

DeKalb County Department of Purchasing and Contracting

June 27, 2022

REQUEST FOR PROPOSALS (RFP) NO. 22-500620

FOR

INSURANCE BROKER SERVICES

Procurement Manager: Delois Robinson, CPPO

Phone: 404.427.1319

Email: drobinson@dekalbcountyga.gov

First LSBE June 29 and July 6, 2022 Mandatory DeKalb

Meeting: 4572 Memorial Drive, Decatur, Georgia 30032 Main

(Bidders must attend 1 meeting on either of Conference Room - A

the dates listed.)

(Meetings are held at 10:00 a.m. and 2:00 p.m.) Video Conference: Utilize the link supplied on our webpage labeled "DeKalb First LSBE Video

Meeting"

Pre-Proposal Conference: July 14, 2022 @ 2:00 PM ET

Zoom: https://dekalbcountyga.zoom.us/j/88156430192

Deadline for Submission of Questions: 5:00 P.M. ET, July 15, 2022

Deadline for Receipt of Proposals: 3:00 P.M. ET, July 28, 2022

THE RESPONSIBILITY FOR SUBMITTING A RESPONSE TO THIS RFP TO THE DEPARTMENT OF PURCHASING AND CONTRACTING OF DEKALB COUNTY GOVERNMENT ON OR BEFORE THE STATED DATE AND TIME WILL BE SOLELY AND STRICTLY THE RESPONSIBILITY OF THE RESPONDER.

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DeKalb County Department of Purchasing and Contracting

Maloof Administration Building, 1300 Commerce Drive, 2nd Floor, Decatur, Georgia 30030

June 27, 2022

REQUEST FOR PROPOSAL (RFP) No. 22-500620

FOR

INSURANCE BROKER SERVICES

DEKALB COUNTY, GEORGIA

I. INTRODUCTION

DeKalb County Government (the County) requests qualified individuals and firms with experience and who are licensed to do business in the state of Georgia as insurance brokers to submit proposals for risk management and insurance services.

The DeKalb County Board of Commissioners is interested in selecting one broker to support the County in handling its property and casualty insurance coverage. The services will include providing claims consulting, risk control consulting, vendor contract review and Owner Controlled Insurance Program (OCIP) consulting.

DeKalb County is a large, general-purpose county government located in the southeastern part of the Atlanta metropolitan area. The County has approximately 7,100 employees and current census estimates put the County's population at just over **764,000**. In addition to standard County services, DeKalb County also operates a large general aviation airport.

The Risk Management Division is responsible for administering insurance and loss prevention programs. Since 1983, the County has done all of its loss control operations in-house. The Risk Management Department of the County performs the following Risk Management Operational tasks in-house and will continue to do so:

- Claims (including the handling of workers compensation claims)
- Loss control
- Training
- Updating County Insurance Requirements for Vendors
- Administration

The Risk Management Division currently purchases the following insurance coverage:

(Also, a detailed list will be provided via Addendum)

- Property
- Crime
- Automobile Liability
- Airport and Aviation Liability
- Helicopter Hull and Liability Insurance
- Commercial General Liability
- Excess Liability
- Boiler & Machinery
- Excess Workers Compensation
- Cyber Liability

The Agreement term that the County is seeking is for five (5) years with no further renewals on **December 31, 2027,** unless extended by Change Order adopted and approved by the DeKalb County Governing Authority and the Contractor in accordance with the terms of this Contract.

A. The following Required Documents Checklist includes a list of attachments which **must** be completed and returned with Responder's technical proposal:

| Required Documents | Attachment |
|---|------------|
| Cost Proposal Form (1 copy, separate & sealed) | A |
| Proposal Cover Sheet | В |
| Contractor Reference and Release Form | С |
| Subcontractor Reference and Release Form | D |
| (make additional copies as needed) | |
| LSBE Documents – Exhibits A and B | E |
| Agent/Broker Questionnaire | F |
| Responder Affidavit | G |
| First Source Jobs Ordinance (with Exhibits 1 – 4) | Н |
| New Employee Tracking Form | |
| Exceptions to the Standard County Contract if | I |
| any | |
| Insurance Broker License | |

Failure to return these attachments may render your proposal non-responsive.

- B. The services shall commence within ten (10) calendar days after acknowledgement of receipt of written notice to proceed and shall be completed at the anticipated completion of OCIP 2025 and all other broker services during the term of this contract.
- C. The County reserves the right to make one (1) award or multiple awards.

II. SCOPE OF WORK

The selected broker will provide the County's Risk Management Division with the following services as needed or required. Work performed by the broker shall be subject to review and acceptance by the County's Representative.

A. Marketing and Implementing Insurance Programs

- 1. Market and implement the broadest coverage at the most reasonable cost for the County's various exposures.
- 2. Identify underwriters who will provide the coverage and the insurance programs desired.
- 3. No less than sixty (60) days prior to renewal of each coverage, develop the procurement plan for selecting the insurance underwriters. The procurement plan shall analyze the County's risk and the exposure, evaluate the vendor's experience, and guide the selection in a format conducive to obtaining the best rate/s.
- 4. Present specifications to the marketplace, request quotation for specified programs, respond to the underwriters' questions, and provide additional data, if requested.
- 5. Receive and analyze at least 3 to 5 underwriters' quotations, determine whether they meet the specifications, and whether the price is reasonable. Negotiate best terms, rates and conditions and make necessary refinements.
- 6. Submit and present the underwriting proposal submissions and recommendations to the County's Representative no less than Forty-Five (45) days prior to the policy expiration date. Submit declinations when fewer than 3 submissions are available. Include an analysis and recommendation of the most cost-effective approach. Review policies upon receipt to verify conformance to the specifications and negotiations, and request and monitor required changes.
- 7. Report all placements, binders, policies and endorsements as requested by the County in a timetable to avoid lapses in coverage.
- 8. Coordinate and provide the ongoing services between the County and the insurance carriers that are normally provided by the agent in a fully insured program.
- 9. Inform the County's Representative of all policy statuses throughout the marketing and contract implementation process.
- 10. Place coverage as requested for leased property, special events and other liability exposures at the county's discretion.

B. Risk Management Consulting Services

- 1. Assist County's Representative in the Risk Management Division with reviewing responder's bid packages and contractual documents, including any insurance requirements. This service will be requested on an "as needed" basis.
- 2. Assist in analyzing and evaluating bidders' responses in regard to insurance, and surety requirements. This service will be requested on an "as needed" basis.
- 3. Meet quarterly with County Representatives to advise, evaluate, and make recommendations in areas of safety loss control. Provide recommendations of loss control measures based on the County's claims history.
- 4. Issue required Certificates of Insurance to all insured parties.
- 5. Risk Assessment: Keep current on all exposure changes and suggest amendments to County policies as appropriate. Assist in the determination of the level of risk retention that is appropriate and recommend proper limits and coverage for exposures common to Counties of similar size.
- 6. Request modifications to the coverage from the underwriters as required. Monitor changes requested by the County.
- 7. Produce and verify the accuracy of bills, audits, and any other premium adjustments.
- 8. Analysis of potential insurers: The selected broker will identify and analyze all viable markets for DeKalb County's various commercial insurance needs. The broker shall also monitor the financial condition of insurers, including their ability to pay claims promptly and advise the County whenever any insurer is downgraded by a rating agency.
- 9. Risk management analysis: On occasion the selected broker shall review Certificates of Insurance provided by vendors to DeKalb County. The analysis shall include analysis of risk transfer options, including indemnity agreements with DeKalb County vendors and contractors; and analysis of risk financing options, (including self-insurance), tailoring of forms of coverage to provide proper protection and assuring that coverage gaps are brought to the attention of the County's Representative. The analysis shall be continual to account for changes in insurance markets, legal climates, while maintaining an understanding of DeKalb County's specific exposures and offering solutions for addressing market changes.
- 10. The selected broker shall prepare and maintain spreadsheet reports, transmittable in electronic form, detailing all property and flood exposures in a form satisfactory to the Risk Management Division and to commercial insurers. A similar spreadsheet detailing General Liability locations shall be maintained.

C. Claims Management and Procedures

- 1. Review of potential claims. Assistance in submitting to insurers as necessary.
- 2. Assistance in acquiring professional advice or expert opinions when necessary.
- 3. Review of claims submitted by the County both to our insurers and third-party insurers.
- 4. Monitor activity on any claims filed with insurance carriers.
- 5. Report "loss" data on an annual basis by providing detailed statements for each major policy (if there are any losses).

D. Owner Controlled Insurance Program (hereinafter referred to as OCIP)

- 1. Represent DeKalb County as directed in all negotiations with insurers, underwriters, insurance regulatory authorities or other parties with regard to OCIP. Estimated total construction cost are \$500,000,000 from 2018 through 2025.
- 2. Follow up with insurance carriers for timely issuance of policies and endorsements.

3. Program Design and Administrator Services:

- a. Develop OCIP pro formas outlining estimated contractor insurance costs, OCIP costs and resulting OCIP savings. Some percentage of Administrator fees will be at risk for projected savings.
- b. Prepare necessary OCIP materials, including Program Manuals, (if needed) and quarterly Management Reports.
- c. Assist in the resolution of any contractor or sub-contractor issues.
- d. Obtain any additional information regarding the performance of OCIP as requested by DeKalb County.
- e. Enforce the construction contract issuance documents with the assistance of the DeKalb County Representative to ensure that all contractors and subcontractors are compliant.
- f. Review and provide recommendations to DeKalb County on changes to enhance the OCIP.
- g. Conduct organizational meetings with DeKalb County, Contractors, and underwriters to review procedures. Plan, conduct, and record minutes of the quarterly OCIP meetings; ensure proper follow up of all items discussed.
- h. Work with Watershed to ensure that Contract Managers' procedures and manuals are current. Review procedures to assure that the current Contract Manager (herein after referred to as CM) Manual is included in Bid packages.
- i. Review estimated construction values and schedules.

