



Mountain Area Regional Transit Authority
41939 Fox Farm Road
Big Bear Lake CA 92315

BUS STOP IMPROVEMENT PROJECT
Request for Qualifications (RFQ)
No. 2020-001

<i>RFQ release date:</i>	<i>May 8, 2020</i>
<i>Submit questions via email to: jserrano@mountaintransit.org</i>	<i>May 15, 2020</i>
<i>RFQ completed submissions must be received by:</i>	<i>May 29, 2020</i>
<i>First set of bids will be released to approved contractors:</i>	<i>June 5, 2020</i>

Table of Contents

1.	OVERVIEW OF THE REQUIREMENT	3
2.	STATEMENT OF QUALIFICATION	3
3.	REQUEST FOR QUALIFICATIONS	3
3.1	CONTACTS.....	3
3.2	CLOSING DATE.....	3
3.3	LATE RESPONSES.....	4
3.4	QUALIFICATIONS REVIEW COMMITTEE.....	4
3.5	REVIEW AND SELECTION.....	4
3.6	SIGNED RESPONSES.....	4
3.7	ACCEPTANCE OF RESPONSES	4
3.8	SERVICES	4
4.	EVALUATION CRITERIA	4
5.	SUBMISSION REQUIREMENTS	4
6.	GENERAL PROVISIONS	5
6.1	CONFLICT OF INTEREST	5
6.2	CONTRACT BONDS	5
6.3	LICENSES	5
6.4	STATE SOCIAL SECURITY LEGISLATION.....	5
6.5	PREVAILING WAGES.....	5
6.6	REGISTRATION OF CONTRACTORS	5
6.7	PERMIT AND LICENSES.....	6
6.8	DISCRIMINATION.....	6
6.9	GOVERNING LAWS.....	6
7.	APPENDIX A - STATEMENT OF QUALIFICATIONS FORM PAGES 7-14	

1. Overview of the Requirement

The Mountain Area Regional Transit Authority, operating as Mountain Transit, is the third largest regional transit agency in San Bernardino County, California. Mountain Transit serves the San Bernardino Mountain communities of Crestline, Lake Arrowhead, Running Springs, and Big Bear Lake, providing local service for more than 163,000 passengers each year. Our goal is to work with local jurisdictions to provide the riding public safe bus stop locations that comply with the Americans with Disabilities Act (ADA) and other federal and state accessibility mandates.

Respondent/Contractor experience, skills and knowledge must include, but is not limited to: land use ordinances, pad placement, landing area design, curb and gutter removal, bus shelter removal and installation, concrete and asphalt construction, familiarization with local comprehensive plan policies and ADA compliance. Contractors must also have a wide experience working in a variety of mountain landscapes and in all aspects of cold weather conditions.

2. Statement of Qualifications

A written Statement of Qualifications shall be submitted by the respondent on the form provided by Mountain Transit, together with any required attachments, describing certain information regarding the organizational structure, financial resources and other information of contractor. The Statement of Qualifications shall contain concise written material and documents to enable a clear understanding of the capabilities of the Contractor. The Contractor’s Statement of Qualifications and financial statements shall not be public records. All information required by a Contractor’s Statement of Qualifications shall be completely and fully provided. Any submission not accompanied by a Contractor’s **Statement of Qualifications form** completed with all information required may render the Proposal nonresponsive. If Mountain Transit determines that any information provided by a respondent in the Contractor’s Statement of Qualifications is false or misleading, or is incomplete so as to be false or misleading, Mountain Transit may reject the application submitted by such respondent as being non-responsive. **(SEE APPENDIX A)**

3. Request for Qualifications

3.1 Contacts

All questions related to this RFQ are to be directed, in writing, to the contact person at the email address below. Information obtained from any other source is not official and should not be relied upon. Questions regarding the review process should be directed to Operations Supervisor, Jose Serrano via phone at 909 963-7409 or email at jserrano@mountaintransit.org

3.2 Closing Date

Submissions must be received before 5:00 pm (PST), on **Wednesday, May 29, 2020** at the email address on the front cover of this RFQ. Responses must not be sent by facsimile. Email should show project title on the email subject line.

3.3 Late Responses

Late responses will not be accepted.

