



**REQUEST FOR STATEMENTS OF QUALIFICATIONS
AIRPORT CONSULTING ENGINEERING SERVICES
RFQ 16-0211**

Georgia, Floyd County
January 8, 2016

TO WHOM IT MAY CONCERN:

The Floyd County Board of Commissioners, in association with its Airport Commission, requests "STATEMENTS OF QUALIFICATIONS" from qualified firms to engage the services of a consulting firm for planning, design, and construction administration services in connection with the Airport Capital Improvement Plan at the Richard B. Russell Regional Airport. Notices of Requests for Statements of Qualifications will only be provided to qualified consulting firms that are currently GDOT approved in Area Classes No. 1.08, Airport Master Planning and 2.09 Aviation.

The required format and details for submitting the Statements of Qualifications may be obtained by request via e-mail to Floyd County Purchasing lamn@floydcountyga.org. The documents are also available for inspection and download on the County website: <http://www.romefloyd.com/> or the Georgia Procurement Registry (GPR) <https://ssl.doas.state.ga.us/PRSapp/PRindex.jsp>. This is NOT a request for a priced proposal. Statements must be sealed, delivered to or in person, and marked "AIRPORT CONSULTING ENGINEERING SERVICES" on the outside of the envelope.

Qualifications will be received by Floyd County Board of Commissioners, Purchasing Department, 12 E. 4th Ave., Suite 106, Rome, Georgia 30161 until 2:00 PM local time on February 11, 2016. Late qualifications will not be considered nor returned. Qualifications will be formally accepted and the names of those submitting read aloud by staff personnel after the closing date and time.

Floyd County reserves the right to reject any or all qualifications and to waive informalities in qualifications or the qualification process. In the event that no qualification substantially satisfies the specified requirements as presented in the Request for Qualification, the County, at its sole discretion, reserves the right to call for a new Request for Qualification.

All questions regarding this RFQ must be in writing and addressed to Nancy Lam, Floyd County Purchasing Department, 12 E. 4th Ave., Rome, Georgia 30161. Correspondence may be e-mailed to lamn@floydcountyga.org. The Purchasing Department shall not be responsible for US Mail, common carrier or electronic services. All questions must be received by 2:00PM (local time) on January 25, 2016, questions may not be answered after this time and date.

Floyd County is an Equal Opportunity Employer.

Nancy Lam, Purchasing Director
Legal ad to run, January 8 and January 15, 2016
PO# 160041



**NOTICE OF REQUEST FOR STATEMENT OF QUALIFICATIONS
AIRPORT CONSULTING ENGINEERING SERVICES
16-0211**

The Floyd County Board of Commissioners, in association with its Airport Commission, is seeking a qualified aviation consulting firm to provide professional planning, engineering, architectural, and construction administration services in connection with the Airport Capital Improvement Plan at the Richard B. Russell Regional Airport in Rome, Georgia.

It is the intent of the Floyd County Board of Commissioners to enter into a multi-year Master Agreement with a consultant for the upcoming five (5) year period. The selected consultant will negotiate and enter into individual sub-agreements for services, based on the scope of work, with the Floyd County Board of Commissioners on an assignment-by-assignment basis during the term of the Master Agreement. The selection of the consultant is being done in accordance with FAA Advisory Circular 150/5100-14E and applicable Georgia statutes and laws. Responding firms must possess a current pre-qualification by the Georgia Department of Transportation in Area Classes No. 1.08 Airport Master Planning and No. 2.09 Aviation.

The consultant and any subconsultants proposed shall not discriminate on the basis of race, color, national origin, or sex in the performance of this contract. Disadvantaged Business Enterprise (DBE) utilization is strongly encouraged. Proposed DBE firms are to be certified by the Georgia Uniform Certification Program. The consultant shall carry out applicable requirements of 49 CFR Part 26 in the award and administration of all Federally-assisted contracts. Failure by the consultant to carry out these requirements is a material breach of the contract, which may result in the termination of the contract or such other remedy as the Floyd County Board of Commissioners deems appropriate.

The Floyd County Board of Commissioners reserves the right to reject any and all submittals in response to this Request for any reason. The Floyd County Board of Commissioners is not liable for any costs incurred by the Consultant in the preparation or presentation of a response to this request.

Scope of Services

The scope of work to be included in the multi-year contract may include, but is not limited to, the following:

- a. Prepare Project Funding Applications and Capital Improvements Program (CIP) Documents.
- b. Perform Design, Bidding and Negotiation, Construction Administration, and Resident Inspection Services.
- c. Assist with DBE Program Overall Goal Updates / Program Administration.
- d. Prepare/Update Exhibit "A" Property Line Map, Airport Layout Plan, and other planning studies.
- e. Prepare/Update Environmental Assessments, Mitigation/Permitting Applications, and other environmental studies.
- f. Construct/Rehabilitate Airfield Pavements (Runways / Taxiways / Aprons).
- g. Construct/Rehabilitate Airfield Electrical Systems (Lighting / Visual NAVAIDs / ILS).
- h. Construct/Renovate Airport Buildings (Hangars / Terminal Buildings).

