



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

Date: March 22, 2019

Request for Quotation No. 19-3003679

Remote Parking Location

DeKalb County, Georgia is requesting a quotation for a temporary remote parking location to accommodate a minimum of One Hundred (100) parking spaces for County employees.

I. Proposed Term:

Two Hundred Fifty (250) calendar days

II. Attachments:

- A. Scope of Work/Minimum Qualifications
- B. Quote Form
- C. Reference Form and Reference Check Release Statement
- D. Bidder Affidavit
- E. Insurance Requirements
- F. Sample Contract (if applicable)

III. Payment Terms:

Net 30

IV. Scope of Work:

See Attachment A

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

VI. Due Date:

All questions are due to **Delois Robinson** via email at drobinson@dekalbcountyga.gov on or before 5:00 p.m. EST on Tuesday, March 26, 2019.

Quotes are due on or before 3:00 p.m. EST on Friday, March 29, 2019. 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 Delois Robinson or email to drobinson@dekalbcountyga.gov.

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

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

Sincerely,

Delois Robinson, CPPO
Procurement Manager
Department of Purchasing and Contracting

Attachments

ATTACHMENT A
(Scope of Work/Minimum Qualifications)

This solicitation seeks Vendors that can provide a temporary remote parking facility to accommodate one hundred (100) parking spaces within the Downtown Decatur Business District for DeKalb County employees.

Hours of operations are typically 7:00 am to 6:00 pm for remote parking facility and shuttle services Monday through Friday, excluding Holidays which include New Year's Day, Martin Luther King Day, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans Day, Thanksgiving Day, Day After Thanksgiving and Christmas Day.

The Vendor shall provide required signage that will clearly identify the remote parking facility spaces and shuttle services for County employees. Signs shall be professionally manufactured and easy to read.

The Vendor's staff is expected to have a working knowledge of the layouts of the remote parking facility and the Maloof Building. Assistance may be offered to County employees in finding an appropriate parking space and/or answering general questions.

The Vendor will maintain the cleanliness and appearance of the remote parking facility by sweeping the area regularly and keeping it clear of any trash and debris generated by the parking facility services.

The Vendor is responsible for providing a safe environment to ensure an injury-free environment for County employees. The Vendor agrees to terminate immediately any employee who, if at the sole discretion of the County, poses a risk to the health or safety of any County employee.

The Vendor will designate a supervisor or lead during the entire hours of operation as a representative of the Vendor in handling any remote parking concerns and incidents. Duties of the supervisor or lead shall include but not limited to customer service and improving all services and coordinating with the County.

Qualifications/Experience

The Vendor must have at least two (2) projects of similar size and scope in the past five (5) years that are like the scale and size of this RFQ. Provide the name of the client, the project manager, telephone number, description of work performed, value of the contracts and time on the Reference Form, Attachment C. Provide a list of other facilities where you currently provide shuttle services and size of the contracts of the nature of the scope.

ATTACHMENT B
(Quote Form)

PRICE SCHEDULE			
ITEM DESCRIPTION	Estimated No. of Parking Spaces	UNIT QUOTE	EXTENDED/TOTAL QUOTE
Monthly rate per car for 100 spaces within a remote parking location.	100	\$	\$
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <div>(State Total Quote amount in writing on this line)</div>			
Note: The undersigned, as Responder, declares that he has carefully examined <u>RFQ No. 19-3003679, Remote Parking Location</u> , the scope of work therein contained, and that he proposes and agrees that if his Quote is accepted, to provide the necessary services, materials and labor specified in the Quote, or necessary to complete the Scope of Work in the manner therein specified within the time specified, as therein set forth for the sum amount which sum is hereinafter referred to as the “Total Quote.”			

Signed (Authorized Signature of Bidder)

Title

Company Name

Email address

Address

Telephone Number

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 individuals who can verify your experience and ability to perform 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: _____

ATTACHMENT E
INSURANCE REQUIREMENTS

IMPORTANT NOTICE

PLEASE READ CAREFULLY & FOLLOW INSTRUCTIONS LISTED HEREIN

Insurance must meet the County's requirements and will be furnished by the successful Bidder(s) upon award.

1. Successful Bidder(s) will advise their insurance agent of the County's requirements as listed below and that they may not proceed with any work until insurance is provided that is in compliance with these requirements.
2. Contractor's insurance company or agent must mail, email, or bring an original certificate of insurance and applicable declarations or endorsements to the DeKalb County address listed within this Insurance provision. Insurance must be from companies able to do business in Georgia and acceptable to the County as follows:
 - a. Certificates must cover:
 - i. Statutory Workers Compensation
 - (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
 - ii. Business Automobile Liability/Garage Keepers Liability Insurance with a minimum \$1,000,000 Combined Single Limit/Each Occurrence (Including operation of non-owned, owned, and hired automobiles) and Garage Keepers Liability \$1,000,000 Each Occurrence.

iii. 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