3.4 Qualifications Review Committee

Qualifications Review Committee will consist of the following Mountain Transit Staff: Operations Supervisors, and Maintenance Manager.

3.5 Review and Selection

Qualifications Review Committee will use the RFQ document as a tool in identifying the contractors' experience, qualifications, and safe work practices. During the Review and Selection process the Qualifications Review Committee will evaluate each contractor's Statement of Qualifications and Contractor's Experience Forms.

The qualifications review committee will check responses against the mandatory criteria. Responses not meeting all mandatory criteria will not be considered for review. Upon completion of the Review and Selection process, Mountain Transit will create a shortlist of qualified contractors. Contractors selected from the list will then be considered "vetted" and will be asked to bid on individual projects.

3.6 Signed Responses

An Authorized agent of the company must sign the last page of Appendix A prior to submitting forms electronically.

3.7 Acceptance of Responses

The sole purpose of this RFQ process is to select the most qualified contractors. It should be clearly understood that this RFQ is not a binding agreement to purchase goods or services. Responses to an RFQ are assessed considering the qualification review criteria and, if chosen for the shortlist, will be contacted for future bids.

3.8 Services

Responses to an RFQ are assessed considering the qualification review criteria and, if chosen for the shortlist, will be contacted for future bids.

4. Evaluation Criteria

Respondents will be assessed by the review committee with the following criteria which may include, but it is not limited to:

- A.** Years of experience in the field
- B.** Experience with the type of project specified in the RFQ
- C.** Proven capacity to deliver project requirements on time
- D.** Proven ability to deliver project on budget

5. Submission Requirements

Please complete and submit the following requirements:

- A.** A statement of interest
- B.** Three professional references
- C.** A completed Statement of Qualifications form (*see Appendix A*)

6. General Provisions

6.1 Conflict of Interest

The respondent should disclose conflicts of interest, in writing, to the review committee who will consider the nature of the respondent's responsibilities and the degree of potential or apparent conflict in deciding the course of action that the respondent needs to take to remedy the conflict of interest. Contractor warrants that he is and will continue to be in compliance with all applicable conflict of interest laws.

6.2 Contract Bonds

The successful bidder shall furnish to the Mountain Area Regional Transit Authority at his own expense two surety bonds. One bond shall be in the amount of 100% of the contract price to guarantee faithful performance of the contract work. The other bond, in an amount not less than 100% of the contract price shall be furnished to secure payment of those supplying labor and materials as required by the California Civil Code. Each bond shall be executed by a corporate surety acceptable to, and approved by the Mountain Area Regional Transit Authority.

6.3 Licences

At the time of the RFQ Deadline and at all times during performance of the Work, including full completion of all corrective work during the Correction Period, the Contractor must possess a California contractor license or licenses, current and active, of the classification required for the work.

6.4 State Social Security Legislation

The Contractor, at any time on request, shall satisfy the Mountain Area Regional Transit Authority that the Social Security and Withholding tax are being properly reported and paid.

6.5 Prevailing Wages

In accordance with the provisions of Section 1770 et seq., of the Labor Code, the Director of the Department of Industrial Relations of the State of California has ascertained the general prevailing rate of wages applicable to the work to be done under contract for public improvement. The Contractor will be required to pay to all those employed on the project sums not less than the sums set forth in the documents entitled "General Prevailing Wage Determination made by the Director of Industrial Relations pursuant to California Labor Code Part 7, Chapter 1, Article 2, Sections 1770, 1773, 1773.1 and 1776."

6.6 Registration of Contractors

Only a Contractor licensed in accordance with the provisions of Chapter 9, Division 3, of the Business and Professions Code, beginning at Section 7000, shall be permitted to enter into a contract with the Mountain Area Regional Transit Authority for any public improvements.

6.7 Permits and Licenses

The Contractor shall procure all permits and licenses, (including a business license of the City or Town in which the project is located, if required), pay all charges and fees and give all notices necessary and incidental to the due and lawful procedure of the work.

6.8 Discrimination

Contractor represents that it has not, and agrees that it will not, discriminate in its employment practices on the basis of race, creed, religion, national origin, color, sex, age or handicap.

6.9 Governing Law

This Contract and any dispute arising hereunder shall be governed by the law of the State of California.