- i. Obtain bid schedules for workflow considerations.
- k. Participate in all pre-bid conferences to explain OCIP procedures.
- 1. Answer contractor questions as needed.
- m. Collect bid deduction/s from contractors.
- n. Analyze and verify contractors bid deduction forms for original work and change orders as received; report back to Construction Manager/s what the final bid deductions are.
- o. Issue Certificate of Insurance (hereinafter referred to as COI) for each contractor/subcontractor enrolled in OCIP.
- p. Process enrollment forms and notify carrier of each new contractor/subcontractor that is enrolled.
- q. Check and distribute policies to the contractor/subcontractor when received.
- r. Collect and maintain COI for both, contractor & subcontractor.
- s. Attend pre-construction and/or orientation meetings as needed; notify insurance and claims personnel of enrolled contractors.
- t. Collect, monitor, and report on monthly payrolls.
- u. Attend monthly management meetings to review OCIP progress and issues in areas of administration, safety, and claims.
- v. Issue quarterly management reports including:
 - Status of enrolled contractors and sub-contractors
 - Report on contractor/subcontractor compliance with OCIP procedures.
 - Payroll status reports
 - Quarterly Financial reports which show OCIP savings
 - Claims report
- w. Handle annual renewal policies for OCIP
- x. Prepare and present annual stewardship report
- y. Review current close out procedures, recommend changes as needed.
- aa. Prepare a closeout stewardship management report to include financial performance and claims analyses; assist carrier in closeout of program (audits and premium).
- bb. Complete close out of all building projects.

- cc. Assist carrier in final payroll audits.
- dd. Maintain required information on all contractors and subcontractors not enrolled in OCIP.
- ee. Records must be retained and be retrievable for five years following the expiration of a particular policy's term.
- ff. The final reconciliation may not be completed until 12 months after the end of the program.
- gg. Develop proformas outlining estimated contractor insurance costs, OCIP costs and resulting OCIP savings. Five (5) percent of Administrator fees will be at risk for projected savings.

E. History

- 1. Schedule A "Schedule of Insurance", is herein provided to assist responders with historical information pertaining to the County's insurance coverage program. The following information is provided on Schedule A:
 - a) 2023 Property Schedule
 - b) 2023 Vehicle Listing
- 2. Aviation Exposure: The County operates DeKalb Peachtree Airport by providing security and maintenance to tenants who lease space for private aircraft. The County does not service the aircrafts or sell fuel. There are two (2) helicopters that the County owns that are used by police services for public safety purposes. They are not used for ambulance services.

III. PROPOSAL FORMAT

Responders are required to submit their proposals in the following format:

A. Cost Proposal

- 1. The cost proposal must be submitted in a separate, sealed envelope with the responder's name and "Cost Proposal for Request for Proposals No. 22-500620 for Insurance Broker Services" on the outside of the envelope.
- 2. The sealed envelope containing the cost proposal is requested to be included in the sealed package containing the technical proposal.

- 3. DO NOT INCLUDE FEES OR COSTS IN ANY AREA OUTSIDE OF THIS COST PROPOSAL. Including fees in any area outside of the Cost Proposal in its separate, sealed envelope shall result in Responder's proposal being deemed non-responsive.
- 4. Responders are required to submit their costs on Attachment A, Cost Proposal Form. Responder shall not alter the cost proposal form.

B. Technical Proposal

DO NOT INCLUDE ANY COSTS OF ANY KIND IN THE TECHNICAL PROPOSAL OR ON THE DISCS CONTAINING THE TECHNICAL PROPOSAL.

- 1. Technical Proposals must be submitted in a sealed envelope(s) or box(es) with the responder's name and "Request for Proposals No. 22-500620 for Insurance Broker Services" on the outside of each envelope or box.
- 2. Responder shall complete Attachment B, Proposal Cover Sheet, and include this as the first page of the technical proposal.

3. Technical Approach:

- a. Responders are required to describe the procedures and methods that will achieve the required outcome of the project as specified herein:
- b. Include a listing of the County's responsibilities and the Responder's responsibilities required to complete the project; and
- c. Provide a project schedule at the task level starting with the receipt of the Notice to Proceed and ending with project completion.
- d. Complete product information, including descriptive literature, shall be included with the response in order to substantiate that the service meets the specified minimum requirements.

4. <u>Project Management:</u>

- a. Describe how the project will be organized and managed;
- b. Describe progress reporting procedures for the project;
- c. Include the anticipated use of subcontractors or vendors; and
- d. Describe the resources necessary to accomplish the purpose of the project.
- e. Describe the ability to meet insurance consulting needs such as, Exposure Identification, Loss Frequency and Severity Forecasts, Property Valuation; Establish Maximum Foreseeable Loss and Probable Maximum Loss estimates; Risk Loss Control Services, Claims Administration, Access to Quality Major Markets and Construction Wrap-up Services.

5. Personnel:

- a. Identify the individuals who will be part of the project team
- b. Include any outside personnel, such as subcontractors; and
- c. Provide detailed resumes of team members and subcontractors who will be directly working on the project.
- d. Include experience of Broker Account Team, including support staff, size of Agency and how these line up to meet the County's needs. Describe experience in the following areas;
 - Exposure Identification
 - Loss Frequency and Severity Forecasts
 - Property Valuation
 - Establish Maximum Foreseeable Loss "MLF" and Probable Maximum Loss "PML" estimates
 - Risk and Loss Control Services
 - Claims Administration
 - Access to Quality Major Markets and Construction Wrap-up Services

6. Organizational Qualifications:

- a. Describe Responder's experience, capabilities and other qualifications for this project;
- b. How many years has Responder operated under current company name?
- c. Has Responder ever been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency from doing business with the Federal Government?
- d. Responding firms shall show evidence of providing Insurance Broker services for at least five (5) years and identify a minimum of five (5) governmental clients on the enclosed Agent/Broker Questionnaire provided as Attachment F. The selection of the Insurance Broker shall be based upon a comparative analysis of the following professional qualifications. Responders shall submit a Statement of Qualifications in the following format:
- e. General description of the firm including company history, size of company, affiliations with any other firms, experience with any public agencies of like size.
- f. Include a copy of your firm's annual report.
- g. Include an audited financial statement for the last three (3) years.
- h. Include references by submitting the Reference Form herein provided as Attachment C.
- i. Submit responses to the "Agent/Broker Questionnaire" provided as Attachment F.
- j. Provide a copy of current license/s to operate as an insurance broker or agent in the State of Georgia from the Georgia Office of Insurance and Safety Fire Commissioner.

7. Financial Responsibility:

Responder must provide financial statements for the last three (3) years that evidences the responder's financial capabilities to perform the statement of work. (Audited statements are

preferable but a minimum of balance sheet, income statement and cash flow statement may be accepted.) The County will not accept a URL link to this information. Provide year of incorporation (if applicable).

8. References:

- a. Responder shall provide three (3) references for projects similar in size and scope to the project specified herein using the Reference and Release Form attached hereto as Attachment C.
- b. Provide three (3) references for each subcontractor proposed as a part of the project team. The references shall be for the same or similar types of services to be performed by the subcontractor (including LSBE-DeKalb and LSBE-MSA firms) on projects similar in size and scope to the project outlined in this RFP. Use Attachment D, Subcontractor Reference and Release Form. Make additional copies as needed.
- 9. Provide the following information: Are you a DeKalb County Firm? Yes/No.

C. DeKalb First Ordinance

- 1. It is the objective of the Chief Executive Officer and Board of Commissioners of DeKalb County to provide maximum practicable opportunity for all businesses to participate in the performance of government contracts. The current DeKalb County List of Certified Vendors may be found on the County website at http://www.dekalbcountyga.gov/purchasing/.
- 2. It is required that all responding Responders attend the mandatory LSBE meeting within two-weeks of the solicitation's advertisement, and comply, complete and submit all LSBE forms with the Responder's response to remain responsive. Attendance can be in person, via video conference and teleconference. Video conferencing is available through Skype/Lync. Instructions for attendance via video conference can be found on the County's website at https://www.dekalbcountyga.gov/purchasing-contracting/dekalb-first-lsbe-program.
- 3. For further details regarding the DeKalb First Local Small Business Enterprise Ordinance, contact the LSBE Program representative, at DeKalbFirstLSBE@dekalbcountyga.gov.

D. Federal Work Authorization Program Contractor and Subcontractor Evidence of Compliance

All qualifying contractors and subcontractors performing work with DeKalb County, Georgia must register and participate in the federal work authorization program to verify the work eligibility information of new employees. Successful responder(s) shall be required to register and participate in the federal work authorization program, which is a part of Attachment I, Sample County Contract. In order for a Proposal to be considered, it is **mandatory** that the Responder Affidavit, Attachment G, be completed and submitted with responder's proposal.

IV. CRITERIA FOR EVALUATION

The following evaluation criteria and the maximum points stated below will be used as the basis for the evaluation of proposals.

- A. Cost (10 points)
- **B.** Technical Approach to the Project (25 points)
- C. Project Management (20 points)
- **D.** Personnel and Organizational Qualifications (20 points)
- E. Financial Responsibility (10 points)
- F. References (5 points)
- **G.** Local Small Business Enterprise Participation (10 points)
- **H.** Optional Interview (10 points) bonus (if applicable)

V. CONTRACT ADMINISTRATION

A. Standard County Contract

The attached sample contract is the County's standard contract document (see Attachment I), which specifically outlines the contractual responsibilities. All responders should thoroughly review the document prior to submitting a proposal. Any proposed revisions to the terms or language of this document must be submitted in writing with the responder's response to the request for proposals. Since proposed revisions may result in a proposal being rejected if the revisions are unacceptable to the County, responders should review any proposed revisions with an officer of the firm having authority to execute the contract. No alterations can be made in the contract after award by the Board of Commissioners.

B. Submittal Instructions

One (1) original Technical Proposal stamped "Original" and RFP No. 22-500620, Broker Insurance Services, and one (1) flash drive containing an identical copy of the Technical Proposal (do not include the Cost Proposal on the discs); and one (1) original Cost Proposal (see Section III.A. for additional instructions regarding submittal of Cost Proposal) must be submitted to the following address no later than 3:00 p.m. on Thursday, July 28, 2022.

DeKalb County Department of Purchasing and Contracting The Maloof Center, 2nd Floor 1300 Commerce Drive Decatur, Georgia 30030

Proposals must be clearly identified on the outside of the packaging with the responder's name and "Request for Proposals No. 22-500620 for Insurance Broker Services" on the outside of the envelope(s) or box(es).

