



Department of Purchasing &
Contracting
1300 Commerce Drive, 2nd Floor
Decatur, Georgia 30030
Fax: (404) 371-7006

Date: November 26, 2018

Request for Quotation No. 18-3003657

DeKalb County, Georgia is requesting a quotation for the following:

Paving Work on Old Clairmont Road

I. Proposed Term:

Thirty (30) calendar days

II. Attachments:

- A. Scope of Work and Quote Form
- B. Location Map and Area of Concern
- C. Reference Form and Reference Check Release Statement
- D. Bidder Affidavit
- E. Insurance Requirements ~~note any exceptions if any~~

III. Payment Terms:

Net 30

IV. Scope of Work:

See Attachment A – Quote Form

V. Federal Work Authorization Program:

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. In order for a Quotation to be considered, it is mandatory that the Bidders Affidavit, Attachment D, be completed with bidder's proposal.

VI. Due Date: November 29, 2018

All questions are due to Cynthia W. Ferrell via email at cwferrell@dekalbcountyga.gov on or before 5:00 p.m. EST on November 29, 2018.

Quotes are due on or before 3:00 p.m. EST on December 3, 2018. Bidder must complete and return the quote form, reference form, bidder affidavit and provide a copy of Bidder's valid business license to DeKalb County by email to the attention of agent or email to cwferrell@dekalbcountyga.gov.

All quotes are to be provided on Attachment A, Quote Form.

Thank you for your interest in doing business with DeKalb County.

Sincerely,



Cynthia W. Ferrell
Procurement Technician
Department of Purchasing and Contracting

Attachments

ATTACHMENT A

Scope of Work for Paving Work on Old Clairmont Road

Within the approximately 23-foot-wide roadway as shown on the Attachment B and as marked in the field on the sketch, perform the following work in conformance with GDOT specifications:

1. Mill off existing pavement to a depth of 1 ½ inch from gutter to gutter within work area. All cold patch material near trailhead is also to be removed. In that area, the 1 ½ inch milling depth is measured below the cold patch.
2. Recycled asphalt concrete leveling as needed to allow for positive drainage to existing flume at northwest corner of bridge.
3. Install 1 ½ inch of 12.mm Superpave inlay over entire milled and/or leveled area.

The approximate length of the work is 135 feet.

Quote Form

The responder, declares that he has carefully examined, RFQ # 18-3003657 Paving Work on Old Clairmont Road, the Scope of Work contained, and that he proposes and agrees that if his bid is accepted, to provide the necessary services and will furnish all materials and labor specified in the RFQ, or necessary to complete the Work in the manner therein specified within the time specified, as therein set forth for the following lump sum amount which sum is hereinafter referred to as the "Total Bid."

Total Bid \$ _____
(State amount in writing on this line) (In figures)

