



CITY OF TAMPA, FLORIDA - RFQ  
c/o Contract Administration Department  
306 E. Jackson Street # 280A4N  
Tampa, FL 33602

## 16-D-00004; Utility Locating Services

RFQ - PUBLIC ANNOUNCEMENT IN COMPLIANCE WITH REQUIREMENTS OF CHAPTER 287.055, LAWS OF FLORIDA, CONSULTANTS COMPETITIVE NEGOTIATION ACT, AS AMENDED, THE CITY OF TAMPA'S EQUAL BUSINESS OPPORTUNITY PROGRAM, AND APPLICABLE FEDERAL LAW.

**RFQ - 16-D-00004** - The City of Tampa desires to obtain Professional Engineering services consisting of underground utility locating services for the City of Tampa Water Department.

Services consist of utility locating services as required by the Underground Facility Damage Prevention and Safety Act as contained in Florida Statutes Chapter 566. These services include receiving tickets from the Sunshine 811 of Florida (811), researching record drawings, field locating utilities, and closing-out 811 tickets. Other services may include: 1. Subsurface Utility engineering using vacuum excavations, ground penetrating radar, or other means; 2. Professional Land Surveying of existing utilities. 3. Assisting Water Department Distribution Staff in locating meter boxes.

The services are anticipated for a three year period. Total fees are estimated at about \$2,000,000.

A pre-submittal conference will be held at 10:00 AM, Monday, November 16, 2015, in the City Council Chambers 3<sup>rd</sup> Floor Old City Hall 315 E Kennedy Blvd, Tampa, FL 33602. Attendance is not mandatory.

Reference material may be posted at: [http://www.tampagov.net/dept\\_contract\\_administration/programs\\_and\\_services/architectural\\_engineering\\_construction\\_and\\_related\\_rfqs/index.asp](http://www.tampagov.net/dept_contract_administration/programs_and_services/architectural_engineering_construction_and_related_rfqs/index.asp). Unless otherwise posted on that web site, no further data will be available before the deadline established for the submission of Letters-Of-Interest.

Questions may be directed to Jim Greiner, P.E., Contract Administration, City of Tampa DPW, 4th Floor North, 306 E. Jackson Street, Tampa, Florida 33602; Telephone (813) 274-8598, Fax (813) 274-8080, or E-Mail [Jim.Greiner@tampagov.net](mailto:Jim.Greiner@tampagov.net).

Firms desiring to provide these services to the City must submit **A Single Electronic File in Searchable PDF format, Smaller than 3MB**, that includes a Letter of Interest referring to **RFQ 16-D-00004**, Statement of Qualifications and any supplemental material allowing evaluation for further consideration based upon the following criteria/point system: Utility Locating Experience, (35); Subsurface utility locating experience, (25); Professional Land Surveying Experience (10); Government Project Admin. Exp., (10); Past performance/Low amount of City work (5); Standard Form #330 (or #254)(5); Planned WMBE/SLBE Solicitation & Utilization, Form MBD 10 & 20 (10 pts).

The Letter must be addressed to:  
Brad L. Baird, P. E., Chairman, Consultants' Competitive Negotiation Committee,  
City of Tampa – c/o CAD - 4th Floor North,  
306 E. Jackson Street, Tampa, Florida 33602

The PDF must be **E-Mailed to [ContractAdministration@tampagov.net](mailto:ContractAdministration@tampagov.net) BEFORE 2 P.M., Thursday, December 3, 2015.** Submissions received on the day of the deadline may not be acknowledged by return-e-mail before the deadline.



**Page 1 of 4 DMI – Solicited/Utilized**  
**City of Tampa –DMI -Schedule of All Sub-(Contractors/Consultants/Suppliers) Solicited**  
**(FORM MBD-10)**

Contract No.: \_\_\_\_\_ Contract Name: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Federal ID: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

- No Firms were contacted/solicited for this contract.
- No Firms were contacted because: \_\_\_\_\_
- See attached documents with supplemental information.

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

**This DMI Schedule Must Be Submitted with the Bid or Proposal (Do Not Modify This Form)**

S = SLBE W=WMBE	Company Name Address Phone & Fax	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Resp. Rec'd Y/N
Federal ID		NIGP Code (listed above)			

It is hereby certified that the information provided is an accurate and true account of contacts and solicitations for sub – contracting opportunities on this contract. **This form must be completed and submitted with the bid or proposal.** **Modifying or failing to sign DMI forms may result in Non-Compliance and/or deemed non-responsive.**

Signed: \_\_\_\_\_ Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_



## Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) Solicited Form (Form MBD-10)

**This form must be submitted with all bids or proposals.** All subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included on this form. The instructions that follow correspond to the headings on the form required to be completed. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts when Goal has been established.

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.FIN.** A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Firms were contacted/solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal was not set by the City resulting in your business not using subcontractors and will self-perform all work. If during the performance of the contract you employ subcontractors, the City must pre-approve subcontractors. Use of the “Sub-(Contractors/Consultants/Suppliers) Payments” form must be submitted with your invoices. Note: Certified SLBE or WMBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **No Firms were contacted because.** Provide brief explanation why no firms were contacted/solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you are providing any additional documentation relating to the form. All DMI data not submitted on the MBD Form-10 must be in the same format and have all requested data from MBD Form-10 included.