It is the responsibility of each Responder to ensure that its submission is received by 3:00 p.m. on the proposal due date. The time/date stamp clock located in the Department of Purchasing & Contracting shall serve as the official authority to determine lateness of any response. The RFP opening time shall be strictly observed. Be aware that visitors to our offices will go through a security screening process upon entering the building. Responders should plan enough time to ensure that they will be able to deliver their submission prior to our deadline. Late submissions, for whatever reason, will not be evaluated. Responders should plan their deliveries accordingly. Telephone or fax bids will not be accepted.

C. Pre-Proposal Conference

A pre-proposal conference will be held at 2:00 p.m. on the 14th day of July 2022 via ZOOM: https://dekalbcountyga.zoom.us/j/88156430192. Interested responders are strongly encouraged to attend and participate in the pre-proposal conference. For information regarding the pre-proposal conference, please contact **Delois Robinson** at 404.427.1319 or <a href="mailto:dream.graph.g

D. Questions

All questions concerning the Project and requests for interpretation of the Contract may be asked and answered at the pre-bid conference; however, oral answers are not authoritative. Questions must be submitted to **Delois Robinson**, via email to **drobinson@dekalbcountyga.gov**, no later than close of business on **Friday**, **July 15**, **2022** @ **5:00 pm EST**. Questions and requests for interpretation received by the Department of Purchasing and Contracting after this date will not receive a **response or be the subject of addenda**.

E. Acknowledgment of Addenda

Addenda may be issued in response to changes in the RFP. It is the responsibility of the responder to ensure awareness of all addenda issued for this solicitation. Please acknowledge the addenda and submit to the Department of Purchasing and Contracting as requested. Responder may call Delois Robinson via email to drobinson@dekalbcountyga.gov to verify the number of addenda prior to submission. Addenda issued for this project may be found on DeKalb County's website, www.dekalbcountyga.gov/formalbids.

F. Proposal Duration

Proposals submitted in response to this RFP must be valid for a period of One Hundred Twenty (120) days from proposal submission deadline and must be so marked.

G. Project Director/Contract Manager

The County will designate a Project Director/Contract Manager to coordinate this project for the County. The successful responder will perform all work required pursuant to the contract under the direction of and subject to the approval of the designated Project Director/Contract Manager. All issues including, payment issues, shall be submitted to the Project Director/Contract Manager for resolution.

H. Expenses of Preparing Responses to this RFP

The County accepts no responsibility for any expenses incurred by the responders to this RFP. Such expenses are to be borne exclusively by the responders.

I. Georgia Open Records Act

Without regard to any designation made by the person or entity making a submission, DeKalb County considers all information submitted in response to this invitation or request to be a public record that will be disclosed upon request pursuant to the Georgia Open Records Act, O.C.G.A. §50-18-70 et seq., without consulting or contacting the person or entity making the submission, unless a court order is presented with the submission. You may wish to consult an attorney or obtain legal advice prior to making a submission.

J. First Source Jobs Ordinance

First Source Jobs Information

The First Source Ordinance is a public regulation which requires contractors and beneficiaries of eligible DeKalb County projects to make a good faith effort to hire fifty (50) percent of all jobs using the First Source Registry. Beneficiaries are immediate recipients of county grants or community development block funds administered by the county of at least \$50,000. Contractors include an individual or entity entering into any type of agreement with the county, funded in whole or in part with county funds. WorkSource DeKalb (WSD) maintains the First Source Registry, comprised of qualified and trained DeKalb County residents. Business Solutions Unit (BSU) is available to assist the employer with selecting the most qualified candidate by using the First Source Registry to meet the company's hiring needs. WSD manages the First Source program through the Business Solutions Unit by assigning a specific BSU Specialist. The First Source process is conducted similarly to the BSU business service request process. The BSU Specialist works closely with employers using TALEO and BSU processes to ensure the hiring needs of the employers are met.

For more information on the First Source Jobs Ordinance requirement, please contact WorkSource DeKalb at www.dekalbworksource.org or 404-687-3400.

K. Business License

Responder shall submit a copy of its current, valid business license with its proposal or upon award. If the responder is a Georgia corporation, responder shall submit a valid county or city business license. If the responder is not a Georgia corporation, responder shall submit a certificate of authority to transact business in the state of Georgia and a copy of its valid business license issued by its home jurisdiction. If responder holds a professional certification which is licensed by the state of Georgia, then responder shall submit a copy of its valid professional license. Any license submitted in response to this requirement shall be maintained by the responder for the duration of the contract.

L. Ethics Rules

Bidders are subject to the Ethics provision within the DeKalb County Purchasing Policy; the Organizational Act, Section 22A, the Code of DeKalb County; and the rules of Executive Order 2014-4. Any violations will be addressed, pursuant to these policies and rules.

To the extent that the Organizational Act, Section 22A, the Code of DeKalb County, and the rules of Executive Order 2014-4 allow a gift, meal, travel expense, ticket, or anything else of value to be purchased for a CEO employee by a contractor doing business with the County, the contractor must provide written disclosure, quarterly, of the exact nature and value of the purchase to the Chief Integrity Officer, if created, or the Finance Director or his/her designee. Every contractor conducting business with the County will receive a copy of these ethical rules at the time of execution of the contract.

M. Right to Audit

The County shall have the right to audit all books and records, including electronic records, relating or pertaining to this contract or agreement, including but not limited to all financial and performance related records, property, and equipment purchased in whole or in part with County funds and any documents or materials which support those records, kept under the control of the Contractor, including but not limited to those kept by the Contractor's employees, agents, assigns, successors and subcontractors. The County also has the right to communicate with Contractor's employees related to the audited records.

The Contractor shall maintain such books and records, together with such supporting or underlying documents and materials, for the duration of this contract and for seven (7) years after termination or expiration, including any and all renewals thereof. The books and records, together with supporting documents and materials shall be made available, upon request to the County or its designee, during normal business hours at the Contractor's office or place of business. In the event that no such location is available, then the books, records, and supporting documents shall be made available for audit at a time and location which is convenient for the County.

N. Cooperative Agreement

The County through the Department of Purchasing and Contracting may permit piggybacks to this contract from other city, county, local authority, agency, or board of education if the vendor will extend the same prices, terms, and conditions to the city. Piggybacking shall only be available where competition was used to secure the contract and only for a period of 12-months following entry, renewal or extension of the contract. This provision shall not apply to any contract where otherwise prohibited or mandated by state law.

VI. AWARD OF CONTRACT

An evaluation committee will review and rate all proposals and shall determine if interviews are necessary.

If interviews are conducted, firms will be scheduled for an oral presentation to the evaluation committee, not to exceed one hour's duration, to respond to questions from the evaluation committee relevant to the firm's proposal.

The evaluation committee will make its recommendation for award to the DeKalb County Board of Commissioners, who will make the final decision as to award of contract.

THE COUNTY RESERVES THE RIGHT TO REJECT ANY AND ALL PROPOSALS, TO WAIVE INFORMALITIES, AND TO RE-ADVERTISE.

Sincerely,

Delois Robinson, MBA, CPPO

Procurement Manager

Department of Purchasing and Contracting

Attachment A: Cost Proposal Form Attachment B: Proposal Cover Sheet

Attachment C: Contractor Reference and Release Form

Attachment D: Subcontractor Reference and Release Form

Attachment E: LSBE Opportunity Tracking Form

Attachment F: Agent/Broker Questionnaire

Attachment G: Responder Affidavit

Attachment H: First Source Jobs Ordinance Information with Exhibits 1-4

Attachment I: Sample County Contract

ATTACHMENT A

COST PROPOSAL FORM

(consisting of 2 pages)

INSURANCE BROKER SERVICES

Responder: Please complete the attached pages of the Cost Proposal Form and return them with this cover page. The cost proposal must be submitted in a separate, sealed envelope with the Responder's name and "Request for Proposals No. 22-500620, Insurance Broker Services" clearly identified on the outside of the envelope.

By signing this page, Responder acknowledges that he has carefully examined and fully understands the Contract, Scope of Work, and other attached documents, and hereby agrees that if his proposal is accepted, he will contract with DeKalb County according to the Request for Proposal documents.

| Please provide the following information: | |
|---|-----------------------------|
| Name of Firm: | |
| Address: | |
| Contact Person Submitting Proposal: | |
| Title of Contact Person: | |
| Telephone Number: | |
| Fax Number: | |
| E-mail Address: | |
| | |
| | Signature of Contact Person |
| | Title of Contact Person |

ATTACHMENT A

COST PROPOSAL FORM

Responder: State a FIRM FIXED LUMP SUM for all costs, direct and indirect, administrative costs and all things necessary for **INSURANCE BROKER SERVICES**.

| Year 1: | (\$ |
|---|--|
| Year 1:(State amount in writing on this line) | (\$(In figures) |
| Year 2: | (\$(In figures) |
| Year 2:(State amount in writing on this line) | (In figures) |
| Year 3: | (\$(In figures) |
| Year 3:(State amount in writing on this line) | (In figures) |
| Year 4:(State amount in writing on this line) | (\$(In figures) |
| (State amount in writing on this line) | (In figures) |
| Year 5: | (\$(In figures) |
| Year 5: (State amount in writing on this line) | (In figures) |
| TOTAL: | |
| State your firms RATE for <u>annual</u> OWNER COPROGRAM (OCIP) SERVICE FEES in accord RFP in Section II. D found on pages 5 through 9. below. The County estimates a total of \$500,000, through 2025. | dance with the Scope of Work Do not provide a dollar an |

each year. The proposed rate may not be adjusted or changed after contract award.

