



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

17-D-00014; Cass Street Bridge Electrical & Mechanical Rehabilitation – Design

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, City of Tampa Code Chapter 2, Article V, Division 3, Section 2-282, and Applicable Federal Law. Submitters will be Notified of Intent To Award by E-mail.

RFQ - 17-D-00014 - The City of Tampa desires to obtain Professional Engineering services to complete design plans for the electrical and mechanical rehabilitation of the Cass Street Bridge. The services will include but not be limited to: inspection of electrical/mechanical bridge components; bridge development report with recommendations; electrical and mechanical construction plans; traffic control plans (TCP), specifications, engineer's estimate of probable construction cost; and, post-design services.

Estimated fee is \$200,000.

A pre-submittal conference will be held at 3 PM Monday, January 23, 2017, in the 3rd Floor City Council Chambers, Old City Hall 315 E. Kennedy Blvd., Tampa, Florida 33602. Attendance is not mandatory.

A link to additional material may be provided at demandstar.com and at: <http://www.tampagov.net/contract-administration/programs/architectural-engineering-construction-and-related-rfq> . Unless otherwise posted, no further data or site visits 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, (813) 274-8598, or E-Mail Jim.Greiner@tampagov.net.

Firms must provide evidence of any required licenses or registrations with its submission or within thirty days thereof in order to be considered.

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 17-D-00014, Statement of Qualifications and any supplemental material allowing evaluation for further consideration(short-listing) based upon the following criteria/point system: Successful Comparable Project Experience, (40); Movable Span Bridge structural, electrical and mechanical design experience including pre-qualification in FDOT Work Type 4.4 Movable Span Bridge Design (40); 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 PDF file 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 BEFORE 2 P.M., Thursday, February 16, 2016. Submissions received on the day of the deadline may not be acknowledged by return-e-mail before the deadline.



Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

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

Contract No.: _____ Contract Name: _____
Company Name: _____ Address: _____
Federal ID: _____ Phone: _____ Fax: _____ Email: _____

Check applicable box(es). Detailed Instructions for completing this form are on page 2 of 4.

- No Firms were contacted or solicited for this contract.
- No Firms were contacted because: _____
- See attached list of additional Firms solicited and all supplemental information (List must comply to this form)
Note: Form MBD-10 must list ALL subcontractors solicited including Non-minority/small businesses

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

S = SLBE W=WMBE O = Neither	Company Name Address Phone, Fax, Email	Type of Ownership (F=Female M=Male) BF BM = African Am. HF HM = Hispanic AF AM = Asian Am. NF NM = Native Am. CF CM = Caucasian	Trade or Services NIGP Code (listed above)	Contact Method L=Letter F=Fax E=Email P=Phone	Quote or Response Received Y/N

Failure to Complete, Sign and Submit
this form with your Bid or Proposal
Shall render the Bid Non-Responsive
(Do Not Modify This Form)

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.

Signed: _____ Name/Title: _____ Date: _____

**Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal**



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 to achieve participation.

- **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 and/or doing business as (dba) if applicable.
- **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 or solicited for this contract.** Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement 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 (MBD Form-30) must be submitted with every pay application and invoice. **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 or solicited.
- **See attached documents.** Check box, if after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/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 either Women/Minority Business Enterprise; **“O” = Non-certified others.**
- **Federal ID. FIN.** A number assigned to a business for tax reporting purposes. This information is critical in proper identification and payment of the contractor/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 materials provided by the subcontractor. NIGP codes aka “National Institute of Governmental Purchasing” are listed at top section of document.
- **Contact Method L=letter, F=fax, E=Email, P=Phone.** Indicate with letter the method(s) 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. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Minority and Small Business Development Office at (813) 274-5522.



Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive

**Page 3 of 4 – DMI Solicited/Utilized Schedules
City of Tampa – Schedule of **All To-Be-Utilized** Sub-(Contractors/Consultants/Suppliers)
(FORM MBD-20)**

Contract No.: _____ Contract Name: _____
 Company Name: _____ Address: _____
 Federal ID: _____ Phone: _____ Fax: _____ Email: _____

- Check applicable box(es). Detailed Instructions for completing this form are on page 4 of 4.
- See attached list of additional Firms Utilized and all supplemental information (List must comply to this form)
 Note: Form MBD-20 must list ALL subcontractors To-Be-Utilized including Non-minority/small businesses
 - No Subcontracting/consulting (of any kind) will be performed on this contract.
 - No Firms are listed to be utilized because: _____

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

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

S = SLBE W=WMBE O =Neither	Company Name Address Phone, Fax, Email	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 (LOI) if available	Percent of Scope or Contract %

Failure to Complete, Sign and Submit
this form with your Bid or Proposal
Shall render the Bid Non-Responsive.
(Do Not Modify This Form)

Total ALL 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.