BIDDER'S NAME: _____

BIDDER'S ADDRESS _____

BIDDER'S TELEPHONE NO. _____

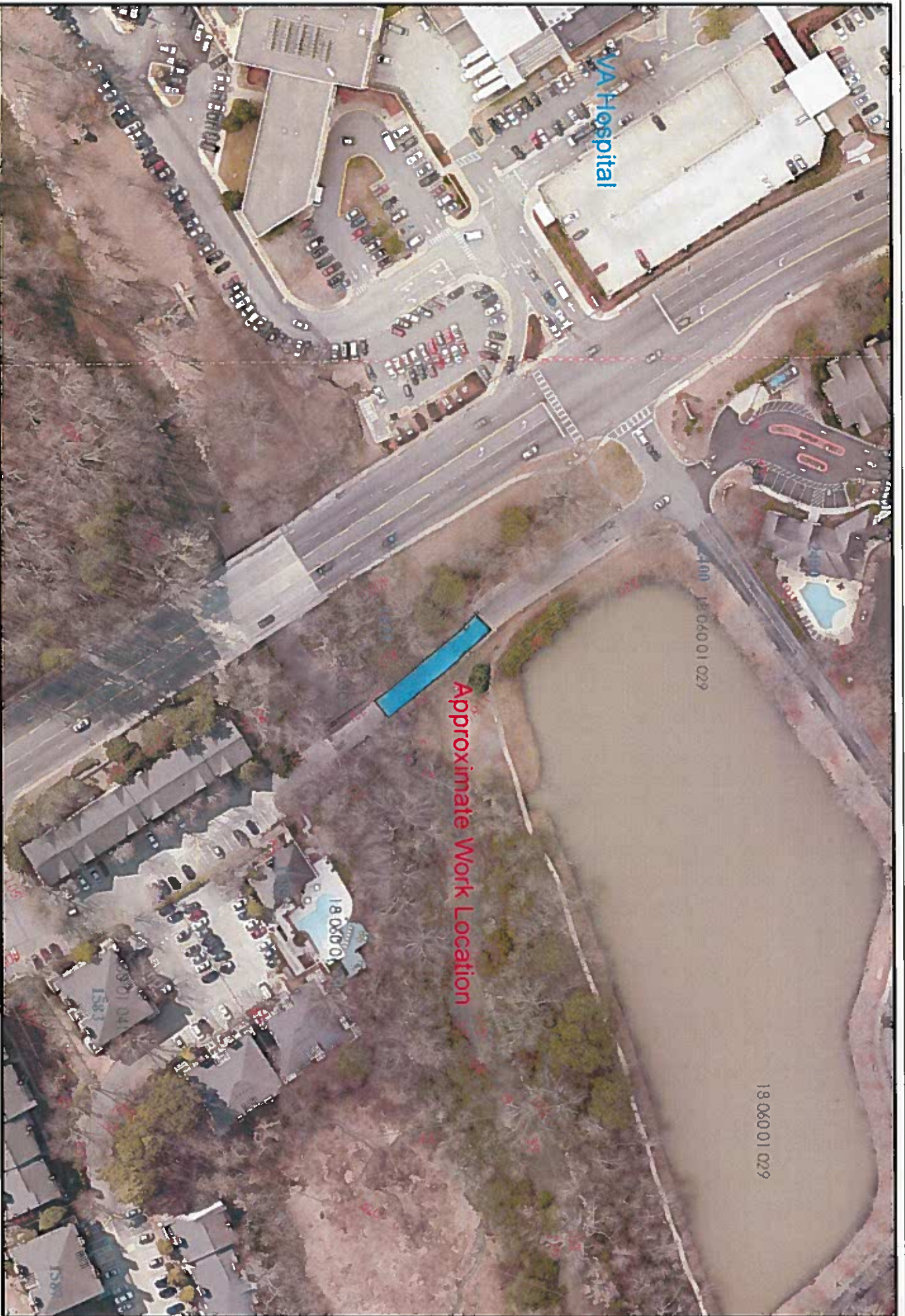
BIDDER'S EMAIL ADDRESS _____



Pavement Work on Old Clairmont Road



Date Printed: 10/24/2018



Approximate Work Location

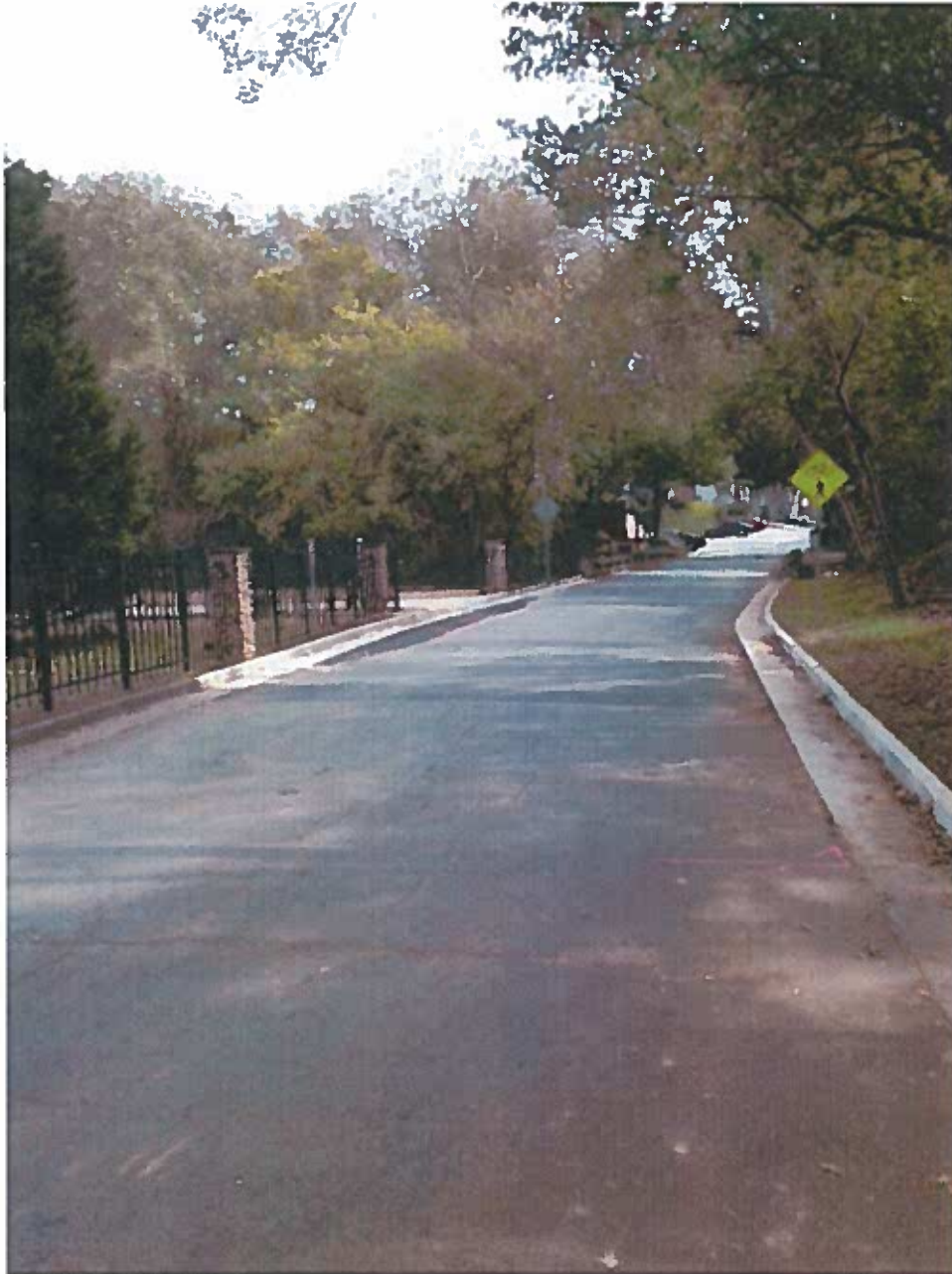
DeKalb County GIS Disclaimer

The maps and data contained on DeKalb County's Geographic Information System (GIS) are subject to constant change. While DeKalb County strives to provide accurate and up-to-date information, the information is provided "as is" without warranty, representation or guarantee of any kind as to the content, sequence, accuracy, timeliness, completeness or any of the database information provided herein. DeKalb County expressly disclaims all representations and warranties, including, without limitation, any warranties of merchantability and fitness for a particular purpose. In no event shall DeKalb County be liable in any event for any special, incidental, or other damages, including, without limitation, any damages for loss of use, data, or profits, whether in an action of contract, tort, negligence, or otherwise, even if such damages were foreseeable. The maps and data are not suitable for site-specific decision-making nor should it be combined or used as a legal description. The areas depicted by maps and data are approximate, and are not necessarily accurate to surveying or engineering standards.