ATTACHMENT B

PROPOSAL COVER SHEET

NOTE: Read all instructions, conditions and specifications in detail before completing this Request for Proposal.

| Please complete and include this cover sheet with you | r technical pro | posal. | | |
|--|---|-----------------|----------|--|
| Company Name | | Federal Tax ID# | | |
| Complete Primary Address | County | City | Zip Code | |
| Mailing Address (if different) | City | State | Zip Code | |
| Contact Person Name and Title | Telephone Number (include area code) | | | |
| Email Address | Fax Number (include area code) | | | |
| Company Website Address | Type of Organization (check one) | | | |
| | ☐ Corporation ☐ Joint Venture ☐ Proprietorship ☐ Government | | | |
| Proposals for RFP No. 22-50062, Insurance Broker Services described herein will be received in the Purchasing & Contracting Department, Room 2 nd Floor, The Maloof Center, 1300 Commerce Drive, Decatur, Georgia 30030 on Thursday, July 28, 2022 until 3:00 p.m. (EST). Proposals shall be marked in accordance with the RFP, Section V.B. CAUTION: The Decatur Postmaster will not deliver certified or Special Delivery Mail to specific addresses within DeKalb County Government. When sending bids or time sensitive documents, you may want to consider a courier that will deliver to specific addresses. | | | | |
| Proposal Cover Sheet should be signed by a representative of Proposer with the authority to bind Proposer to all terms, conditions, services, and financial responsibilities in the submitted Proposal. | | | | |
| Authorized Representative Signature(s) | Tit | le(s) | | |
| Type or Print Name(s) | Da | te | | |

ATTACHMENT C CONTRACTOR REFERENCE AND RELEASE FORM

List below at least three (3) references for the **PRIME**, including company name, contact name, address, email address, telephone numbers and contract period who can verify your experience and ability to perform the type of service listed in the solicitation.

| Company Name | Contract 1 | Contract Period | | | |
|--|------------|--------------------------------------|----------|--|--|
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Num | Fax Number (include area code) | | | |
| Project Name | <u> </u> | | | | |
| Company Name | Contract 1 | Contract Period | | | |
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Num | Fax Number (include area code) | | | |
| Project Name | I | | | | |
| Company Name | Contract 1 | Period | | | |
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Numl | Fax Number (include area code) | | | |
| Project Name | | | | | |
| REFERENCE CHECK You are authorized to contact the references provide | | | | | |
| Signed(Authorized Signature of Prime Proposer) | Title | | | | |
| (Authorized Signature of Prime Proposer) Company Name | | | | | |

ATTACHMENT D SUBCONTRACTOR REFERENCE AND RELEASE FORM

List below at least three (3) references for the **LSBE**, including company name, contact name, address, email address, telephone numbers and contract period who can verify your experience and ability to perform the type of service listed in the solicitation.

| Company Name | Contract P | Contract Period | | | |
|--|------------------|--------------------------------------|----------|--|--|
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Numb | Fax Number (include area code) | | | |
| Project Name | | | | | |
| Company Name | Contract P | Contract Period | | | |
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Numb | Fax Number (include area code) | | | |
| Project Name | | | | | |
| Company Name | Contract P | Contract Period | | | |
| Contact Person Name and Title | Telephone | Telephone Number (include area code) | | | |
| Complete Primary Address | City | State | Zip Code | | |
| Email Address | Fax Numb | Fax Number (include area code) | | | |
| Project Name | | | | | |
| REFERENCE CHI You are authorized to contact the references pro | ECK RELEASE STAT | | | | |
| Signed(Authorized Signature of LSBE Prop | Title | | | | |
| | | | | | |
| Company Name | Date | | | | |

ATTACHMENT E DEKALB FIRST LSBE INFORMATION WITH EXHIBITS A – B

SCHEDULE OF LOCAL SMALL BUSINESS ENTERPRISE PARTICIPATION OPPORTUNITY TRACKING FORM

The Chief Executive Officer and the Board of Commissioners of DeKalb County believe that it is important to encourage the participation of small and local businesses in the continuing business of County government; and that the participation of these types of businesses in procurement will strengthen the overall economic fabric of DeKalb County, contribute to the County's economy and tax base, and provide employment to local residents. Therefore, the Chief Executive Officer and the Board of Commissioners have made the success of local small businesses a permanent goal of DeKalb County by implementing the DeKalb First Local Small Business Enterprise Ordinance.

PROVISIONS OF DEKALB FIRST LOCAL SMALL BUSINESS ENTERPRISE (LSBE) ORDINANCE

| Percentage of LSBE Participation Required |
|---|
| 20% of Total Award |

| Certification Designation | Request For Proposals |
|----------------------------|----------------------------|
| | (RFP) |
| LSBE Within DeKalb (LSBE- | Ten (10) Preference |
| DeKalb) | Points |
| LSBE Outside DeKalb (LSBE- | Five (5) Preference Points |
| MSA) | |
| Demonstrated GFE | Two (2) Preference Points |

Certified Local Small Business Enterprises (LSBEs) located within DeKalb County and prime contractors utilizing LSBEs that are locally-based inside DeKalb County shall receive ten (10) points in the initial evaluation of their response to any Request for Proposal. Certified LSBEs located outside of DeKalb County but within the nine (9) County Metropolitan Statistical Area (MSA) consisting of Cherokee, Clayton, Cobb, Douglas, Fayette, Fulton, Gwinnett, Henry and Rockdale Counties shall receive five (5) points in the initial evaluation of their response to any Request for Proposal. Prime Contractors who demonstrate sufficient good faith efforts in accordance with the requirements of the ordinance shall be granted two (2) points in their initial evaluation of responses to any Request for Proposal. Pro-rated points shall be granted where a mixture of LSBE-DeKalb and LSBE MSA firms are utilized. Utilization of each firm shall be based upon the terms of the qualified sealed solicitation.

Prime Contractor(s) deemed responsible and remains responsive to an Invitation to Bid (ITB) because they are either a certified LSBE-DeKalb or LSBE-MSA firm or has obtained 20% participation of an LSBE-DeKalb or LSBE-MSA firm, submits the lowest bid price shall be deemed the lowest, responsive and responsible bidder.

Prime Contractor(s) deemed responsible and remains responsive to an Invitation to Bid (ITB) and documented good faith efforts, submits a lower bid price than a Prime Contractor that achieved 20% LSBE participation, or otherwise required benchmark, then the Prime Contractor who actually met the

benchmark will be given the opportunity to match the lowest bid price of the Prime Contractor who only made good faith efforts. Prime Contractor(s) who choose **not** to match the lowest bid price, then the Prime Contractor who made the good faith efforts will be deemed the lowest, responsive and responsible bidder.

For all qualified sealed solicitations, the Director of Purchasing and Contracting, DeKalb County Government, shall determine if the bidder/proposer has included written documentation showing that at least twenty percent (20%) of the total contract award will be performed by a certified LSBE. This written documentation shall be in the form of a notarized Schedule of LSBE Participation (Attached hereto as "Exhibit A".) For all contracts, a signed letter of intent from all certified LSBEs describing the work, material, equipment and/or services to be performed or provided by the LSBE(s) and the agreed upon percentage shall be due with the bid or proposal documents and included with "Exhibit A". The certified vendor list establishes the group of Certified LSBE's from which the bidder/proposer must solicit subcontractors for LSBE participation. This list can be found on our website http://www.dekalbcountyga.gov/purchasing-contracting/about-purchasing-and-contracting or obtained from the Special Projects LSBE Program team.

Prime Contractors failing to meet the LSBE benchmark must document and demonstrate Good Faith Efforts in accordance with the attached "Checklist for Good Faith Efforts" portion of "Exhibit A." The notarized Schedule of LSBE Participation shall be due and submitted with each bid or proposal. Failure to achieve the LSBE benchmark or demonstrate good faith efforts shall result in a bid or proposal being rejected. Prime Contractors that fail to attend the mandatory LSBE meeting in person or via video conference shall mean that the Prime Contractor has not demonstrated sufficient good faith efforts and its bid or proposal if submitted, shall be deemed non-responsive without any further review.

Upon award, Prime Contractors are required to submit a report detailing LSBE Sub-Contractor usage with each request for payment and not less than on a monthly basis. Prime Contractors shall ensure that all LSBE sub-contractors have been paid within seven (7) days of the Prime's receipt of payment from the County. Failure to provide requested reports/documentation shall constitute a material breach of contract, entitling the County to terminate the Contract for default or pursue other remedies. LSBE subcontractors must confirm payments received from the Prime(s) for each County contract they participate in.

For eligible bids/proposals valued over \$5,000,000.00, the Mentor-Protégé provision of the Ordinance shall apply. Prime Contractors must agree to become mentors and take on an LSBE protégé in an effort to enhance the potential of future LSBEs. Qualifying projects shall be performed by both Mentor and Protégé through a subcontract between both parties. This requirement is in addition to all other applicable sections of the DeKalb First Ordinance. Please review the ordinance, section 2-214 or contact the LSBE Program Representative for detailed information regarding this initiative.

EXHIBIT A

SCHEDULE OF DEKALB FIRST LOCAL SMALL BUSINESS ENTERPRISE PARTICIPATION OPPORTUNITY TRACKING FORM

As specified, Bidders and Proposers are to present the details of LSBE participation below: **PRIME** BIDDER/PROPOSER SOLICITATION NUMBER: 22-500620 TITLE OF UNIT OF WORK – Insurance Broker Services My firm, as the prime bidder/proposer on this unit of work, is a certified (check all that apply): 1. LSBE-DeKalb LSBE-MSA If you are a Certified LSBE-DeKalb or MSA, please indicate below the percentage of that 2. your firm will carry out directly: ______. If the prime bidder/proposer is a joint venture, please describe below the nature of the joint 3. venture and level of work and percentage of participation to be provided by the LSBE-DeKalb or MSA joint venture firm. 4. List the LSBE-DeKalb or MSA subcontractors and/or firms (including suppliers) to be utilized in of this contract, if awarded. No changes can be made in the subcontractors listed below without the prior written approval of the County. Please attach a signed letter of intent from all certified LSBEs describing the work, materials, equipment or services to be performed and/or provided and the agreed upon percentage of work to be performed. A Letter of Intent form is attached hereto as "Exhibit B". Name of Company Address Telephone Fax Contact Person Indicate certification status and attach proof of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed

Percentage of work to be performed

| Telephone Fax Contact Person Indicate certification status and attach proof of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed |
|--|
| Fax Contact Person Indicate certification status and attach proof of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed |
| Contact Person Indicate certification status and attach proof of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed |
| Indicate certification status and attach proof of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed |
| of certification: LSBE-DeKalb/LSBE-MSA Description of services to be performed |
| LSBE-DeKalb/LSBE-MSA Description of services to be performed |
| Description of services to be performed |
| |
| |
| Percentage of work to be performed |
| |
| Name of Company |
| Address |
| Telephone |
| Fax |
| Contact Person |
| Indicate certification status and attach proof |
| of certification: |
| LSBE-DeKalb/LSBE-MSA |
| Description of services to be performed |
| Percentage of work to be performed |
| • |
| Name of Company |
| Address |
| Telephone |
| Fax |
| Contact Person |
| Indicate certification status and attach proof |
| of certification: |
| LSBE-DeKalb/LSBE-MSA |
| Description of services to be performed |
| Percentage of work to be performed |

Please attach additional pages, if necessary.

