



## MEMORANDUM

TO: Prospective Bidders

FROM: William P. Gilliland, Purchasing Director

RE: Request for Bid - #020-15

DATE: May 11, 2015

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Enclosed you will find the necessary information for preparing and submitting your bid for the **Oostanaula River Screen Removal, Repair and Reinstallation** for the City of Rome Water Filter Plant. Interested firms wishing to view the work area may contact Wayne Stanley at 706- 236-4527 to make an appointment.

All questions and answers must be submitted simultaneously via e-mail to Bill Gilliland at [bgilliland@romegeorgia.us](mailto:bgilliland@romegeorgia.us) and Wayne Stanley at [wstanley@romegeorgia.us](mailto:wstanley@romegeorgia.us). All questions and answers will be posted on the City of Rome website [www.romegeorgia.us](http://www.romegeorgia.us). It is the responsibility of interested firms to visit the site often to receive any new information that may be posted.

The deadline for submitting your bid is **June 9, 2015 at 3:00 p.m. Local time.**

If you have further questions, please do not hesitate to call my office at 706-236-4410.

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William P. Gilliland  
Purchasing Director

## INSTRUCTIONS FOR BIDDERS

I. Bids must be received by **June 09, 2015 at 3:00 p.m.**

II. Bids must be delivered to:

City of Rome  
601 Broad Street  
P.O. Box 1433  
Rome, Georgia 30162

III. Bids must be sealed and marked:

**“020-15 - Oostanaula River Screen Removal, Repair and Reinstallation”**

IV. Bids must be complete and include:

- A. Completed Bid Proposal Form
- B. Executed Affidavit of Non-Collusion
- C. Executed Certificate of Non-Discrimination
- D. Executed Bidder's Declaration
- E. Prompt Payment Affidavit
- F. Request for Taxpayer I.D. Number
- G. SAVE Affidavit
- H. E-Verify Affidavit

All bids submitted shall be subject to acceptance or rejection and the City of Rome specifically reserves the right to accept or reject any or all bids, to waive any technicalities and formalities in the bidding.

Bidder shall submit all required forms and information simultaneously with sealed bids, which forms and information become a part of the property of the City of Rome and will not be returned to bidders unless a written request to withdraw is received prior to **June 09, 2015 @ 3:00 p.m.**

V. Payment:

When contracts are awarded, payment by the City of Rome will be the normal 30-day cycle. However, the City does make every effort to honor all discounts.

## REQUIREMENTS FOR BIDDERS

These items apply to and become a part of the terms and conditions of the bidders bid. Any exceptions must be in writing.

Notice is hereby given that the City of Rome will receive sealed bids from interested parties until **June 09, 2015 at 3:00 p.m.** at its offices located at 601 Broad Street, Rome, Georgia 30162-1433.

Any bids received thereafter will not be considered.

Bids will be publicly opened and read at the City of Rome Purchasing Department located at 601 Broad Street on the day and at the hour specified.

The purchaser may consider as non-responsive, any bid in which there is an alteration of, or departure from the bid form hereto attached.

The bid will be awarded to the lowest responsive and responsible bidder complying with the conditions of the invitation for bid. The bidder to whom award is made will be notified at the earliest possible date. The purchaser reserves the right to reject the bid of a bidder who has previously failed to perform properly or complete on time, contracts of a similar nature, or the bid of a bidder who, in the sole opinion and discretion of the purchaser is not in a position to perform the contract, or whose name appears on the United States Comptroller General's list of ineligible contractors.

Bids may be withdrawn by written or faxed request, provided such withdrawals are received prior to bid opening date.

NOTE: Unless stated on the bid form the bid submitted will assume all specifications will be met. Please note on the bid form all exceptions.

**Bid Specifications**  
**Screen Removal, Repair and Reinstallation**

The purpose of this specification is to describe work required for the removal of the existing screening system at the Oostanaula River, Water Pump Station, repair as described and reinstall. It is the intention of the City of Rome to award a contract that is all inclusive of labor, tools, equipment and materials necessary for this job to be satisfactorily completed. Any component that is not identified in this specification that is clearly required to properly complete this work must be provided. Two (2) round trips will be necessary for this rebuild project.

1. The contractor will provide trained personnel to begin preparations for the removal and they will comply with all required site specific safety education and any pre-job meetings. The contractor will provide a Job Hazard Analysis, a Job Hazard Mitigation Plan, and any other required forms and filings prior to the start of any work.