Signed: _____ Name/Title: _____ Date: _____

**Failure to Complete, Sign and Submit Both Forms 10 & 20 SHALL render the Bid or Proposal Non-Responsive
Forms must be included with Bid / Proposal**



Page 4 of 4 DMI – 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 (regardless of ownership or size) projected to be utilized must be included on this form. Note: Ability or desire to self-perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

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 and/or doing business as (dba) if applicable.
- **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/consulting (of any kind) will be performed on this contract.** Checking box indicates your business will not use subcontractors when no Subcontract Goal or Participation Plan Requirement was 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 (MBD Form-30) must be submitted with every pay application and invoice. Note: certified **SLBE or WMBE firms** bidding as Primes **are not exempt** from outreach and solicitation of subcontractors, including completion and submitting Form-10 and Form-20.
- **No Firms listed To-Be-Utilized.** Check box; provide brief explanation why no firms were retained when a goal or participation plan requirement was set on the contract. Note: mandatory compliance with Good Faith Effort outreach (GFECF) requirements applies (MBD Form-50) and supporting documentation must accompany the bid.
- **See attached documents.** Check box, if after completing the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the scope/value/percent utilization of subcontractors. Reproduce copies of MBD-20 and attach. All data not submitted on duplicate forms must be in the same format and content as specified in these instructions.

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; **“O” = Non-certified others.**
- **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. Abbreviated list of NIGP is available at <http://www.tampagov.net/mbd> “Information Resources”.
- **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. For CCNA only (i.e. Consultant A/E Services) you must indicate subcontracts as percent of total scope/contract.
- **Total Subcontract/Supplier Utilization.** – Provide total dollar amount of all subcontractors/suppliers projected to be used for the contract. (Dollar amounts may be optional in CCNA depending on solicitation format).
- **Total SLBE Utilization.** Provide total dollar amount for all projected SLBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Total WMBE Utilization.** Provide total dollar amount for all projected WMBE subcontractors/Suppliers used for this contract. (Dollar amounts may be optional in CCNA proposals depending on the solicitation format).
- **Percent SLBE Utilization.** Total amount allocated to SLBEs divided by the total bid/proposal amount.
- **Percent WMBE Utilization.** Total amount allocated to WMBEs divided by the total bid/proposal amount.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Minority and Small Business Development Office at (813) 274-5522.

EXHIBIT "A"

SCOPE OF SERVICES

CITY OF TAMPA

Contract 17-D-00014

CASS STREET BRIDGE ELECTRICAL AND MECHANICAL REHABILITATION

BRIDGE #105502

DRAFT

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DRAFT

1. PROJECT DESCRIPTION

Project Name: Cass Street Bridge Electrical and Mechanical Rehabilitation

Project Number: 10000446

Bridge Number: 105502

The Cass Street Bridge over the Hillsborough River was originally completed in 1927 and reconstructed in 1949. It connects south and west Tampa to the Downtown Central Business District and east Tampa. This Bridge is a Strauss trunnion double-leaf bascule bridge, and is required to open for river/marine traffic upon two-hour notice in accordance with Coast Guard Regulation CFR 33 – Sub-Chapter J – Bridges; Part §117.291 – Hillsborough River.

The City of Tampa (City) desires to rehabilitate the Cass Street Bridge. Electrical improvements includes: replace drive motors and cabinets; replace PLC; rehab control console; replace junction boxes, conduit and wiring; and replace navigational lights. Mechanical improvements includes: replace shaft bearings and couplings; recondition brakes and emergency drive machinery; replace span lock bushings; repair and replace counterweight components.

Name of Firm (Consultant) will provide design services for the electrical and mechanical rehabilitation of the Cass Street Bridge. The Consultant scope of work includes preparation of basis of design report, design plans, specifications, cost estimates and post-design services as described in Sections 2 through 8.

Plans and specifications shall be prepared in accordance with the latest editions of the following criteria and requirements:

- AASHTO LRFD-Movable Highway Bridge Design Specifications
- Florida Department of Transportation (FDOT) Structures Design Guidelines
- FDOT Standard Specifications for Road and Bridge Construction
- FDOT Design Standards
- FHWA Manual on Uniform Traffic Control Devices (MUTCD)
- CFR Title 33 – Chapter I – Coast Guard – Subchapter J – Bridges – Parts 114 – 118

2. PROJECT GENERAL TASKS

Consultant shall provide services that include, but are not limited to:

- Conducting site inspections;
- Participation in technical and progress meetings with City staff;
- Coordination with City staff for adherence to State Historic Preservation Office (SHPO) requirements;

- Coordination with the CITY's Right-of-Way Management staff;
- Review of Florida Department of Transportation (FDOT) and City bridge inspection reports and other documents for the Cass Street Bridge #105502; and,
- Coordination with Coast Guard as necessary.