EXHIBIT A, CONT'D

<u>DEKALB COUNTY</u> <u>CHECKLIST FOR GOOD FAITH EFFORTS</u>

A bidder/proposer that does not meet the County's LSBE participation benchmark is required to submit documentation to support all "Yes" responses as proof of "good faith efforts." Please indicate whether or not any of these actions were taken:

| | Yes | No | Description of Actions |
|----|-----|----|---|
| 1. | | | Prime Contractors shall attend a MANDATORY LSBE Meeting in person or via video conference within two-weeks of advertisement of the solicitation. |
| 2. | | | Provide a contact log showing the company's name, contact person, address, email and contact number (phone or fax) used to contact the proposed certified subcontractors, nature of work requested for quote, date of contact, the name and title of the person making the effort, response date and the percentage of work. |
| 3. | | | Provide interested LSBEs via email, of any new relevant information, if any, at least 5 business days prior to submission of the bid or proposal. |
| 4. | | | Efforts made to divide the work for LSBE subcontracting areas likely to be successful and to identify portions of work available to LSBEs consistent with their availability. Include a list of divisions of work not subcontracted and the corresponding reasons for not including them. The ability or desire of a bidder/proposer to perform the contract work with its own organization does not relieve it of the responsibility to make good faith efforts on all scopes of work subject to subcontracting. |
| 5. | | | Efforts were made to assist potential LSBE subcontractors meet bonding, insurance, or other governmental contracting requirements. Where feasible, facilitating the leasing of supplies or equipment when they are of such a specialized nature that the LSBE could not readily and economically obtain them in the marketplace. |
| 6. | | | Communication via email or phone with DeKalb First Program Staff seeking assistance in identifying available LSBEs. Provide DeKalb First Program Staff representative name and title, and date of contact. |
| 7. | | | For all contracts, a signed letter of intent from all certified LSBEs describing the work, materials, equipment or services to be performed or provided by the LSBE(s) and the agreed upon LSBE participation percentage shall be due with the bid or proposal documents. |
| 8. | | | Other Actions, to include Mentor/Protégé commitment for solicitations \$5M and above (specify): |

| Please explain all "no" answers above (by number): | | | | | | | |
|--|---|--|--|--|--|--|--|
| | _ | | | | | | |
| | | | | | | | |

This list is a guideline and by no means exhaustive. The County will review these efforts, along with attached supporting documents, to assess the bidder/proposer's efforts to meet the County's LSBE Participation benchmark. If you require assistance in identifying certified, bona fide LSBEs, please contact the Purchasing and Contracting Department - DeKalb First Program at DeKalbFirstLSBE@dekalbcountyga.gov.

EXHIBIT A, CONT'D

DEKALB FIRST LOCAL SMALL BUSINESS ENTERPRISE SCHEDULE OF PARTICIPATION OPPORTUNITY TRACKING FORM

Bidder/Proposer Statement of Compliance

Bidder(s)/Proposer(s) hereby state that they have read and understand the requirements and conditions as set forth in the objectives and that reasonable effort were made to support the County in providing the maximum practicable opportunity for the utilization of LSBEs consistent with the efficient and economical performance of this contract. The Bidder and any subcontractors shall file compliance reports at reasonable times and intervals with the County in the form and to the extent prescribed by the Director of DeKalb County Purchasing and Purchasing and Contracting Department. Compliance reports filed at such times as directed shall contain information as to the employment practices, policies, programs and statistics of Contractors and their subcontractors.

1. **Non-Discrimination Policy**

- During the performance of this agreement, Contractor agrees to conform to the following Non-Discrimination Policy adopted by the County.
- b. Contractor shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, or disability. The Contractor will take action to ensure that applicants are employed, and the employees are treated during employment without regard to their race, color, religion, sex, national origin, or disability. Such action shall include, but not be limited to, the following:
 - (1) Employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Contractor agrees to post in conspicuous places available to employees and applicants for employment, notices to be provided setting forth provisions of this non-discrimination clause.
 - (2) Contractor shall, in all solicitations or advertisements for employees placed by or on behalf of Contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, or disability.
- c. Without limiting the foregoing, Contractor shall not discriminate on the basis of disability in the admission or access to, or treatment or employment in, the programs and activities, which form the subject of the contract. The Contractor will take action to ensure that applicants for participation in such programs and activities are considered without regard to disability. Such action shall include, but not be limited to, the following:
 - (1) Contractor agrees to post in conspicuous places available to participants in its programs and activities notices to be provided setting forth the provisions of this non-discrimination clause.

(2) Contractor shall, in all solicitations or advertisements for programs or activities, which are the subject of the contract, state that all qualified applicants will receive consideration for participation without regard to disability.

2. Commitment

The undersigned certifies that he/she has read, understands, and agrees to be bound by the bid specifications, including the accompanying Exhibits and other terms and conditions of the Invitation to Bid and/or Request for Proposal regarding LSBE utilization. The undersigned further certifies that he/she is legally authorized by the bidder or responder to make the statements and representations in Exhibit A and that said statements and representations are true and correct to the best of his/her knowledge and belief. The undersigned will enter into formal agreement(s) with the LSBE(s) listed in this Exhibit A, which are deemed by the owner to be legitimate and responsible LSBEs. Said agreement(s) shall be for the work and contract with the Prime Contractor. The undersigned understands and agrees that if any of the statements and representations are made by the Bidder knowing them to be false, or if there is a failure of the successful Bidder (i.e., Contractor) to implement any of the stated agreements, intentions, objectives, goals and commitments set forth herein without prior approval of the County, then in any such events the contractor's act or failure to act, as the case may be, shall constitute a material breach of contract, entitling the County to terminate the Contract for default. The right to so terminate shall be in addition to, and not in lieu of, any other rights and remedies the County may have for other defaults under the Contract. Additionally, the Contractor will be subject to the loss of any future contract awards by the County for a period of one year.

| Firm Name (Please Print): | |
|--|-------|
| Firm's Officer: | |
| (Authorized Signature and Title Required) | Date |
| Sworn to and Subscribed to before me this day of | , 201 |
| Notary Public My Commission Expires: | |

EXHIBIT B

LETTER OF INTENT TO PERFORM AS A SUBCONTRACTOR PROVIDING MATERIALS OR SERVICES

| | PROVIDING MATERIALS OR SERVICES | | | |
|---------------|---------------------------------|--|--|--|
| Instructions: | | | | |
| | | | | |

| 1. Complete the form in its entirety and s | | | |
|--|--|---------------------------|--|
| 2. Attach a copy of the LSBE's current v | alid Certification Letter. | | |
| То: | | | |
| To:(Name of Prime Contractor Firm | n) | | |
| From:_ | ☐ LSBE –DeKalb | □ LSBE –MSA | |
| From:(Name of Subcontractor Firm) | (Check all that apply) | | |
| RFP Number: 22-500620 | | _ | |
| Project Name: Insurance Broker Services | 5 | - | |
| The undersigned subcontractor is prepared materials or services in connection with the materials, or services to be performed or p | e above project (specify in detail particu | | |
| Description of Materials or Services | Project/Task Assignment | % of Contract Award | |
| | | | |
| Prime Contractor | Sub-contractor | | |
| Signature: | Signature: | | |
| Title: | Title: | | |
| Date: | Date: | | |

ATTACHMENT F

AGENT/BROKER QUESTIONNAIRE

Complete this questionnaire based on the activities of your local office, unless the instructions provide otherwise. If expertise from other offices will be available and/or necessary in servicing the County's requirements, then specify these services and the offices and personnel to be involved (the County is interested in the capabilities these personnel might be able to do for the County. The County is not interested in each person's specific qualifications.) Do not include the service of any insurance companies unless your agency owns the company or has an exclusive contact with the company. Include a copy of your company's "Annual Report" when returning this questionnaire and any other material describing your services that may be appropriate.

| 1. | Name of Firm: |
|----|--|
| | Address: Telephone No. of Local Office: |
| | Names of local office principals, their experience and professional qualifications: (use separate sheet) |
| 2. | Names of key personnel that will be assigned to this account: Include brief biography for each (use separate sheet). |
| 3. | Annual gross income of your office: 3.1 Premiums (if applicable) \$ 2.2 Commissions (if applicable) \$ 3.3 Fees (if applicable) \$ |
| 4. | Do all employees in your office meet the licensing requirements of the Georgia Office of Insurance and Safely Fire Commissioner Department? (If no, please explain) |
| 5. | Exposure identification services: 5.1 Please describe your specific techniques and procedures, which may be used to assist us in identifying current and anticipating new exposures to accidental loss. |
| | 5.2 If you do not have in-house loss control/safety personnel, do you have an arrangement with an outside firm; if so, please give their name and qualifications: (use separate sheet) |
| 6. | 6.1 Can you review claims and reserves on a quarterly basis? |
| | YES NO 6.2 Can you provide loss frequency and severity forecasts for Auto Liability? YES NO 6.3 Can you provide loss development and trending analyses? YES NO 6.4 Can you establish and/or review property "maximum foreseeable loss" and "probable maximum loss" estimates? (If you answered "no", describe reason) YES NO |

AGENT/BROKER QUESTIONNAIRE (Page 2)

| 7. | Insurance Marketing Services: | | | | |
|----|---|---|-----------------------------------|--|--------------|
| | 7.1 Is your access to the excess or surplus lines market via: | | | | |
| | (a) (b) | Your own organizat An outside agency (| ion (name) (if external, which | one?) | |
| | 7.2 Describe | your capabilities and e | experience in: | | |
| | Retro | | | | |
| | Wrap | -Up Projects: | | | - |
| | Self-l | | | | |
| | Layer | | ges: | | |
| | | | | | |
| | agency/b | | | the Premium Volume nce of a minimum of f | |
| | | No. of Clients | | Premium Volume | |
| | Counties Cities Schools Airports Authoritie | | | | |
| 8. | | | _ | make your firm superi | |
| 9. | to your three County in size a. b. | | accounts and/or | (if not confidential) ar accounts which are sir | |
| 10 | | | | specialized seminars of agement staff? YES | _ |

