

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

Date: August 2, 2022

Request for Quotation No. 22-3003782

Spring Creek Road Sidewalk Installation

I. Proposed Term:

Thirty (30) calendar days

II. Attachments:

- A. Scope of Work
- B. Quote Form
- C. Bidder Contact Information
- D. Reference Form and Reference Check Release Statement
- E. Bidder Affidavit
- F. Insurance Requirements

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. In order for a Quotation to be considered, it is mandatory that the Quote Form – Attachment B, Reference Form – Attachment D, and Bidders Affidavit E be completed with bidders proposal.

VI. Due Date:

All questions are due to Monique C. McCrear via email at mcmccrear@dekalbcountyga.gov on or before 5:00 p.m. EST on August 5, 2022.

Additional Information/Addenda

The County will issue responses to inquiries and any other corrections or amendments it deems necessary in a written addenda issued prior to the due date. Bidders should not rely on any representations, statements or explanations other than those made in this RFQ or in an addendum to this RFQ. Where there appears to be a conflict between the RFQ and any addenda issued, the last addendum issued will prevail. It is the responsibility of the Bidder to ensure awareness of all addenda issued for this solicitation. Please acknowledge the addenda and submit to the DeKalb County Department of Purchasing and Contracting as requested. Bidders may contact the above listed contact person to verify the number of addenda prior to submission. Addenda issued for this RFQ will be posted on DeKalb County's website, <https://www.dekalbcountyga.ov/informal bids>. Bidder should regularly check the County's website for addenda.

Quotes are due on or before 3:00 p.m. EST on August 9, 2022. 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 **Monique C. McCrear** or email to mcmccrear@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,

Monique C. McCrear

Monique C. McCrear
Procurement Technician
Department of Purchasing and Contracting

ATTACHMENT A

SCOPE OF WORK

DeKalb County's Department of Public Works, Transportation division is procuring services for the installation of sidewalk on Spring Creek Road to North Druid Hills Road to 2383 Spring Creek Road. Attached are plans for the proposed sidewalk and an itemized bid form.

All work shall conform with the current Georgia Department of Transportation Standard Specifications for Construction of Transportation Systems.

The contractor is responsible for removing all construction debris from the site. Payment for this is incidental to the cost of the Grading Complete item.

End of Specifications

ATTACHMENT B
Quote Form

ITEM NO.	ITEM DESCRIPTION	Estimated Quantity	UNIT	UNIT PRICE	TOTAL
1	ADA RAMPS	3	EACH	\$	\$
2	TRAFFIC CONTROL	1	LS	\$	\$
3	CONSTRUCT AND REMOVE INLET SEDIMENT TRAP	2	EACH	\$	\$
4	TEMPORARY SILT FENCE TYPE C	100	LF	\$	\$
5	GRADING COMPLETE	1	LS	\$	\$
6	CONC SIDEWALK, 4 IN	262	SY	\$	\$
7	CONC SIDEWALK, 6 IN	20	SY	\$	\$
8	CONC VALLEY GUTTER, 8 IN	78	SY	\$	\$
9	CONCRETE HEADER CURB, 10 IN, TP 4	20	LF	\$	\$
10	GALV STEEL PIPE HANDRAIL - 36 IN HIGH	30	LF	\$	\$
11	RESET SIGN	4	EACH	\$	\$
12	HIGHWAY SIGNS, TP1 MATL, REFL SHEETING, TP 11	6.3	SF	\$	\$
13	THERMOPLASTIC SOLID TRAF STRIPE, 24 IN, WHITE	15	LF	\$	\$
14	THERMOPLASTIC SOLID TRAF STRIPE, 8 IN, WHITE	170	LF	\$	\$
15	RELOCATE EXISTING WATER METER, INCLUDING BOX	1	EA	\$	\$
16	SOD	260	SY	\$	\$
17	WORK ALLOWANCE	1	EACH	\$3,000.00	\$3,000.00
	GRAND TOTAL				\$