APPENDIX A

STATEMENT OF QUALIFICATIONS FORM

ORGANIZATION

1. How many years has your organization been in business under its present name and California contractor license number used for this Proposal for Qualifications?

2. Under what other names has your organization operated?

3. If your organization is a corporation, answer the following:

a) Date of incorporation/organization: _____

b) State of incorporation/organization: _____

c) Corporate ID number: _____

d) Name of President: _____

e) Name of Authorized Agents if other than Owner/Company President:

4. If your organization is a partnership, answer the following:

a) Date of organization/formation: _____

b) Type of partnership (if applicable): _____

c) Name(s) of general partner(s): _____

d) List all states in which you are registered and state ID numbers for each:

5. If your organization is individually owned, answer the following:

a) Date of organization: _____

b) Name of Authorized Agents if other than Owner/Company President:

6. If the form of your organization is other than those listed above, describe it and name the principals:

LICENSING

1. List jurisdictions in which your organization is legally qualified to do business, indicate registration or license numbers, and category of license, if applicable.
(Continued on next page)

2. List jurisdictions in which your organization's partnership or trade name is filed.

3. List any licensing suspensions and/or violations assessed against your organization within the past five years.

4. List your contractors' classification and number (s):

EXPERIENCE

1. List the categories of Work that your organization normally performs with its own personnel.

2. Please give contact information for three (3) projects you have completed or worked on in the past 5 years.

CLAIMS: LAWSUITS:

For the following questions, the term "owner" does not include owners of stock in your firm if your firm is a publicly traded corporation.

1. In the past five years, has your firm or any of its owners, partners, officers, or employees been a defendant in court, or participated in an arbitration or mediation, or administrative hearing on a matter related to:

- a) The performance, non-performance, default, violation, or breach of a contract or agreement? YES NO
- b) A vehicle collision or accident involving your firm's employees? YES NO
- c) Damage to real property arising out of your services or operations? YES NO
- d) Employment-related litigation brought by an employee of your firm? YES NO

2. Payment to a subcontractor or supplier? YES NO

- a) Federal Davis Bacon or California Labor Code requirements relating to underpayment of wages, failure to maintain or produce payroll records, failure to use apprentices in appropriate ratios, or failure to maintain workers compensation insurance? YES NO
- b) Defective, deficient, or substandard work? YES NO

If the answer to any question in **1-a** or **2-b** is YES, identify the name of the person or entity that sued (i.e., "the plaintiff") or was involved in the mediation or arbitration; list the date, court, court address, and case number; describe the facts and circumstances giving rise to the lawsuit, mediation, or arbitration; and set forth the outcome or disposition. **Attach additional sheets, as necessary.**

3. Has your firm ever filed a claim for damages or a lawsuit, or requested arbitration or mediation, against a government entity or a Client? YES NO

If YES, identify the government entity or client; list the date, court, and case number; describe the facts and circumstances about the claim for damages, or the lawsuit, or both; and set forth the outcome or disposition. **Attach additional sheets, as necessary.**

4. Are there any pending or outstanding judgments or liens against your firm or any of its owners, partners, officers, or employees? YES NO

If YES, identify the name of the person or entity entitled to payment; list the date court and case number; describe the facts and circumstances giving rise to the judgment or lien; and set forth the amount of the judgment or lien. **Attach additional sheets, as necessary.**

5. In the past five years, has any government entity ever: (a) investigated, cited, disciplined, or assessed any penalties against your firm or any of its owners, partners, officers, or employees, or (b) determined or concluded that your firm or any of its owners, partners, officers, or employees violated any laws, rules, or regulations?

YES NO

If YES, identify the government entity; list the date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

6. In the past five years, has a government entity determined or concluded that your firm or any of its owners, partners, officers or employees made or submitted a false claim (including a false claim for payment), or made a material misrepresentation?