- i. Construct/Rehabilitate Airport Roadways and Parking Lots.
- j. Install/Upgrade Airport Fencing and Security Systems.
- k. Acquire Land and/or Avigation Easements.
- l. Such other airport-related work as Floyd County may deem necessary.

NOTE: The citizens of Floyd County have passed a SPLOST which includes a 1000' Runway Extension for Runway 1/19 for Russell Regional Airport. The engineering and environmental work is planned to begin in 2016. The Scope of Service may also include the ability to design and manage, as needed, the entire project from start to finish.

Submission Requirements

Required information is to be presented in a manner that clearly illustrates the following:

1. **Team Description / Background:** A general description of the primary firm, including firm size and number of employees within the local office, as well as general information regarding any sub-consultant firms.
2. **Organizational Chart:** Include clear illustration as to the Project Manager and key personnel representing the primary firm.
3. **Resumes:** Include for key personnel. Indicate each individual's qualifications and experience.
4. **Relevant Experience:** Qualifications and experience of the primary firm in the past five (5) years at general aviation airports of regional significance (i.e. GASP Level 3 or larger) similar in nature to the Richard B. Russell Regional Airport and other airports in Georgia.
5. **Proximity to the Richard B. Russell Regional Airport:** Geographical location of the office that will be primarily responsible for assigned projects and where the work will be accomplished, as well as the location of any supporting offices that will likely be involved in this contract.
6. **References:** Contact name, agency name, and telephone number of at least four (4) current airport clients of the primary firm located within Georgia.
7. **Regulatory Familiarity:** Demonstrate familiarity with the Federal Aviation Administration (FAA) Atlanta District Office and Georgia Department of Transportation (GDOT) Aviation Programs.
8. **Workload:** Provide a brief summary of the primary firm's current workload and its ability to meet schedules and deadlines.

Evaluation Criteria

The criteria to be used in the selection of the consultant are as follows:

1. Firm Qualifications and Experience
2. Key Personnel Qualifications and Experience
3. Relevant Project Experience
4. Geographical Location
5. References
6. Familiarity with the FAA, GDOT Aviation Programs

7. Workload and Performance on Past Similar Projects

8. Responsiveness to the RFQ

All interested parties should submit four (4) bound copies of the Statement of Qualifications, and one (1) electronic copy, which shall contain no more than thirty (30) pages, excluding tabs, Floyd County Forms and a cover letter not exceeding two (2) pages. Submittals shall be printed single-sided on 8.5" x 11" paper and electronic copy submitted on CD or Thumb Drive.

Responses are to be addressed to:

MS. NANCY LAM, DIRECTOR
FLOYD COUNTY PURCHASING DEPARTMENT
12 E. 4TH AVE., SUITE 106
ROME, GA 30161

Deadline for submittal is 2:00 p.m., February 11, 2016. The Statement of Qualifications should be delivered in a sealed envelope or box clearly marked, "Airport Consulting Engineering Services." The Floyd County Board of Commissioners shall assume no responsibility for responses that are received after the prescribed time, or that are not properly addressed or identified.

Please submit all questions regarding this RFQ via e-mail to Nancy Lam @ lamn@floydcountyga.org. The deadline for questions shall be 2:00 p.m. on January 25, 2016. **Responding firms shall have no contact related to this solicitation with Floyd County Board of Commissioners elected or appointed officials, members of the Floyd County Airport Commission, or Floyd County employees during this Statement of Qualifications process.** Any such contact will subject the firm to immediate disqualification for consideration for this project.

This is a Request for Qualifications only. Price proposals are not required at this time.

Selection Process

Qualifications will be reviewed and evaluated by a Selection Committee based on the criteria listed herein. At the discretion of the Selection Committee, consultants may or may not be invited to participate in an interview. It is the intent of the Floyd County Board of Commissioners to select a consultant as a result of this effort.

FLOYD COUNTY BOARD OF COMMISSIONERS
PURCHASING DEPARTMENT
12 EAST 4TH AVE. SUITE 106
ROME, GA 30161

(706) 291-5118

FAX (706) 290-6099

BIDDERS INFORMATION

Date of Bid: _____

Bid Name: _____

The undersigned agrees, if this bid is accepted within Sixty (60) calendar days after date of opening, to furnish all supplies and/or services in strict accordance with provisions of this Invitation for Bid at the price in the **BID SCHEDULE**.

Time Discounts: Discounts allowed for prompt payment as follows: Discounts of less than Fifteen (15) days will not be used in determining the award of a bid but may be used when paying invoices.