ATTACHMENT G

RESPONDER AFFIDAVIT

By executing this affidavit, the undersigned verifies its compliance with O.C.G.A. § 13-10-91, as amended, stating affirmatively that the responder submitting a bid to DEKALB COUNTY, GA, a political subdivision of the State of Georgia, has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91, as amended].

| Responder's Name | Federal Work Authorization Enrollment Date |
|--|---|
| BY: Authorized Officer or Agent | |
| Title of Authorized Officer or Agent of Bidder | Identification Number |
| Printed Name of Authorized Officer or Agent | |
| Address (*do not include a post office box) | |
| SUBSCRIBED AND SWORN BEFORE ME ON THIS THE | |
| , DAY OF, 20 | |
| Notary Public | |
| My Commission Expires: | |

ATTACHMENT H



FIRST SOURCE JOBS ORDINANCE INFORMATION (WITH EXHIBITS 1 – 4)

EXHIBIT 1

FIRST SOURCE JOBS ORDINANCE ACKNOWLEDGEMENT

The DeKalb County First Source Ordinance requires contractors or beneficiaries of eligible projects entering into any type of agreement with the County, including purchase orders, regardless of what they may be called, for the procurement or disposal of supplies, services, construction projects, professional or consultant services, which is funded in whole or part with County funds or County administered funds in which the contractor is to receive \$50,000 or more in County expenditures or committed expenditures and recipient of urban redevelopment action grants or community development block funds administered in the amount of \$50,000 or more to make a good faith effort to hire DeKalb County residents for at least 50% of jobs created using the First Source Registry (candidate database) within one hundred twenty (120) days of contract execution. The work to be performed under this contract is subject to the provisions of the DeKalb County First Source Jobs Ordinance. All contractors will be asked to submit an Employment Roster and/or copies of active payroll registers on a monthly basis to verify compliance. The undersigned acknowledges and agrees to comply with the provisions of the DeKalb County First Source Jobs Ordinance.

CONTRACTOR OR BENEFICIARY INFORMATION:

| Contractor or Beneficiary Name (Signature) |
|--|
| Contractor or Beneficiary Name (Printed) |
| Title |
| Telephone |
| Email |
| Name of Business |
| Please answer the following questions: |
| 1. How many job openings do you anticipate filling related to this contract? |
| 2. How many incumbents/existing employees will retain jobs due to this contract? DeKalb Residents: Non-DeKalb Residents: |
| 3. How many work hours per week constitutes Full Time employment? Please return this form to WorkSource DeKalb, (404)687-3900 or email to fkadkins@dekalbcountyga.gov |

WorkSource DeKalb (WSD) is an EEO/M/F/D/V employer/program. Auxiliary aids/services are available upon request to individuals with disabilities. Persons with hearing impairments may call 1-800-255-0135 or 711 TTY for assistance. WSD is 100% funded by the U. S. Department of Labor and is a proud partner of the American Job Center Network.



FIRST SOURCE JOBS ORDINANCE INFORMATION

EXHIBIT 2

NEW EMPLOYEE TRACKING FORM

| Name of Bidder | | |
|---|------------------------------------|------------------------|
| Address | | |
| E- Mail | | |
| Phone Number | | |
| Fax Number | | |
| Do you anticipate hiring from th | ne First Source Candidate Registry | y? Y or N (Circle one) |
| If so, the approximate number of emp | ployees you anticipate hiring: | |
| Type of Position(s) you anticipate hiring: (List position title, one position per line) Attach job description per job title: | The number you anticipate hiring: | Timeline |
| | | |
| | | |
| | | |
| | | |

Please return this form to WorkSource DeKalb, fax (404) 687-4099 or email to <u>FirstSourceJobs@dekalbcountyga.gov</u>.

WorkSource DeKalb (WSD) is an EEO/M/F/D/V employer/program. Auxiliary aids/services are available upon request to individuals with disabilities. Persons with hearing impairments may call 1-800-255-0135 or 711 TTY for assistance. WSD is 100% funded by the U. S. Department of Labor and is a proud partner of the American Job Center Network.



FIRST SOURCE JOBS ORDINANCE INFORMATION EXHIBIT 3

BUSINESS SERVICE REQUEST FORM

Please complete this form for <u>each</u> position that you have available.

| DATE: | FEDERAL TAX ID: |
|---|-----------------------------------|
| COMPANY NAME: | WEBSITE: |
| ADDRESS: | |
| (WORKSITE ADDRESS IF DIFFERENT): | |
| CONTACT NAME: | TITLE: |
| CONTACT E-MAIL ADDRESS: | CONTACT PHONE: |
| Are you a private employment agency or staffing agency? | S NO |
| JOB DESCRIPTION: (Please include a copy of the Job Description) | |
| POSITION TITLE: | |
| NUMBER OF POSITIONS AVAILABLE: TARGET | START DATE: |
| WEEKLY WORK HOURS: 20-30 hours ☐ 30-40 | hours Other |
| SALARY RATE (OR RANGE): SPECIFIC PERM \square TEMP \square TEMP-TO-PERM \square | WORK SCHEDULE: SEASONAL |
| PUBLIC TRANSPORTATION ACCESSIBILITY: YES \square | NO 🗌 |
| SCREENINGS ARE REQUIRED: YES ☐ NO ☐ SE☐ CREDIT CHECK ☐ DRUG ☐ MVR ☐ BACKGR | LECT ALL THAT APPLY: COUND |
| HOW TO APPLY: | |
| Please return form to: <u>fkadkins@dekalbcountyga.gov</u> | |
| DO NOT WRITE BELOW THIS LINE - TO BE COMPLE | |
| Hire | SYSTEM TYPE: First Source Direct |
| ASSIGNED TO: | DATE: |

WorkSource DeKalb (WSD) is an EEO/M/F/D/V employer/program. Auxiliary aids/services are available upon request to individuals with disabilities. Persons with hearing impairments may call 1-800-255-0135 or 711 TTY for assistance. WSD is 100% funded by the U. S. Department of Labor and is a proud partner of the American Job Center Network.

FIRST SOURCE JOBS ORDINANCE INFORMATION

EXHIBIT 4

EMPLOYMENT ROSTER DeKalb County

| Contract Number: | | | | | | | | |
|------------------|-----------|---------------|--------------------------|---|--|---|---|--------------------------------|
| Project Name: | | | | | | | | |
| Contractor: | | | | | | | | |
| Name | Position: | Start Date | Hourly Rate of Pay | Hired for this Project? (yes/no) | Anticipated Length of Employment (Months) | % of Time Dedicated to the Project | Full or Part Time? (No. of Hours) | Georgia County of Residency |
| | | | | | | | | |
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ATTACHMENT I

SAMPLE COUNTY CONTRACT

DEKALB COUNTY, GEORGIA

| THIS AGREEMENT made as of thisday of | , 20, (hereinafter called the "execution |
|---|---|
| date") by and between DEKALB COUNTY, a | political subdivision of the State of Georgia |
| (hereinafter referred to as the "County"), and | , a corporation organized and |
| existing under the laws of the State of | , with offices in, |
| (hereinafter referred to as "Contractor" | '), shall constitute the terms and conditions under |
| which the Contractor shall provide | in DeKalb County, Georgia. |
| WITNESSETH: That for and in consideration of | the mutual covenants and agreements herein set |
| forth, the County and the Contractor hereby agree a | s follows: |

ARTICLE I. CONTRACT TERM

The Contractor shall commence the Work under this Contract within ten (10) days from the acknowledgement of receipt of the Notice to Proceed. As required by O.C.G.A §36-60-13, this Contract shall (i) terminate without further obligation on the part of the County each and every December 31st, as required by O.C.G.A. § 36-60-13, as amended, unless terminated earlier in accordance with the termination provisions of this Contract; (ii) automatically renew on each January 1st, unless terminated in accordance with the termination provisions of this Contract; and (iii) terminate absolutely, with no further renewals, on December 31, 20XX, unless extended by Change Order adopted and approved by the DeKalb County Governing Authority and the Contractor in accordance with the terms of this Contract.

ARTICLE II. PAYMENT

As full payment for the faithful performance of this Contract, the County shall pay the Contractor, the Contract Price, which is an amount not to exceed unless changed by written Change Order in accordance with the terms of this Contract. The term "Change Order" includes the term "amendment" and shall mean a written order authorizing a change in the Work, and an adjustment in Contract Price to Contractor or the Contract Term, as adopted and approved by the Contractor and the DeKalb County Governing Authority, or the Chief Executive Officer, if exempted from Governing Authority adoption and approval in accordance with the express terms of this Contract. The Chief Executive Officer or his/her designee shall have the authority to approve and execute a Change Order lowering the Contract Price or increasing the Contract Price up to twenty percent (20%) of the original Contract Price, provided that the total amount of the increase authorized by such Change Order is less than \$100,000.00. If the original Contract or Purchase Order Price does not exceed \$100,000.00, but the Change Order will make the total Contract Price exceed \$100,000.00, then the Change Order will require approval by official action of the Governing Authority. Any other increase of the Contract Price shall be by Change Order adopted and approved by the DeKalb County Governing Authority and the Contractor in accordance with the terms of this Contract. Amounts paid to the Contractor shall comply with and not exceed Attachment A, the

| reference. Pays | ost Proposal, consisting of | hirty (30) days a | | - | - |
|-----------------|--|-------------------|----------------|------------|--------|
| • | ginal invoice(s) must be submitted DeKalb County, Georgia Attention: "USER DEPARTMEN | | | | |
| В. | Upon award, Prime Contracto | r(s) with Local | Small Business | Enterprise | (LSBE) |

B. Upon award, Prime Contractor(s) with Local Small Business Enterprise (LSBE) Subcontractor(s) shall enter utilization reports electronically at www.dekalblsbe.info. Proof of payment to the LSBE Subcontractor must be uploaded and submitted. LSBE Subcontractors shall confirm receipt of payment from the Prime, electronically also, at www.dekalblsbe.info

ARTICLE III. STATEMENT OF WORK

| The Contra | actor agrees | to prov | ide all | | services | in accordance | e with | the |
|-------------|---------------|-----------|--------------|-------------|------------|----------------|--------|------|
| County's | Request | for | Proposals | (RFP) | No. | XX-XXXX | XX | for |
| | | , att | ached hereto | as Apper | ndix I and | l incorporated | herein | ı by |
| reference, | and the Con | tractor's | response th | ereto, atta | ached here | eto as Appen | dix II | and |
| incorporate | d herein by r | eference | | | | | | |

The Contractor's services shall include all things, personnel, and materials necessary to accomplish specific projects authorized by the County. Specific Work Authorizations will have precedence over any interpretation within the Contract.