3. ELECTRICAL

Consultant shall prepare Bridge electrical component plan set that includes, but is not limited to, the following items:

- Conduit and wiring associated with the new generator, automatic transfer switch, and American Association of State Highway and Transportation Officials (AASHTO) Safety Interlocks;
- Replace conduit, wiring and light fixtures;
- Replacing drive motors and cabinets;
- Replacing the Programmable Logic Controller (PLC);
- Rehabilitation of the control console;
- Replacing junction boxes, conduit and wiring; and,
- Replacing navigational lights.

4. MECHANICAL

Consultant shall prepare bridge mechanical component plan set that includes, but is not limited to, the following items:

- Replace/repair auxiliary drive bevel gear bushing;
- Replace/repair emergency drive bevel gear;
- Replace/repair span drive motor;
- Repair/replace span lock brake
- Repair/replace shaft bushings and shafts of span lock;
- Repair/replace span lock and pinion;
- Replace bushing;
- Repair live load shoe;
- Replacing shaft bearings and couplings;
- Reconditioning brakes and emergency drive machinery;
- Replacing span lock bushings;
- Repairing and replacing counterweight components;
- Rebalancing of the bridge;
- Preparation of Traffic Control Plans (TCP) to implement repairs or rehabilitations while minimizing interruptions to vehicular, pedestrian and marine traffic.

5. ARCHITECTURAL

Consultant shall prepare bridge architectural component plan set that includes, but is not be limited to, the following items:

- Replacing windows and doors of bridge tender house.

6. POST-DESIGN SERVICES

The Consultant shall provide the following post design and construction phase services:

- Prepare responses during the bidding process
- Attend the pre-bid meeting
- Attend the pre-construction meeting
- Review bid documents;
- Respond to requests for information (RFI's) and request for clarification (RFC's) during construction
- Respond to any requests from the City during construction to clarify design elements in the contract plan set;
- Review shop drawing and material submittals from the Contractor;
- Prepare plan revisions;
- Prepare as-built/record drawings; and
- Conduct site inspections during construction as necessary.

7. PROJECT DELIVERABLES

The Consultant shall furnish construction contract documents as required by the City to adequately control, coordinate, and approve the work concepts. The Consultant shall provide PDF digital files of the plans and documents at the completion of each phase as listed below. Consultant shall prepare and submit for review the following submittals to the CITY. One (1) electronic copy and two (2) paper copies of all documents shall be submitted to the CITY for each submittal. Final Plans shall also be provided in AutoCAD native format.

- Kick-Off and Progress Meetings Minutes
- Bridge Development Report (including Order of Magnitude (OOM) Construction Estimate)
- 60% Submittal Package
- 60% Engineer's Estimate of Probable Construction Cost
- 90% Submittal Package (including responses to 60% comments)
- 90% Engineer's Estimate of Probable Construction Cost
- 100% Submittal Package (including responses to 90% comments)
- 100% Engineer's Estimate of Probable Construction Cost
- Draft Specifications Package
- Final Plans (Signed and Sealed) (including responses to 100% comments)

- Final Engineer's Estimate of Probable Construction Cost
- Final Specifications Package (Signed and Sealed). The specifications package shall be in accordance with the FDOT and City requirements and address all items and areas of work including any Mandatory Specifications, Modified Special Provisions, and Technical Special Provisions.
- Bid Tabulations
- Monthly Progress Reports (with Invoices)

8. SCHEDULE

Within ten (10) days after the Notice to Proceed, and prior to the Consultant beginning work, the Consultant shall provide a detailed project milestone schedule City and Consultant scheduled activities required to meet the current City Production Date. The schedule shall be accompanied by an anticipated payout and fiscal progress curve. The schedule shall indicate all required submittals. For the purpose of scheduling, the Consultant shall allow for a three (3) week review time for each phase submittal and any other submittals as appropriate. The schedule for completion for these services is estimated to be ten (10) months from Notice to Proceed.

Periodically, throughout the life of the contract, the project schedule and payout and fiscal progress curves shall be reviewed and, with the approval of the City, adjusted as necessary to incorporate changes in the Scope of Services and progress to date. The approved schedule and schedule status report, along with progress and payout curves, shall be submitted with the monthly progress report.

9. ADDITIONAL SERVICES

Work requested by the City not included in the Scope of Services will be classified as supplemental services. The Consultant can provide supplemental services under an Amendment to this Scope of Services approved by City Council.

10. CITY RESPONSIBILITIES

The CITY will provide the CONSULTANT available FDOT and City inspection reports, evaluations, as-built plans and other relevant information. The City will also provide access to the site for field visits by the Consultant.