YES NO

If YES, identify the government entity, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

7. Have you or your company ever been charged by any governmental agency for failure to follow safety procedures? YES NO

If YES, explain. **Attach additional sheets, as necessary.**

8. Has any governmental agency ever submitted a complaint against you to the California State Labor Commission for failure to submit certified payrolls or use apprentices in proper ratios? YES NO

If YES, explain. **Attach additional sheets, as necessary.**

9. List all Civil Wage and Penalty Assessments date and dollar amount issued against you or one of your subcontractors by any of the following entities: the California Department of Industrial Relations, a California public entity, or federal public entity, in the last five years and explain how the assessment was resolved. **Attach additional sheets, as necessary.**

FIRM'S OPERATIONAL STATUS

1. In the past seven years, has your firm, or anyone else acting on behalf of your firm, filed for bankruptcy, insolvency, receivership, or reorganization? YES NO

If YES, list the filing date, identify the court, and case number; describe the facts and circumstances giving rise to each instance; and set forth the disposition or current status. **Attach additional sheets, as necessary.**

2. In the past five years, has your firm had any consolidations, mergers, acquisitions, closings, layoffs, or staff reductions? YES NO

If YES, list the filing date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

3. Is your firm in the process of, or in negotiations toward: (a) consolidating, merging, or closing its business, or (b) laying off employees or reducing staff? YES NO

If YES, describe the transaction; list the anticipated date for completing the transaction, laying off employees, or reducing staff; and describe the facts, circumstances, and reason for taking the action. **Attach additional sheets, as necessary.**

PROPOSAL: DEBARMENT: CONTRACT PERFORMANCE

1. Has a government entity ever debarred, disqualified, removed, suspended, or otherwise prevented your firm from Proposal on, contracting, or completing a project?

YES NO

If YES, identify the name of the government entity, list the date, and describe the facts and circumstances about each instance, and state the reason for the government entity's action against your firm. **Attach additional sheets, as necessary.**

2. Has a government entity ever rejected your firm's Proposal or Proposal on the ground that your firm is a "non-responsible" Proposer or proposer? YES NO

If YES, identify the name of the government entity, list the date, describe the facts and circumstances about each instance, and state the reason or basis for the government entity's determining that your firm was a "non-responsible" Proposer. **Attach additional sheets, as necessary.**

3. Has your firm ever failed to fulfill or perform - either partially or completely - a contract or an agreement with a government entity or a client? YES NO

If YES, identify the name of the government entity or client, list the date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

4. Has your firm ever requested a government entity or a client, while your firm was under contract with the government entity or client, to: (a) cancel the contract or agreement. YES NO

If YES, identify the name of the government entity or client, list the date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

5. Has a government entity or a client ever terminated, suspended, or non-renewed your firm's contract or agreement before its completion? YES NO

If YES, identify the name of the government entity, list the date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

6. Has a government entity or a client ever notified or advised your firm that your firm's performance under a contract or agreement was poor, sub-standard, deficient, or non-compliant? YES NO

If YES, identify the name of the government entity or client, list the date, and describe the facts and circumstances about each instance. **Attach additional sheets as necessary.**

7. In the past five years, has your firm paid, or has your firm been assessed, liquidated damages on a contract or agreement? YES NO

If YES, identify all such contracts/projects by owner, owner's address, the date of completion of the project, amount of liquidated damages assessed, and all other information necessary to fully explain the assessment or payment of liquidated damages. **Attach additional sheets as necessary.**

INSURANCE AND BONDS

In the past ten years, has an insurance company or a surety company:

- 1. Refused to insure your firm for liability coverage? YES NO
- 2. Canceled or non-renewed your firm's insurance coverage? YES NO
- 3. Refused to issue your firm a bond? YES NO
- 4. Canceled or revoked a bond obtained by your firm? YES NO
- 5. If the answer to any question in 1 to 4 is YES, identify the name of the insurance company or surety company, list the date, and describe the facts and circumstances about each instance. **Attach additional sheets, as necessary.**

SURETY

- 1. If a performance and/or payment bond is required for a Proposal, identify the bonding company if arrangements for the bond have been made; if not, identify the bonding company for the Contractor's most recent project:
- 2. Name and address of agent:

I, the undersigned, certify and declare that I have read all the foregoing answers to the questionnaire and know the contents. The matters stated in the questionnaire answers are true of my own knowledge and belief, except as to those matters stated on information and belief, and as to those matters, I believe them to be true. I declare under penalty of perjury under the laws of the State of California, that the foregoing is correct and that this declaration is executed on _____, (date) at

_____ (city, state)

By: _____ Signature

Name: _____ Printed

Title: _____ Printed

[END OF DOCUMENT]