_____ % Discount _____ Calendar Days net _____ (discounts will apply if Procurement Card is accepted).

Procurement Card: Will you accept the VISA Procurement Card for this order? _____

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a bid for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I understand that collusive bidding is a violation of State and Federal law and can result in fines, prison sentences, and Civil Damage Awards. I agree to abide by all Conditions of this bid and certify that I am authorized to sign this bid for the bidder.

This _____ Day of _____, 201____

Prices to remain firm for Sixty (60) calendar days or _____ calendar days after date of opening. Vendor MUST initial here: _____.

Bidder Information
(Type or Print)

Name and Mailing Address
of where to send payments

Name of Company

Name of Company

Address

Address

City, State Zip Code

City, State Zip Code

(_____) _____
Phone Number

(_____) _____
Phone Number

(_____) _____
Fax Number

Federal ID #

Email _____

Name and Title of Person
authorized to Sign

Name

Title

Signature

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

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 Floyd County 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

Date of Authorization

Name of Contractor

Address of Contractor

Name of Project

FLOYD COUNTY GEORGIA
Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, ____ in 201__ 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 _____, 201__.

NOTARY PUBLIC

My Commission Expires:

(Notary Seal or Stamp Required)

Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor 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 under a contract with _____ (name of contractor) on behalf of FLOYD COUNTY, GA 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 subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Address of Contractor

Name of Project

FLOYD COUNTY GEORGIA
Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, ____ in 201__ 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 _____, 201__.

NOTARY PUBLIC

My Commission Expires:

(Notary Seal or Stamp Required)

ATTACHMENT

**FLOYD COUNTY BOARD OF COMMISSIONERS
DRUG-FREE WORKPLACE CERTIFICATE**

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

1. A drug-free workplace will be provided for the Vendor's employees during the performance of the contract; and
2. Each Vendor who hires a subVendor to work in a drug-free workplace shall secure from that subVendor the following written certification: "As part of the subcontracting agreement with (Vendor's name), (subVendor's name) certifies to the Vendor that a drug-free workplace will be provided for the subVendor'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 Vendor 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 this contract.

Vendor: _____

By: _____

Name Printed: _____

Title: _____

Date: _____



CERTIFICATE OF NON-COLLUSION

By responding to this solicitation, the supplier understands and agrees to the following:

1. That the submitted response constitutes an offer, which when accepted in writing by Floyd County, and subject to the terms and conditions of such acceptance, will constitute a valid and binding contract between the undersigned and Floyd County; and
2. That the supplier has read the specifications and requirements shown or referenced in the solicitation and that the supplier's response is made in accordance with the provisions of such specifications and requirements except as expressly stated otherwise in the supplier's response; and
3. That the supplier guarantees and certifies that all items included in the supplier's response meet or exceed any and all such stated specifications and requirements of the solicitation except as expressly stated otherwise in the supplier's response; and
4. That, if awarded a contract, the supplier will deliver goods and/or services that meet or exceed the specifications and requirements of the solicitation except as expressly stated otherwise in the supplier's response; and
5. That the response submitted by the supplier shall be valid and held open for a period of **one hundred and twenty (120) days (or such other time period as identified in the solicitation)** from the final solicitation closing date and that the response may be held open for an additional period of time subject to the supplier's consent; and
6. That the supplier's response is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a response for the same materials, supplies, equipment, or services and is in all respects fair and without collusion or fraud. The supplier understands and agrees that collusive bidding is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards; and
7. That the provisions of the Official Code of Georgia Annotated, Sections 36-91 have not been violated and will not be violated in any respect.

DO NOT MODIFY THE BID/PROPOSAL CERTIFICATION TERMS IN ANY WAY. THIS FORM MUST BE COMPLETED, SIGNED AND SUBMITTED WITH YOUR RESPONSE.

Contractor's Full Legal Name: (PLEASE TYPE OR PRINT)	
Authorized Signature:	
Printed Name and Title of Person Signing:	
Date:	
Company Address:	
FAX Number:	
Email Address:	
*This table must be completed in its entirety by the supplier.	

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 Floyd County Board of Commissioners. The bidder may be declared, by Floyd County , ineligible for further contracts with Floyd County 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.

BIDDER

SIGNATURE

TITLE

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 this bid may be withdrawn by requesting such withdrawal in writing at any time prior to Feb 11, 2014 at 2:00pm but may not be withdrawn after such date and time.

That Floyd County reserves the right to waive compliance by any applicant with any provision contained in this request whenever the County in its sole discretion believes such waiver is in the County's best interests

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

That the accompanying bid is not the result of or affected by, any act of collusion with another person or company engaged in the same line of business or commerce, or any other fraudulent act punishable under Georgia or United States law.

BIDDER:

Company Name: _____

Phone: _____

Authorized Representative: _____

Signature: _____

Date: _____

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.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	Floyd County Board of Commissioners P.O. Box 946 Rome, GA 30161
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 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 chart on page 4 for guidelines on whose number to enter.

Social security number
: : : :
or
Employer identification number
: : : :

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).

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 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 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.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,