



## Addendum No. 01

### Request for Proposal and Prequalification Application No: B19/20-14

#### Lease-Leaseback Project Delivery Service

To: All Prospective Proposers

This Addendum No: 01 is issued to clarify, add, delete, correct and/or change the RFP B19/20-14 documents to the extent indicated and is hereby made a part of the above noted RFP documents on which the contract will be based. Any modifications/changes made by this addendum affect only the portions or paragraphs specifically identified herein: all remaining portions of the proposal to remain in force. It is the responsibility of all proposers to conform to this addendum. Acknowledge receipt of this addendum in the space provided on the Prequalification Form, and in submitted Proposal(S). Failure to do so may subject the bidder to disqualification.

#### A. Revisions to Prequalification Forms:

Refer to attached "Attachment 1 – District's Prequalification Application" for changes in the requirements.

#### B. Revisions to Request For Proposal Document:

##### Section D. Prequalification Requirement

Paragraph 1 is removed in its entirety.

Paragraph 2, sentence 2 "**Respondents must have submitted their applications no later than ten (10) business days before the due date for Proposals.**" is removed in its entirety.

##### Section G. Description of District Needs and Project Administration

Sub Section 1. Paragraph 2, last sentence Prequalification take place.....RFP as Attachment 1 "**Any electrical, mechanical, and plumbing subcontractors shall be subject to the same prequalification requirements.**" is removed in its entirety.

#### Revisions to Drawings:

None at this time

**C. Revisions to Specifications:**

None at this time

**D. Response to Prequalification Questions:**

**PQQ-1:** Is the prequalification for sub contractors as well?

**District Response:** Subcontractors are not required to prequalify at this time, the prequalification process is only for general contractors responding to the lease leaseback delivery RFP.

**PQQ-2:** Can you tell me if the prequel is just for general contractors or if subs (electrical) should fill it out as well. I thought it was all, but I came across question number 1 in the Pass/Fail that asks if your firm as completed at least 5 division of the state architect-approved construction project each valued of at least \$30,000,000. We have worked on projects this large, but our portion is not this large. Please advise.

**District Response:** Subcontractors are not required to prequalify at this time, the prequalification process is only for general contractors responding to the lease leaseback delivery RFP.

**PQQ-3:** Question 1 and 2 for the Pass/Fail section of your prequalification ass for each value of the projects to be at least \$30,000,000 in value. Would the district be willing to drop the criteria to \$20,000,000? Local and capable contractors will struggle to meet the criteria and will not be able to submit a proposal for the projects.

District Response: Refer to revised "Attachment 1 – District's Prequalification Application" for changes in Question #1 and Question #2 Essential Criteria.

Question #1 Has your firm contracted for and completed construction, *or will complete prior to June 30, 2020* a minimum of:

- **Five (5)** Division of the State Architect (DSA) *and/or Office of Statewide Health Planning Division (OSHDP)* – approved construction projects.
- Each with a value of at least **\$21,500,000**, and
- All within the past **Seven (7) years?**

Question #2 Has your Firm contracted for and completed construction, *or will complete prior to June 30, 2020* a minimum of:

- **Three (3)** California community college, or other university or college (higher education) projects,
- Each with a value of at least **\$21,500,000**, and
- All within the past **seven (7) years?**

**PPQ-4:** Prequal questionair#1 – Will OSHPD reviewed projects be an acceptable alternative to DSA projects?

**District Response:** See response to PQQ-3 above.

PPQ-5: Prequal question #1 – Will essential services facilities such as fire stations, police stations, detention facilities be acceptable for DSA reviewed and approved projects?

**District Response:** See response to PQQ-3 above.

**PPQ-6:** Prequal question #1 – Will projects be considered if they are not complete at the time of the prequalification but will be complete in the next couple of months, or prior to the start of the services requested?

**District Response:** See response to PQQ-3 above.

**E. Response to Bidders Questions:**

None at this time

**End of Addendum**

***All other terms and conditions of Bid No. B19/20-14 are to remain the same.***

ATTACHMENT 1 – ADDENDA 01

**DISTRICTS PREQUALIFICATION APPLICATION**

<b>CONTRACTOR (OR “FIRM”) INFORMATION</b>		
Contractor’s company name:		
Address:		
Telephone:	Mobile telephone:	
E-mail:		
Years in business under current company name:		
Types of work performed with own forces:		
Gross revenue of the Firm for the past three (3) years:		
\$	\$	\$
<b>Submit an audited or reviewed financial statement for the past two (2) full fiscal years. A letter verifying availability of a line of credit may also be attached; however, it will be considered as supplemental information only, and is not a substitute for the required financial statement.</b>		
Number of years this accounting firm has prepared financial statements for the Firm:		
Number of years this accounting firm has prepared tax returns for the Firm:		
Name of license holder exactly as on file with the California State License Board:		
License classification(s):		
License Number(s):		
License expiration date(s):		
<b>Department of Industrial Relations registration number (Per Labor Code section 1725.5):</b>		
Number of years license holder has held the listed license(s):		
Number of years Contractor has done business in California under contractor's license law:		
Number of years Contractor has done business in California under <b>current</b> Contractor's license:		
Has your Firm changed name(s) or license number(s) in the past five (5) years? ( Y / N ). If “yes”, explain on a separate signed sheet, including the reason for the change.		
Has there been any change in ownership of the Firm at any time in the past five (5) years? <b>NOTE:</b> A corporation whose shares are publicly traded is not required to answer this question. ( Y / N ). If “yes”, explain on a separate signed sheet, including the reason for the change.		
Is the Firm a subsidiary, parent, holding company, or affiliate of another construction firm? <b>NOTE:</b> Include information about other firms if one firm owns ten percent (10%) or more of another, or if an owner, partner, or officer of your Firm holds a similar position in another firm. ( Y / N ). If “yes”, explain on a separate signed sheet, the name of the related company(ies) and the percent ownership.		

