

Email: Todd.long@oneatlas.com

May 13, 2025

ATLAS Technical Consultants
2450 Commerce Avenue, Ste. 100
Duluth, GA 30096

NOTICE OF AWARD

RFP No. 24-500676 Traffic Calming Program Study (One-Time Buy) Estimated Amount: \$80,000.00

Dear Mr. Long:

This confirms that the DeKalb County Board of Commissioners (BOC) at April 30, 2025, meeting acted to approve the contract award for the subject **RFP No. 24-500676 Traffic Calming Program Study (One Time Buy)** in accordance with your response to the subject Invitation to Bid (RFP).

A notice to proceed (NTP) meeting will be scheduled for a later date. Please work with Toneya B. Dawson, Procurement Agent, tbdawson@dekalbcountyga.gov, in providing the necessary documents to complete this transaction and in conjunction with the NTP Meeting. Immediately proceed to procure the **certificate of insurance (and have the insurer forward directly to the agent with all endorsements) and your current business license along with the following Attachments: B) Contractor Affidavit, C) Subcontractor Affidavit, D) Sub-subcontractor Affidavit (if applicable) and E) Certificate of Corporate Resolution**, in accordance with the terms and conditions of the RFP. The above-listed executed contract documents must be completed and returned to Toneya B. Dawson via email upon your receipt of this Notice of Award.

No work is to begin until you have received the Notice to Proceed (NTP) from the Procurement Manager of DeKalb County. No County department has the authority to authorize you to perform any work until the Notice to Proceed has been issued.

Sincerely,

Toneya B. Dawson
Procurement Agent
Department of Purchasing and Contracting

WM:tbd
Attachments: (4)
Attachment B, Contractor Affidavit
Attachment C, Subcontractor Affidavit
Attachment D, Sub-subcontractor Affidavit
Attachment E, Certificate of Corporate Resolution

LSBE Information

LSBEs: Corporate Environmental Risk Management (LSBE-DeKalb) % Participation: 10
Metro Traftx (LSBE-MSA) % Participation: 10

NOTE:

You are required to prepare separate sub-agreements between your company and the above LSBEs that you identified in your Bid for this project. The following language (terms and conditions) must be included in the LSBE sub-agreement:

- (1) The percentage (%)/and dollar amount of the agreement (this amount should be the same as documented on the Letter of Intent (LOI) included in your bid package.
- (2) The solicitation and contract number should also be incorporated into the document – i.e. “this sub agreement is in support of DeKalb County Contract #2000259 (to be provided upon execution).
- (3) Prime shall pay the LSBE Sub no later than seven (7) calendar days from prime contractor’s receipt of payment from DeKalb County.
- (4) **Substitution Language in place of termination clause –**
All requests for changes or substitutions of the subcontractors named in the notarized schedule of LSBE Participation shall be made in writing to the LSBE Review Panel and shall clearly and fully set forth the basis for the request, including documentary proof or affidavits of individuals, where necessary. The LSBE Review Panel will review the request and make a final decision. The facts supporting the request must not have been known nor reasonably should have been known by either party prior to the submission of the notarized Schedule of LSBE Participation. Post-award LSBE shopping is prohibited and may be cause for cancellation, rejection or other punitive remedies against the prime contractor.
- (5) The Prime/LSBE shall also incorporate a proposed “work schedule” that identifies the work to be completed by the LSBE according to the SOW (scope of work) through the term of the contract.

The sub-contractor agreement between your company and the LSBE must be sent to DekalbFirstLSBE@dekalbcountyga.gov for approval prior to scheduling the Notice to Proceed Meeting. **Any questions regarding the LSBE Sub-Agreement should be directed to Ms. Panya Dixon at pmdixon@dekalbcountyga.gov or call at 404.371.6331.** Also, copy Toneya B. Dawson on this communication tbdawson@dekalbcountyga.gov .

ATTACHMENT B

Contractor Affidavit under O.C.G.A. §13-10-91

By executing this affidavit, the undersigned Contractor verifies its compliance with O.C.G.A. §13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of DEKALB COUNTY has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. §13-10-91. Furthermore, the undersigned Contractor will continue to use the federal work authorization program throughout the Contract Term and the undersigned Contractor will contract for the physical performance of services in satisfaction of such contract only with Subcontractors who present an affidavit to the Contractor with the information required by O.C.G.A. §13-10-91. Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project

DeKalb County Georgia Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20__ in _____ (city), _____ (state).

By: _____
Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

Subscribed and Sworn before me on this the
_____ day of _____, 20 ____.

NOTARY PUBLIC

My Commission Expires:

ATTACHMENT C

Subcontractor Affidavit under O.C.G.A. § 13-10-91

By executing this affidavit, the undersigned Subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with _____ (insert name of Contractor) on behalf of DEKALB COUNTY, GEORGIA has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned Subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the Subcontractor with the information required by O.C.G.A. § 13-10-91. Additionally, the undersigned Subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the Contractor within five business days of receipt. If the undersigned Subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned Subcontractor must forward, within five business days of receipt, a copy of the notice to the Contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Subcontractor

Name of Project

DeKalb County Georgia Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20__ in _____ (city), _____ (state).

By: _____
Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

Subscribed and Sworn before me on this the
_____ day of _____, 20 ____.

NOTARY PUBLIC
My Commission Expires:

ATTACHMENT D

Sub-subcontractor Affidavit under O.C.G.A. § 13-10-91

By executing this affidavit, the undersigned sub-subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract for _____ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) and _____ (name of Contractor) on behalf of DEKALB COUNTY, GEORGIA has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to _____ (name of Subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to _____ (name of Subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Sub-subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Sub-subcontractor

Name of Project

DeKalb County Georgia Government

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20__ in _____ (city), _____ (state).

By: _____

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

Subscribed and Sworn before me on this the
_____ day of _____, 20 ____.

NOTARY PUBLIC

My Commission Expires: _____

ATTACHMENT E
CERTIFICATE OF CORPORATE RESOLUTION

I, _____, certify the following:

That I am the duly elected and authorized Secretary of _____ (hereinafter referred to as the “_____”), an _____ organized and incorporated to do business under the laws of the State of _____;

That said corporation has, through lawful resolution of the Board of Directors of the corporation, duly authorized and directed _____, in his official capacity as _____ of the corporation, to enter into and execute the following described agreement with DeKalb County, a political subdivision of the State of Georgia:

_____;

That the foregoing Resolution of the Board of Directors has not been rescinded, modified, amended, or otherwise changed in any way since the adoption thereof, and is in full force and effect on the date hereof.

IN WITNESS WHEREOF, I have set my hand and corporate seal;

This the _____ day of _____, 20____.

(CORPORATE
SEAL)

(Secretary)