ARTICLE IV. GENERAL CONDITIONS

- A. <u>Accuracy of Work</u> The Contractor shall be responsible for the accuracy of the Work and any error and/or omission made by the Contractor in any phase of the Work under this Agreement.
- B. Additional Work The County shall in no way be held liable for any work performed under this section which has not first been approved in writing by the County in the manner required by applicable law and/or the terms of this Contract. The County may at any time order changes within the scope of the Work without invalidating the Contract upon seven (7) days written notice to the Contractor. The Contractor shall proceed with the performance of any changes in the Work so ordered by the County unless such change entitles the Contractor to a change in Contract Price, and/or Contract Term, in which event the Contractor shall give the County written notice thereof within fifteen (15) days after the receipt of the ordered change, and the Contractor shall not execute such changes until it receives an executed Change Order from the County. No extra cost or extension of time shall be allowed unless approved by the County and authorized by execution of a Change Order. The parties' execution of any Change Order constitutes a final settlement of all matters relating to the change in the Work which is the subject of the Change Order. The County shall not be liable for payment for any work performed under this section which has not first been approved in writing by the County in the manner required by applicable law and/or the terms of this Contract.
- C. <u>Ownership of Documents</u> All documents, including drawings, estimates, specifications, and data are and remain the property of the County. The Contractor agrees that the County may reuse any and all plans, specifications, drawings, estimates, or any other data or documents described herein in its sole discretion without first obtaining permission of the Contractor and without any payment of any

monies to the Contractor therefore. However, any reuse of the documents by the County on a different site shall be at its risk and the Contractor shall have no liability where such documents are reused.

D. <u>Right to Audit</u> The County shall have the right to audit all books and records, including electronic records, relating or pertaining to this contract or agreement, including but not limited to all financial and performance related records, property, and equipment purchased in whole or in part with County funds and any documents or materials which support those records, kept under the control of the Contractor, including but not limited to those kept by the Contractor's employees, agents, assigns, successors and subcontractors. The County also has the right to communicate with Contractor's employees related to the audited records.

The Contractor shall maintain such books and records, together with such supporting or underlying documents and materials, for the duration of this contract and for seven (7) years after termination or expiration, including any and all renewals thereof. The books and records, together with supporting documents and materials shall be made available, upon request to the County or its designee, during normal business hours at the Contractor's office or place of business. In the event that no such location is available, then the books, records, and supporting documents shall be made available for audit at a time and location which is convenient for the County.

- E. <u>Successors and Assigns</u> The Contractor agrees it shall not sublet, assign, transfer, pledge, convey, sell, or otherwise dispose of the whole or any part of this Contract or his right, title, or interest therein to any person, firm, or corporation without the previous written consent of the County. If the County consents to any such assignment or transfer, then the Contractor binds itself, its partners, successors and assigns to all covenants of this Contract. Nothing contained in this Contract shall create, nor be interpreted to create privity, or any other relationship whatsoever, between the County and any person, or entity or than Contractor.
- F. <u>Reviews and Acceptance</u> Work performed by the Contractor shall be subject to review and acceptance in stages as required by the County. Acceptance shall not relieve the Contractor of its professional obligation to correct, at his own expense, any errors in the Work.
- G. Termination of Agreement The Contractor understands and agrees that the date of the beginning of Work, rate of progress, and time for completion of the Work are essential conditions of this Contract. The County may, for its own convenience and at its sole option, without cause and without prejudice to any other right or remedy of County, elect to terminate the Contract by delivering to the Contractor, at the address listed in the Notices article of this Contract, a written notice of termination specifying the effective date of termination. Such notice shall be delivered to Contractor at least thirty (30) days prior to the effective date of termination. If Contractor's services are terminated by the County, the termination will not affect any rights or remedies of the County then existing or which may thereafter accrue against Contractor or its surety. In case of termination of this Contract before completion of the Work, Contractor will be paid only for the portion of the Work satisfactorily performed through the effective date of termination as determined by the County. Neither party shall be entitled to recover lost profits, special, consequential or punitive damages, attorney's fees or costs from the other party to this Contract for any reason whatsoever. This Contract shall not be deemed to provide any third-party with any remedy, claim, right of action, or other right. The parties' obligations pursuant to this Section shall survive any acceptance of Work, or termination or expiration of this Contract.
- H. <u>Indemnification Agreement</u> The Contractor shall be responsible from the execution date or from the time of the beginning of the Work, whichever shall be the earlier, for all injury or damage of any kind resulting from the Work, to persons or property, including employees and property of the County. The Contractor shall exonerate, indemnify, and save harmless the County, its elected officials, officers, employees, agents and servants, hereinafter collectively referred to in this Section as "the County Indemnitees," from and against all claims or actions based upon or arising out of any damage or injury (including without limitation any injury or death to persons and any damage to property)

caused by or sustained in connection with the performance of this Contract or by conditions created thereby or arising out of or any way connected with Work performed under this Contract, as well as all expenses incidental to the defense of any such claims, litigation, and actions. Furthermore, Contractor shall assume and pay for, without cost to the County Indemnitees, the defense of any and all claims, litigation, and actions suffered through any act or omission of the Contractor, or any Subcontractor, or anyone directly or indirectly employed by or under the supervision of any of them. Notwithstanding any language or provision in this Contract, Contractor shall not be required to indemnify any County Indemnitee against claims, actions, or expenses based upon or arising out of the County Indemnitee's sole negligence. As between the County Indemnitees and the Contractor as the other party, the Contractor shall assume responsibility and liability for any damage, loss, or injury, including death, of any kind or nature whatever to person or property, resulting from any kind of claim made by Contractor's employees, agents, vendors, Suppliers or Subcontractors caused by or resulting from the performance of Work under this Contract, or caused by or resulting from any error, omission, or the negligent or intentional act of the Contractor, vendors, Suppliers, or Subcontractors, or any of their officers, agents, servants, or employees. The Contractor shall defend, indemnify, and hold harmless the County Indemnitees from and against any and all claims, loss, damage, charge, or expense to which they or any of them may be put or subjected by reason of any such damage, loss, or injury. The Contractor expressly agrees to provide a full and complete defense against any claims brought or actions filed against the County Indemnitees, where such claim or action involves, in whole or in part, the subject of the indemnity contained in this Contract, whether such claims or actions are rightfully or wrongfully brought or filed. The County has the sole discretion to choose the counsel who will provide the defense. No provision of this Contract and nothing herein shall be construed as creating any individual or personal liability on the part of any elected official, officer, employee, agent or servant of the County, nor shall the Contract be construed as giving any rights or benefits hereunder to anyone other than the parties to this Contract. The parties' obligations pursuant to this Section shall survive any acceptance of Work, or termination or expiration of this Contract.

- I. <u>Insurance</u> Prior to commencing work, Contractor shall, at its sole expense, procure and maintain insurance of the types and in the amounts described below from insurer(s) authorized to transact business in the state where the work or operations will be performed by Contractor. Such insurance shall be placed with admitted insurers that maintain an A.M. Best's rating of not less than "A" (Excellent) with a Financial Size Category of VII or better with coverage forms acceptable to Contractor. The insurance described below shall be maintained uninterrupted for the duration of the project, including any warranty periods, and shall protect Contractor, and others as required by contract, for liabilities in connection with work performed by or on behalf of Contractor, its agents, representatives, employees or Contractors.
 - 1. Certificates of Insurance in companies doing business in Georgia and acceptable to the County covering:
 - (a) Statutory Workers' Compensation Insurance, or proof that Contractor is not required to provide such coverage under State law;
 - (1) Employer's liability insurance by accident, each accident \$1,000,000
 - (2) Employer's liability insurance by disease, policy limit \$1,000,000
 - (3) Employer's liability insurance by disease, each employee \$1,000,000
 - (b) Professional Liability Insurance on the Contractor's services in this Agreement with limit of \$1,000,000;
 - (c) Commercial General Liability Insurance covering all operations with combined single limit of \$1,000,000;
 - (d) Comprehensive Automobile Liability Insurance with form coverage for all owned, non-owned and hired vehicles with combined single limit of \$1,000,000.

(e) Umbrella or Excess Insurance. Umbrella or excess insurance is to be provided with General Liability, Auto Liability and Employers Liability scheduled as underlying policies with limits not less than the following: \$5,000,000 per occurrence \$5,000,000 aggregate

2. Additional Insured Requirement:

- (a) The County, its elected officials, officers, employees and agents, hereinafter referred to in this article and in the article entitled "Certificates of Insurance" as "the County and its officers" are to be named as additional insured on all policies of insurance except worker's compensation insurance with no cross suits exclusion. The County and its officers shall be included as additional insureds under commercial general liability and commercial umbrella insurance, for liabilities arising out of both the ongoing and completed operations of Contractor. Such additional insured coverage shall be endorsed to Contractor's policy by attachment of ISO Additional Insured Endorsement forms CG 20 10 10 01 (ongoing operations) and CG 20 37 10 01 (products-completed operations), or form(s) providing equivalent coverage.
- (b) All coverages required of the Contractor will be primary over any insurance or self-insurance program carried by the County.
- (c) If the Contractor is a joint venture involving two (2) or more entities, then each independent entity will satisfy the limits and coverages specified here or the joint venture will be a named insured under each respective policy specified.
- 3. Fidelity Bond coverage shall be provided. Coverage limits shall not be less than the amount scheduled in the contract.
- 4. Certificates of Insurance must be executed in accordance with the following provisions:
 - (a) Certificates to contain policy number, policy limits, and policy expiration date of all policies issued in accordance with this Agreement;
 - (b) Certificates to contain the location and operations to which the insurance applies;
 - (c) Certificates to contain Contractor's protective coverage for any subcontractor's operations;
 - (d) Certificates to contain Contractor's contractual liability insurance coverage;
 - (e) Certificates are to be **issued** to:

DeKalb County, Georgia
Director of Purchasing & Contracting
The Maloof Center, 2nd Floor
1300 Commerce Drive
Decatur, Georgia 30030