Bidders Response: \_\_\_\_\_

2. The contractor will proceed with the Lock-out/Tag-out of the Traveling Water Screen. An electrician will be provided by the contractor to disconnect all electrical wiring to the machine.

Bidders Response: \_\_\_\_\_

3. The contractor will supply a mobile hydraulic crane for all lifting requirements. The contractor will remove the front and rear covers from the machine and will place in a safe area to be designated by the City Project Manager for storage until return for reassembly.

Bidders Response: \_\_\_\_\_

4. Remove the existing 6'10" x 32'0" Thru Flow Traveling Water Screen. The machine will be removed in one complete piece and transported to the contractor's facility for rebuild. Rebuild should include disassembled, sandblasted and a written report provided detailing the condition and extent of repairs needed.

Bidders Response: \_\_\_\_\_

5. If the City representative is unable to come to the vendor location, electronic images must be provided via e-mail to Wayne Stanley, wstanley@rome.us for review.

Bidders Response: \_\_\_\_\_

6. Install new chain guides on the main frame.

Bidders Response: \_\_\_\_\_

7. Install new track and filler bars and extension shoes in the boot section.

Bidders Response: \_\_\_\_\_

8. The boot plate must be inspected and the City notified if repairs or replacement is required.

Bidders Response: \_\_\_\_\_

9. Reassemble entire frame assembly with new stainless steel hardware and coat with 8-24 mils DFT of a potable water coating.

Bidders Response: \_\_\_\_\_

Note: Due to the nature of the structural shapes used in the main frame, it may be necessary to coat some areas multiple times. This accumulation of coating may cause the final DFT to be excessive in some areas. If it is done in multiple coats, allowing the necessary drying time between each coat, the excessive paint in some areas is acceptable.

Bidders Response: \_\_\_\_\_

10. The head shaft assembly must be disassembled and the following new parts installed.
- . New 410 Stainless steel tooth inserts.
  - . New bronze bushings installed in the existing take-up housings.
  - . New thrust bearings in capstans.
  - . New keys and new 18-8 stainless steel hardware.

Bidders Response: \_\_\_\_\_

11. The foot shaft assembly must be disassembled and the following new parts installed.
- . New bronze foot shaft bushings
  - . New set collars and keys
  - . New 18-8 stainless steel hardware

Bidders Response: \_\_\_\_\_

12. Install new extended life, maintenance free carrier chain with extended life Nitronic 60 bushings.

Bidders Response: \_\_\_\_\_

13. The existing baskets will be sandblasted with the basket disassembled, coated with 8 – 24 mils of potable water paint and reinstalled with new 18-8 stainless steel hardware, including the coating of the frames and clamp straps.

Bidders Response: \_\_\_\_\_

14. Spray wash system should have a new 2” diameter feed pipe and six (6) bronze v-jet spray nozzles installed. **NOTE:** The spray header should be returned positioned exactly as it is received.

Bidders Response: \_\_\_\_\_

15. The existing motor and reducer should be visually inspected, test run, painted and reinstalled on the screen. When necessary, the motor, coupling and reducer should be dial indicated before it leaves the vendor shop to insure the proper screen operation.

Bidders Response: \_\_\_\_\_

16. The screen will be returned to the customer facility fully assembled ready for installation into the well.

Bidders Response: \_\_\_\_\_

17. The work crew should be trained in the mechanics of traveling water screens and should be trained in the removal, installation, and performance of any other task required for the proper and efficient operation of our raw water intake screening equipment.

Bidders Response: \_\_\_\_\_

18. Contractor must provide:

- All tools, labor and supervision necessary for a turn-key project.
- Topside burning equipment
- Submersible pump with 300 feet of discharge hose
- Mobile hydraulic crane
- All necessary rigging
- All underwater welding equipment, fittings, and tools
- All safety equipment (glasses, hard hats, tape, etc.)
- All safety certifications as may be required
- Lock out/tag out for machinery
- All electrical connects/disconnects
- All equipment or materials necessary to complete the job.

Bidders Response: \_\_\_\_\_

19. City of Rome Supplies:

- 110 V and 480V power

Bidders Response: \_\_\_\_\_

20. Upon completion of the rebuild, the contractor will return to the screen to the worksite. The contractor will provide an underwater inspection. Remove any mud, silt or debris, if any is found that might damage the rebuilt screening equipment.