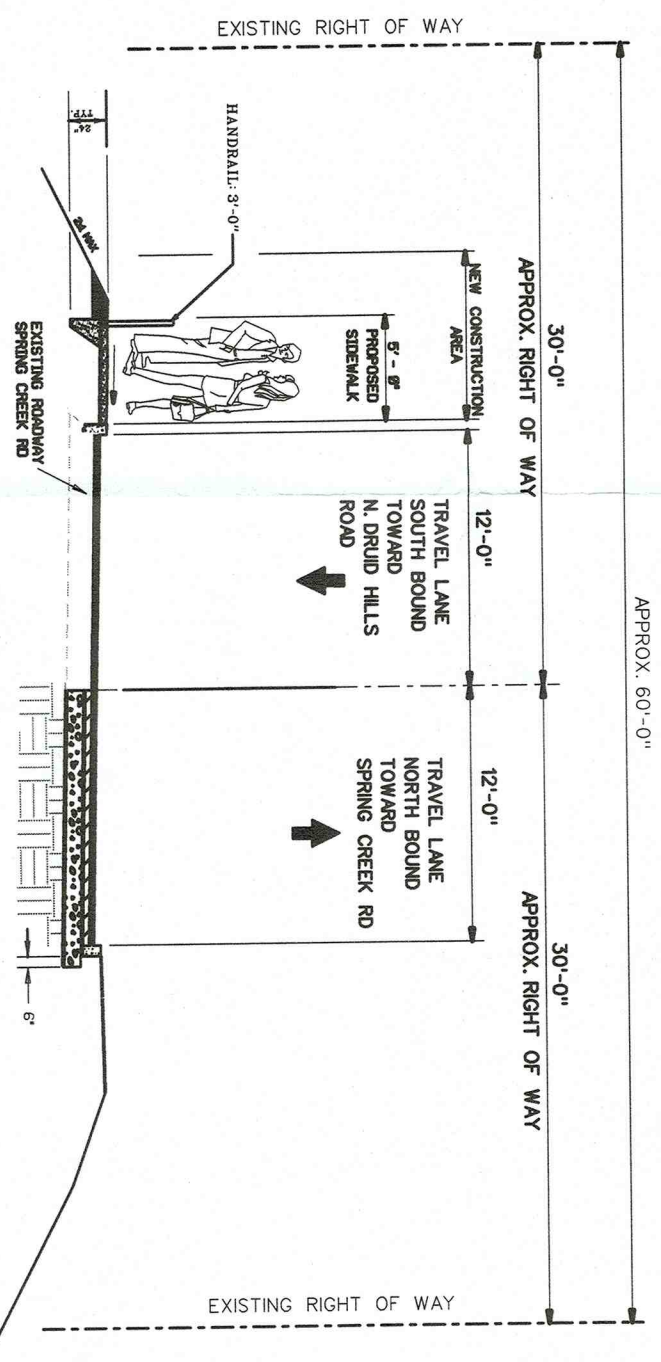
STATE	PROJECT NUMBER	SHEET	TOTAL SHEETS
GA.			

This document was compiled from design plans, aerial photography and other sources is to be used for informational purposes only. Dekalb County assumes no responsibility for the accuracy of information contained herein.



GEORGIA811
Utilities Protection Center, Inc.
More updates below.
Call before you dig.