- 5. The Contractor shall be wholly responsible for securing certificates of insurance coverage as set forth above from all subcontractors who are engaged in this work.
- 6. The Contractor agrees to carry statutory Workers' Compensation Insurance and to have all subcontractors likewise carry statutory Workers' Compensation Insurance.
- 7. Contractor agrees to waive all rights of subrogation and other rights of recovery against the County and its officers and shall cause each Subcontractor to waive all rights of subrogation for all coverage, excluding Professional E&O.
- 8. Failure of the County to demand such certificate or other evidence of full compliance with these insurance requirements or failure of the County to identify a deficiency from evidence provided will not be construed as a waiver of the Contractor's obligation to

- maintain such coverage. Contractor understands and agrees that the purchase of insurance in no way limits the liability of the Contractor.
- 9. Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least sixty (60) days prior written notice to the County. Policies and Certificates of Insurance listing the County and its officers as additional insureds (except for workers' compensation insurance) shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in this Contract.
- 10. If the County shall so request, the Contractor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies. Contractor shall be responsible and have the financial wherewithal to cover any deductibles or retentions included on the certificate of insurance.
- J. Georgia Laws Govern The laws of the State of Georgia shall govern the construction of this Contract without regard for conflicts of laws. Should any provision of this Contract require judicial interpretation, it is agreed that the court interpreting or construing the same shall not apply a presumption that the terms hereof shall be more strictly construed against one party, by reason of the rule of construction, that a document is to be construed more strictly against the party who itself or through its agent prepared same; it being agreed that the agents of all parties have participated in the preparation hereof, and all parties have had an adequate opportunity to consult with legal counsel. In interpreting this Contract in its entirety, the printed provisions of this Contract, and any additions written or typed hereon, shall be given equal weight, and there shall be no inference by operation of law or otherwise; that any provision of this Contract shall be construed against either party hereto.
- K. <u>Venue</u> This Agreement shall be deemed to have been made and performed in DeKalb County, Georgia. For the purposes of venue, all suits or causes of action arising out of this Agreement shall be brought in the courts of DeKalb County, Georgia.
- L. Contractor and Subcontractor Evidence of Compliance; Federal Work Authorization Pursuant to O.C.G.A. §13-10-91, the County cannot enter into a contract for the physical performance of services unless the Contractor, its Subcontractor(s) and sub-subcontractor(s), as that term is defined by state law, register and participate in the Federal Work Authorization Program to verify specific information on all new employees. Contractor certifies that it has complied and will continue to comply throughout the Contract Term with O.C.G.A. §13-10-91 and any related and applicable Georgia Department of Labor Rule. Contractor agrees to sign an affidavit evidencing its compliance with O.C.G.A. §13-10-91. The signed affidavit is attached to this Contract as Attachment B. Contractor agrees that in the event it employs or contracts with any Subcontractor(s) in connection with this Contract, Contractor will secure from each Subcontractor an affidavit that certifies the Subcontractor's current and continuing compliance with O.C.G.A. §13-10-91 throughout the Contract Term. Any signed Subcontractor affidavit(s) obtained in connection with this Contract shall be attached hereto as Attachment C. Each Subcontractor agrees that in the event it employs or contracts with any sub-subcontractor(s), each Subcontractor will secure from each sub-subcontractor an affidavit that certifies the sub-subcontractor's current and continuing compliance with O.C.G.A. §13-10-91 throughout the Contract Term. Any signed sub-subcontractor affidavit(s) obtained in connection with this Contract shall be attached hereto as Attachment D.
- M. <u>County Representative</u> The County may designate a representative through whom the Contractor will contact the County. In the event of such designation, said representative shall be consulted and his written recommendation obtained before any request for extra work is presented to the County. Payments to the Contractor shall be made only upon itemized bill submitted to and approved by said representative.

- N. Contractor's Status The Contractor will supervise and direct the Work, including the Work of all Subcontractors. Only persons skilled in the type of work which they are to perform shall be employed. The Contractor shall, at all times, maintain discipline and good order among his employees, and shall not employ any unfit person or persons or anyone unskilled in the work assigned him. The relationship between the County and the Contractor shall be that of owner and independent contractor. Other than the consideration set forth herein, the Contractor, its officers, agents, servants, employees, and any Subcontractors shall not be entitled to any County employee benefits including, but not limited to social security, insurance, paid annual leave, sick leave, worker's compensation, free parking or retirement benefits. All services provided by Contractor shall be by employees of Contractor or its Subcontractors and subject to supervision by Contractor. No officer or employee of Contractor or any Subcontractor shall be deemed an officer or employee of the County. Personnel policies, tax responsibilities, social security payments, health insurance, employee benefits and other administrative policies, procedures or requirements applicable to the Work or services rendered under this Contract shall be those of the Contractor, not the County.
- O. <u>Georgia Open Records Act</u> Contractor shall comply with the applicable provisions of the Georgia Open Records Act, O.C.G.A. §50-18-70 *et seq*.
- P. <u>First Source Jobs Ordinance and Preferred Employees</u> The Contractor is required to comply with the DeKalb County First Source Jobs Ordinance, Code of DeKalb County as Revised 1988, section 2-231 *et seq.*, and among other things, is required to make a good faith effort to hire DeKalb County residents for at least fifty percent 50% of all jobs created by an Eligible Project, as that term is defined in the First Source Ordinance, using the First Source Registry. Contractors, subcontractors, and independent contractors bidding on this contract will be encouraged by DeKalb County to have 25% or more of their labor forces for this project consist of Preferred Employees selected from the First Source Registry. The First Source Registry has Preferred Employees trained by U.S. Department of Labor registered apprenticeship programs and other partners. For information on Preferred Employees, please contact the DeKalb County Workforce Development by telephone at 404-687-3417 or 404-687-7171or in person at 320 Church Street, Decatur, GA 30030.
- Q. <u>Business License</u> Contractor shall submit a copy of its current, valid business license with this Contract. If the Contractor is a Georgia corporation, Contractor shall submit a valid county or city business license. If Contractor is a joint venture, Contractor shall submit valid business licenses for each member of the joint venture. If the Contractor is not a Georgia corporation, Contractor shall submit a certificate of authority to transact business in the state of Georgia and a copy of its current, valid business license issued by its home jurisdiction. If Contractor holds a professional license, then Contractor shall submit a copy of the valid professional license. Failure to provide the business license, certificate of authority, or professional license required by this section, may result in the Contract being terminated. Contractor shall ensure that any insurance, license, permit or certificate submitted in response to the County's RFP or as part of the Contract shall be current and valid when submitted, and shall remain valid, current and maintained in good standing for the Contract Term.
- R. <u>Sole Agreement</u> This Contract constitutes the sole contract between the County and the Contractor. The terms, conditions, and requirements of this Contract may not be modified, except by Change Order. No verbal agreement or conversation with any officer, agent, or employee of the County, either before or after the execution of the Contract, shall affect or modify any of the terms or obligations herein contained. No representations, oral or written, shall be binding on the parties unless expressly incorporated herein. No Change Order shall be enforceable unless approved by official action of the County as provided by law or in this Contract.
- S. <u>Attachments and Appendices</u> This Contract includes the following Attachments and Appendices all of which are incorporated herein by reference: Attachment A, Contractor's Cost Proposal; Appendix I, County's RFP; Appendix II, Contractor's Response; Attachment B, Contractor's Affidavit; Attachment C, Subcontractor's Affidavit(s); Attachment D, Sub-

subcontractor's Affidavit(s); and Attachment E, Certificate of Corporate Authority or Joint Venture Certificate.

- T. Severability If any provision of this Contract or the application thereof to any person or circumstance shall to any extent be held invalid, then the remainder of this Contract or the application of such provision to persons or circumstances, other than those as to which it is held invalid, shall not be affected thereby, and each provision of this Contract shall be valid and enforced to the fullest extent permitted by law.
- U. **Notices** Any notice or consent required to be given by or on behalf of any party hereto to any other party hereto shall be in writing and shall be sent to the County's Chief Executive Officer and the Executive Assistant or to the Contractor or his authorized representative on the work site by (a) registered or certified United States mail, return receipt requested, postage prepaid, (b) personal delivery, or (c) overnight courier service. All notices sent to the addresses listed below shall be binding unless said address is changed in writing no less than fourteen days before such notice is sent. Future changes in address shall be effective upon written notice being given by the Contractor to the County's esentative via certified first Executiv class U. s follows:

| | to the Contractor's authorized represed. Such notices will be addressed as |
|--|---|
| | Chief Executive Officer 1300 Commerce Drive, 6 th Floor Decatur, GA 30030 and |
| | Executive Assistant 1300 Commerce Drive Decatur, Georgia 30030 |
| With a copy to: | Chief Procurement Officer 1300 Commerce Drive, 2 nd Floor Decatur, Georgia 30030 |
| With a copy to: If to the Contractor: | Director of the Finance Department 1300 Commerce Drive Decatur, Georgia 30030 |
| | |

V. Counterparts This Contract may be executed in several counterparts, each of which shall be deemed an original, and all such counterparts together shall constitute one and the same Contract.

W. <u>Controlling Provisions</u> The Contract for this Project shall govern the Work. If any portion of the Contract shall be in conflict with any other portion, the various documents comprising the Contract shall govern in the following order of precedence: Contract, Change Orders or modifications issued after execution of the Contract; the provisions of the County's RFP; and the Contractor's Response thereto.

[SIGNATURES CONTINUE ON NEXT PAGE]



IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed in three counterparts, each to be considered as an original by their authorized representative.

| | DEKALB COUNTY, GEORGIA |
|---------------------------|--|
| By:(SEA | |
| Signature | MICHAEL L. THURMOND Chief Executive Officer DeKalb County, Georgia |
| Name (Typed or Printed) | Dertail County, Georgia |
| Title | Date |
| Federal Tax I.D. Number | |
| Date | |
| ATTEST: | ATTEST: |
| Signature | BARBARA H. SANDERS, CCC, CMC Clerk of the Chief Executive Officer |
| Name (Typed or Printed) | and Board of Commissioners of DeKalb County, Georgia |
| Title | |
| APPROVED AS TO SUBSTANCE: | APPROVED AS TO FORM: |
| Department Director | County Attorney Signature |
| | County Attorney Name (Typed or Printed) |