Bidders Response: \_\_\_\_\_

21. To complete the installation, the contractor must insure a proper fit of the equipment by performing any modifications or adjustments required . The contractor will reinstall the unit and the contractor will re-connect the spray wash system. The contractor will have an electrician secured to re-wire the machine. The contractor will complete a test run to ensure spray wash is operating properly. Once spray wash is operating properly, the contractor will replace the front and rear covers.

Bidders Response: \_\_\_\_\_

22. Acquisition of all permitting and the cost of the permitting is the responsibility of the contractor.

Bidders Response: \_\_\_\_\_

23. Necessary reporting to any government agency that is not the responsibility of the City of Rome is the responsibility of the contractor.

Bidders Response: \_\_\_\_\_

24. The contractor must provide a certificate of insurance in the amount of \$2,000,000 liability coverage and workers compensation in compliance with the laws of the State of Georgia.

Bidders Response: \_\_\_\_\_

25. The contractor must provide evidence of all training required by OSHA for confined space entry or any other safety issues that are applicable.

Bidders Response: \_\_\_\_\_

OPTIONAL COST ITEMS:

1. Provide and install two (2) Positive Tracking Foot Sprockets.

Bidders Response: \_\_\_\_\_

2. Install a new 2-7-16" diameter carbon steel foot shaft.

Bidders Response: \_\_\_\_\_

3. Install two (2) new foot shaft brackets.

Bidders Response: \_\_\_\_\_

4. Supply and install a new carbon boot plate.

Bidders Response: \_\_\_\_\_

ANY AND ALL QUESTIONS REGARDING THIS BID MUST BE SENT VIA E-MAIL SIMULTANEOUSLY TO [bgilliland@romea.us](mailto:bgilliland@romea.us) and [wstanley@romea.us](mailto:wstanley@romea.us). ALL QUESTIONS AND ANSWERS WILL BE POSTED ON THE CITY/COUNTY WEBSITE. [www.romefloyd.com](http://www.romefloyd.com). IT WILL BE THE RESPONSIBILITY OF INTERESTED PARTIES TO CHECK THE SITE FREQUENTLY TO RECEIVE ANY NEW INFORMATION THAT MAY BE POSTED.

**BID FORM**

TO: City of Rome – Purchasing Department  
P.O. Box 1433  
601 Broad Street  
Rome, Georgia 30162-1433  
ATTN: WILLIAM P.GILLILAND

**BID PKG. “020-15 - Oostanaula River Screen Removal, Repair and Reinstallation”**

Quantity	Description	Unit Price	Total
1	Oostanaula River Screen	_____	_____

TOTAL COST: \_\_\_\_\_

Expected Completion Date: \_\_\_\_\_

All bids submitted shall be subject to acceptance or rejection and the City of Rome specifically reserves the right to accept or reject any or all bids, to waive any technicalities and formalities in the bidding.

The undersigned understands that any conditions stated above, clarifications made to the above or information other than that requested should be under separate cover and to be considered only at the discretion of the Purchasing Department.

\_\_\_\_\_  
Name of Individual, Partner  
or Corporation

\_\_\_\_\_  
Company

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Company phone number



BIDDERS DECLARATION

The bidder understands, agrees and warrants:

That the bidder has carefully read and fully understands the full scope of the specifications.

That the bidder has the capability to successfully undertake and complete the responsibilities and obligations in said specifications.

That the bidder has liability insurance and a declaration of insurance form is included in the bid package.

That this bid may be withdrawn by requesting such withdrawal in writing at any time prior to **June 9, 2015 at 3:00 p.m.** but may not be withdrawn after such date and time.

That the City of Rome reserves the right to reject any or all bids and to accept that bid which will, in its opinion, best serve the public interest. The City of Rome reserves the right to waive any technicalities and formalities in the bidding.

That by submission of this bid the bidder acknowledges that the City of Rome has the right to make any inquiry or investigation it deems appropriate to substantiate or supplement information supplied by the bidder.

If a partnership, a general partner must sign.

If a corporation, the authorized corporate officer(s) must sign and the corporate seal must be affixed to this bid.

