBILITY APPEAL" and deliver it to: City of Attn:, (Address).
Sincerely,	

** BIDDER NOTIFICATION **

FINAL DETERMINATION THAT BIDDER DOES NOT MEET RESPONSIBILITY CRITERIA

(DATE)
(CONTRACTOR NAME) (ADDRESS)
Sent via: Fax: 000.000.0000 Email: bidder@net
RE:Project #AA23 Bid Proposal Notification of Final Determination of Non-Responsibility
Dear:
This letter concerns the bid submitted by to the City of Olympia, Washington, for the above referenced project. After considering all of the information submitted, City Council made a final determination that you failed to meet the following supplemental bidder responsibility criteria for this project: • The contractor failed to meet Section 1-02.1(3) Completion of Similar Projects. Contractor has not successfully completed the installation of at least 2,000 linear feet of large diameter (36-inch diameter or larger) welded joint steel pipe during the five (5) year period immediately preceding the bid submittal deadline for this Project. The contractor did not list any similar projects;
• The contractor failed to meet Section 1-02.1(4) Experience of Contractor's Personnel. The field superintendent must have successfully supervised the installation of at least 2,000 linear feet of large diameter (36-inch diameter or larger) welded joint steel pipe during the five (5) year period immediately preceding the bid submittal deadline for this Project. The field superintendent's experience supervising the installation of large diameter welded joint steel pipe occurred more than five (5) years ago.
Council awarded the contract toat its meeting on As required by law, the City will not execute a contract for two days following your receipt of this notification.
Sincerely,
City Manager