**Know what's below.
Call before you dig.**

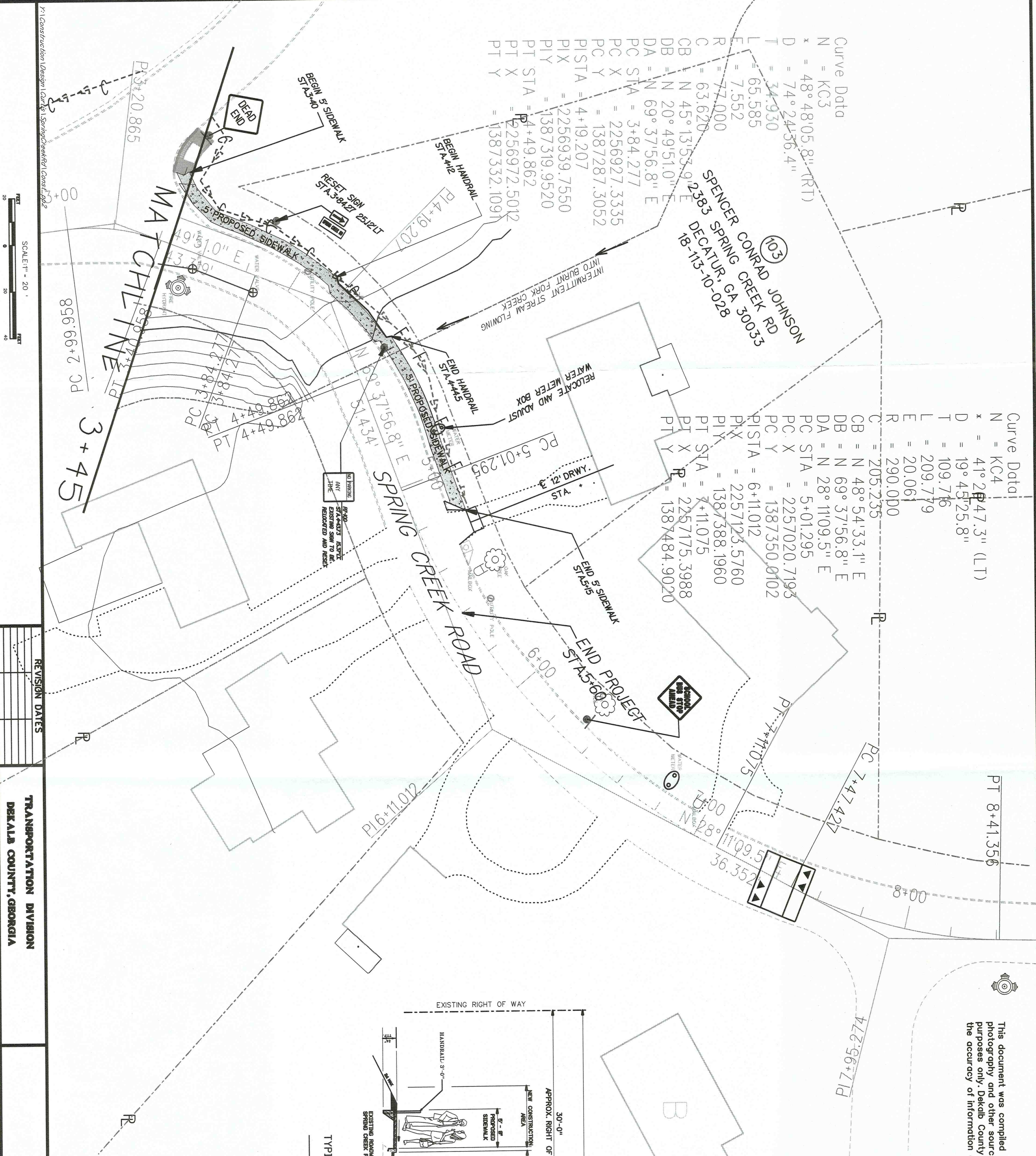


TYPICAL SECTION OF 5'-Ø' SIDEWALK WITH HANDRAIL	STA.4+15 - 4+44.5 N.T.S
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Curve Data	
N	= KC4
*	= 41° 26' 47.3" (LT)
D	= 19° 45' 25.8"
T	= 109.746
L	= 209.779
E	= 20.061
R	= 290.00
C	= 205.235
CB	= N 48° 54' 33.1" E
DB	= N 69° 37' 56.8" E
DA	= N 28° 11' 09.5" E
PC STA	= 5+01.295
PC X	= 2257020.7193
PC Y	= 1387350.0102
PI STA	= 6+11.012
PI X	= 2257123.5760
PI Y	= 1387388.1960
PT STA	= 7+11.075
PT X	R = 2257175.3988
PT Y	= 1387484.9020