ATTACHMENT B



ATTACHMENT B





ATTACHMENT C

Reference Form and Reference Check Release Statement

List below at least two (2) references, including company name, contract period, contact name, email address, telephone numbers and project name of companies or individuals who can verify your experience and ability to complete the type of services listed in the solicitation.

Company Name	Contract Period
Contact Person Name and Title	Telephone Number (include area code)
Email Address	
Project Name	

Company Name	Contract Period
Contact Person Name and Title	Telephone Number (include area code)
Email Address	
Project Name	

REFERENCE CHECK RELEASE STATEMENT

You are authorized to contact the references provided above for purposes of this RFQ.

Signed _____

Title _____

(Authorized Signature of Bidder)

Company Name _____ Date _____

ATTACHMENT D

CONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned verifies its compliance with O.C.G.A. § 13-10-91, as amended, stating affirmatively that the bidder submitting a bid, contractor, firm or corporation which is contracting with 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 Department 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]. The affiant agrees to continue to use the federal work authorization program throughout the contract period.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the COUNTY, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91, as amended, on the Subcontractor Affidavit form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the COUNTY, within five (5) days from when the subcontractor(s) is retained to perform such service.

BY: Authorized Officer or Agent
Authorization
(Bidder's Name)

Federal Work

Enrollment Date

Title of Authorized Officer or Agent of Bidder

Identification Number

Printed Name of Authorized Officer or Agent

Company Name & Address (do not include a post office box)

**SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE**

_____ DAY OF _____, 20__

Notary Public

My Commission Expires: _____

INSURANCE REQUIREMENTS

IMPORTANT NOTICE

IMPORTANT — PLEASE READ CAREFULLY & FOLLOW INSTRUCTIONS LISTED HEREIN

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- I. If the County sends to you notice of Award on this bid, take this form to your insurance agent as this form contains requirements that may be non-standard in the insurance industry.
 - II. Instruct your insurance agent that the County's requirements are listed in Section III, and that you *must* comply with these requirements before you may proceed with the work.
 - III. Before the starting of any work, the successful contractor must furnish to DeKalb County certificates of insurance from companies doing business in Georgia and acceptable to the County as follows:
 1. Certificates must cover:
 - **Statutory Workers Compensation**
 - **Business Auto Liability Insurance** with a minimum \$500,000 Combined Single Limit/Each Occurrence (Including operation of non-owned, owned, and hired automobiles).
 - **Commercial General Liability Insurance**
 - (1) Each Occurrence - \$1,000,000
 - (2) Fire Damage - \$250,000
 - (3) Medical Expense - \$10,000
 - (4) Personal & Advertising Injury - \$1,000,000
 - (5) General Aggregate - \$2,000,000
 - (6) Products & Completed Operations - \$1,500,000
 - (7) Contractual Liability where applicable
 2. DeKalb County, GA shall be named as Additional Insured under any General Liability, Business Auto and Umbrella Policies using ISO Additional Insured Endorsement forms CG 2010 or its equivalent. Coverage shall apply as Primary and non-contributory with Waiver of Subrogation in favor of DeKalb County, Georgia.
 3. The insurance carrier must have a minimum rating of A or higher as determined by the rating firm A.M. Best.

4. Certificates to contain policy number, policy limits and policy expiration date of all policies issued in accordance with this contract.

(Continued)

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5. Certificates to contain the location and operations to which the insurance applies.
6. Certificates to contain successful contractor's protective coverage for any subcontractor's operations. If this coverage is included in General Liability, please indicate on the Certificate of Insurance.
7. Certificates to contain successful contractor's contractual insurance coverage. If this coverage is included in the General Liability, please indicate this on the Certificate of Insurance.
8. Certificates are to be issued, and the successful contractor shall mail insurance documents listed in this form, to:

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

9. The successful contractor shall be wholly responsible for securing certificates of insurance coverage as set forth above from all subcontractors who are engaged in this work.