The following instructions are for information of any and all subcontractors solicited.

- **“S” = SLBE, “W” = WMBE.** Enter “S” for firms Certified by the City as Small Local Business Enterprises and/or “W” for firms Certified by the City as Women/Minority Business Enterprise.
- **Federal ID.FIN.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials** Indicate the trade, service, or material provided by the subcontractor. NIGP codes are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method of soliciting for bid.
- **Quote or Resp. (response) Rec’d (received) Y/N.** Indicate “Y” Yes if you received a quotation or if you received a response to your solicitation. Indicate “N” No if you received no response to your solicitation from the subcontractor.

If any additional information is required or you have any questions, you may call the Minority Business Development Office at (813) 274-5522.



Page 3 of 4DMI – Solicited/Utilized  
City of Tampa –DMI Schedule of Sub-(Contractors/Consultants/Suppliers) to be Utilized  
(FORM MBD-20)

Contract No.: \_\_\_\_\_ Contract Name: \_\_\_\_\_  
Contractor Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Federal ID: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

- [ ] See attached documents.
- [ ] No Subcontracting (of any kind) will be performed on this contract.

NIGP Code General Categories: Buildings = 909, General = 912, Heavy = 913, Trades = 914, Architects = 906, Engineers & Surveyors = 925, Supplier = 912-77

**This DMI Schedule Must Be Submitted with the Bid or Proposal (Do Not Modify This Form)**

Enter "S" for firms Certified as Small Local Business Enterprises, "W" for firms Certified as Women/Minority Business Enterprise

S = SLBE W=WMBE	Company Name Address Phone & Fax	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic Am. AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade, Services, or Materials  NIGP Code Listed above	Amount of Quote. Letter of Intent if available.	Percent of Scope/Contract %
Federal ID					

Total Subcontract/Supplier Utilization \$ \_\_\_\_\_  
Total SLBE Utilization \$ \_\_\_\_\_  
Total WMBE Utilization \$ \_\_\_\_\_  
Percent SLBE Utilization of Total Bid/Proposal Amt. \_\_\_\_% Percent WMBE Utilization of Total Bid/Proposal Amt. \_\_\_\_%  
It is hereby certified that the following information is a true and accurate account of utilization for sub-contracting opportunities on this contract. **This form must be completed and submitted with the bid or proposal.** Modifying or failing to sign DMI forms may result in Non-Compliance and/or deemed non-responsive.

Signed: \_\_\_\_\_ Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_  
MBD 20 rev. 02/01/13 **Note: Detailed Instructions for completing this form are on the next page.**



## Page 4 of 4DMI – Solicited/Utilized

### Instructions for completing The Sub-(Contractors/Consultants/ Suppliers) to be Utilized Form (Form MBD-20)

**This form must be submitted with all bids or proposals. All subcontractors projected to be utilized must be included on this form.**

- **Contract No.** This is the number assigned by the City of Tampa for the bid or proposal.
- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business.
- **Address.** The physical address of your business.
- **Federal ID.FIN.** A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact business.
- **Fax.** Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- **No Subcontracting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal has been set by the City, but will self-perform all work. When subcontractors are utilized during the performance of the contract, the “Sub-(Contractors/Consultants/Suppliers) Payments” form must be submitted with your invoices. Note: Certified SLBE or WMBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- **See attached documents.** Check if you have provided any additional documentation relating to the utilization of subcontractors.
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**The following instructions are for information of Any and All subcontractors to be utilized.**

- **Federal ID.FIN.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification of the subcontractor.
- **“S” = SLBE, “W” = WMBE.** Enter “S” for firms Certified by the City as Small Local Business Enterprises and/or “W” for firms Certified by the City as Women/Minority Business Enterprise.
- **Company Name, Address, Phone & Fax.** Provide company information for verification of payments.
- **Type of Ownership.** Indicate the Ethnicity and Gender of the owner of the subcontracting business.
- **Trade, Services, or Materials (NIGP code if Known)** Indicate the trade, service, or material provided by the subcontractor. NIGP codes are available at <http://www.tampagov.net/mbd>.
- **Amount of Quote, Letters of Intent** (required for both SLBEs and WMBEs)
- **Percent of Work/Contract.** Indicate the percent of the total contract price the subcontract(s) represent.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may not apply to CCNA proposals.)
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may not apply to CCNA proposals.)
- **Total WMBE Utilization.** Provide total dollar amount for all projected WMBE subcontractors/Suppliers used for this contract. (Dollar amounts may not apply to CCNA proposals.)
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid amount. (Dollar amounts may not apply to CCNA proposals.)
- **Percent WMBE Utilization.** Total amount allocated to WMBEs divided by the total bid/proposal amount. (Dollar amounts may not apply to CCNA proposals.)

If any additional information is required or you have any questions, you may call the Minority Business Development Office at (813) 274-5522.