Curve Data

N	= KC3
x	= 48° 48' 05.8" (RT)
D	= 74° 24' 36.4"
T	= 34.930
L	= 65.585
E	= 7.552
R	= 77.000
C	= 63.620
CB	= 45° 13' 53.9" E
DB	= 20° 49' 51.0" E
DA	= 69° 37' 56.8" E
PC STA	= 3+84.277
PC X	= 2256927.3335
PC Y	= 1387287.3052
PI STA	= 4+19.207
PI X	= 2256939.7550
PI Y	= 1387319.9520
PT STA	= 4+49.862
PT X	= 2256972.5012
PT Y	= 1387332.1091



REVISION DATES	

**TRANSPORTATION DIVISION
DEKALB COUNTY, GEORGIA**

SPRING CREEK ROAD SIDEWALK IMPROVEMENT

DRAWING NO
2 OF 2

ATTACHMENT C

BIDDER CONTACT INFORMATION

1. Are you a DeKalb County Firm? Yes ☐ No ☐
2. Has your firm been in Chapter 7 during the last ten (10) years? Yes ☐ No ☐

Signed, sealed, and dated this _____ day of _____, 20__

Name of Business

By: _____
(Signature of Business Representative)

Name (Typed or Printed)

Title

Responder's Mailing Address

Phone Number

Fax Number

E-Mail Address

Attachment D

Reference Form and Reference Check Release Statement

List below at least three (3) 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 service listed in the solicitation.

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

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

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

REFERENCE CHECK RELEASE STATEMENT

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

Signed _____ Title _____

(Authorized Signature of Proposer)

Company Name _____ Date _____

Attachment E

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

Federal Work Authorization
Identification Number

(Company Name)

Enrollment Date

Title of Authorized Officer or Agent of Bidder

Printed Name of Authorized Officer or Agent

Company 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 F

INSURANCE REQUIREMENTS

IMPORTANT NOTICE

IMPORTANT – 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
 - ii. Employer's liability insurance by accident, each accident **\$1,000,000**
 - iii. Employer's liability insurance by disease, policy limit **\$1,000,000**
 - iv. Employer's liability insurance by disease, each employee **\$1,000,000**
 - v. Business Auto Liability Insurance with a minimum \$500,000 Combined Single Limit/Each Occurrence (Including operation of non-owned, owned, and hired automobiles).
 - vi. 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
 - b. DeKalb County, GA shall be named as Additional Insured under any General Liability, Business Auto and Umbrella Policies. Coverage shall apply as Primary and non-contributory with Waiver of Subrogation in favor of DeKalb County, Georgia. 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.

- a. This insurance for the County as the additional insured shall be as broad as the coverage provided for the named-insured Contractor. It shall apply as primary insurance before any other insurance or self-insurance, including any deductible,
- b. Contractor agrees to waive all rights of subrogation and other rights of recovery against the County and its elected officials, officers, employees or agents, and shall cause each Subcontractor to waive all rights of subrogation for all coverages.
- c. 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.
- d. Contractor understands and agrees that the purchase of insurance in no way limits the liability of the Contractor.
- e. The insurance carrier must have a minimum A.M. Best's rating of not less than "A" (Excellent) with a Financial Size Category of VII or better.
- f. Certificates to contain policy number, policy limits and policy expiration date of all policies issued in accordance with this contract.
- g. Certificates to contain the location and operations to which the insurance applies.
- h. 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.
- i. 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.
- j. Certificates shall be issued and delivered to the County and must identify the "Certificate Holder" as follows:
- k. 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.

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