BIDDER:

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

AFFIX CORPORATE SEAL (If Applicable)

CERTIFICATE OF NON-DISCRIMINATION

In connection with the performance of work under this contract, the bidder agrees as follows:

The bidder agrees not to discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, ancestry or disability. The vendor shall take affirmative action to insure that employees are treated without regard to their race, creed, color, sex, national origin, ancestry or disability. Such action shall include, but not be limited to the following: employment, upgrading, demotion, transfer, recruiting or recruitment, advertising, lay-off or termination, rates of pay or other compensation and selection for training, including apprenticeship.

In the event of the bidder's non-compliance with this non-discrimination clause, the contract may be canceled or terminated by the City of Rome. The bidders may be declared, by the City of Rome, ineligible for further contracts with the City of Rome until satisfactory proof of intent to comply shall be made by the vendor.

The bidder agrees to include this non-discrimination clause in any sub-contracts connected with the performance of this agreement.

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BIDDER

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SIGNATURE

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TITLE

NON-COLLUSION AFFIDAVIT

The following affidavit is to accompany the bid:

STATE OF

COUNTY OF

Owner, Partner or Officer of Firm

Company Name, Address, City and State

Being of lawful age, being first duly sworn, on oath says that he/she is the agent authorized by the bidder to submit the attached bid. Affidavit further states as bidder, that they have not been a party to any collusion among bidders in restraint of competition by agreement to bid at a fixed price or to refrain from bidding; or with any office of the City of Rome or any of their employees as to quantity, quality or price in the prospective contract; or any discussion between bidders and any official of the City of Rome or any of their employees concerning exchange of money or other things of value for special consideration in submitting a sealed bid for:

FIRM NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_

NOTARY PUBLIC

CITY OF ROME, GEORGIA  
**E-VERIFY COMPLIANCE AFFADAVIT**

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

\_\_\_\_\_  
Federal Work Authorization User Identification number  
(Not Required if Less than 10 Employees)

\_\_\_\_\_  
Signature (if less than 10 employees)

\_\_\_\_\_  
Date of Authorization

\_\_\_\_\_  
Name of Contractor

\_\_\_\_\_  
Name of Project

\_\_\_\_\_  
Name of Public Employer

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

Executed on \_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_ in \_\_\_\_\_(city) \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature of Authorized Officer or Agent

\_\_\_\_\_  
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME  
ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Expires:

CITY OF ROME, GEORGIA

SAVE COMPLIANCE AFFADAVIT

O.C.G.A § 50-36-1(e) (2) Affidavit

By executing this affidavit under oath, as an applicant for a (n) Contract or Services, as referenced O.C.G.A. C. § 50-36-1, from the City of Rome, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) \_\_\_\_\_ I am a United State citizen.
- 2) \_\_\_\_\_ I am a legal permanent resident of the United States
- 3) \_\_\_\_\_ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.  
My alien number issued by the Department of Homeland Security or other federal immigration agency is: \_\_\_\_\_.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e) (1), with this affidavit. The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Name of Applicant Printed

SUBSCRIBED AND SWORN

BEFORE ME ON THIS THE

\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Expires:

**Request for Taxpayer  
Identification Number and Certification**

**Give Form to the  
requester. Do not  
send to the IRS.**

Print or type  
See Specific Instructions on page 2.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
<b>5</b> Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code	
<b>7</b> List account number(s) here (optional)	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>	
□ □ □ □ - □ □ - □ □ □ □ □ □	
<b>or</b>	
<b>Employer identification number</b>	
□ □ □ □ - □ □ □ □ □ □ □ □ □ □	

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	<b>Signature of U.S. person ▶</b>	<b>Date ▶</b>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

**CITY OF ROME**

**DRUG-FREE WORKPLACE CERTIFICATE**

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By signature on this certificate, the Bidder certifies that the provisions of O.C.G.A. Section 50-24-1 through 50-24-6 related to the "Drug-Free Workplace Act" will be complied with in full. The Bidder further certifies that:

1. A drug-free workplace will be provided for the Bidder's employees during the performance of the contract; and
2. Each contractor who hires a subcontractor to work in a drug-free workplace shall secure from that subcontractor the following written certification: "As part of the subcontracting agreement with (contractor's name), (subcontractor's name) certifies to the contractor that a drug-free workplace will be provided for the subcontractor's employees during the performance of this contract pursuant to O.C.G.A. Section 50-24-3(b)(7)."

By signature on this certificate, the Bidder further certifies that it will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

Bidder: \_\_\_\_\_

By: \_\_\_\_\_

Name Printed: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_