Indicate the form of Contractor's firm (type of business entity):

- Individual
- Sole Proprietorship
- Partnership
- Limited Partnership
- Corporation, State: \_\_\_\_\_
- Limited Liability Company
- Joint Venture
- Other: \_\_\_\_\_

List the following for each corporation officer, general partner, limited partner, owner, etc. (as applicable) for the Contractor's type of entity. For joint ventures, include this information for each entity in the joint venture and the percent ownership of each joint venture. Attach all additional information on separate signed sheets as needed.

Name	Position	Years with Co.	% Ownership

Identify every construction firm, contractor and/or construction management firm that the Contractor or any person listed above has been associated with (as officer, general partner, limited partner, owner, RMO, RME etc.) at any time during the **past five (5) years** ("Associated Firm"). Include all additional references and/or information on separate signed sheets. NOTE: For this question, "owner" and "partner" refers to ownership of ten percent (10%) or more of the business, or ten percent (10%) or more of its stock if the business is a corporation. include all additional information on separate signed sheets as needed.

Name of Person at Associated Firm	Name of Associated Firm	Contractor's License No. of Associated Firm	Dates of Person's Participation with Associated Firm

## CONTRACTOR'S BONDING COMPANY (SURETY) INFORMATION

Name(s) of bonding company(ies) your Firm has utilized over the past five (5) years (not broker or agency):



Address(es) of those bonding company(ies):		
Number of years Contractor has been with those bonding company/surety:		
Name of broker/agent:		
Address of broker/agent:		
Telephone number of broker/agent:		
E-mail of broker/agent:		
Contractor's total current bonding capacity: \$		

<b>CONTRACTOR'S INSURANCE INFORMATION</b>		
Name of insurance company(ies) your Firm has utilized over the past five (5) years (not broker or agency):		
Address of those insurance company(ies):		
"Best" rating(s) for those insurance company(ies):		
Number of years Contractor has been with those insurance company(ies):		
Name of broker/agent:		
Address of broker/agent:		
Telephone number of broker/agent:		
E-mail of broker/agent:		
Contractor's current insurance limits for the following types of coverage:		
Commercial General Liability	Combined Single Limit (per occurrence)	\$
	Combined Single Limit (aggregate)	\$
Product Liability & Completed Operations	(aggregate)	\$
	(per occurrence)	\$

Automobile Liability – Any Auto	Combined Single Limit (aggregate)	\$
Automobile Liability – Any Auto	Combined Single Limit (per occurrence)	\$
Employers' Liability		\$
Builder's Risk (Course of Construction)		\$
Workers' Compensation Experience Modification Rate for the past five (5) premium years:		
(1) Current year:	(2)	(3)
	(4)	(5)

## QUESTIONS

<b>Pass/Fail Questions (Essential Criteria)</b>		
1.	<p><b><i>Has your Firm contracted for and completed construction, or will complete prior to June 30, 2020 a minimum of:</i></b></p> <ul style="list-style-type: none"> <li>• <b><i>Five (5) Division of the State Architect (DSA) and/or Office of Statewide Health Planning Division (OSHPD) – approved construction projects,</i></b></li> <li>• <b><i>Each with a value of at least \$21,500,000, and</i></b></li> <li>• <b><i>All within the past Seven (7) years? (Please circle "YES" or "NO").</i></b></li> </ul> <p><b>NOTE:</b> You <u>must</u> list these projects in the "Contractor Project References" Section.</p>	<u>YES</u> <u>NO</u> NO = cannot prequalify
2.	<p><b><i>Has your Firm contracted for and completed construction, or will complete prior to June 30, 2020 a minimum of:</i></b></p> <ul style="list-style-type: none"> <li>• <b><i>Three (3) California community college, or other university or college (higher education) projects,</i></b></li> <li>• <b><i>Each with a value of at least \$21,500,000, and</i></b></li> <li>• <b><i>All within the past seven (7) years? (Please circle "YES" or "NO").</i></b></li> </ul> <p><b>NOTE:</b> You <u>must</u> list these projects in the "Contractor Project References" Section.</p>	<u>YES</u> <u>NO</u> NO = cannot prequalify
3.	<p>Does your Firm currently hold all contractors' license necessary to perform the work and have those license(s) been consistently active for at least five (5) years without revocation or suspension? (Please circle "YES" or "NO").</p>	<u>YES</u> <u>NO</u> NO = cannot prequalify
4.	<p>Has your Firm or an Associated Firm been found non-responsible, debarred, disqualified, forbidden, or otherwise prohibited from performing work and/or bidding on work for any public agency within California within the past five (5) years? (Please circle "YES" or "NO").</p>	<u>YES</u> <u>NO</u> YES = cannot prequalify
5.	<p>Has your Firm or an Associated Firm defaulted on a contract or been terminated for cause by any public agency on any project within California within the past five (5) years and, if so and if challenged, has that default or termination been upheld by a court or an arbitrator? (Please circle "YES" or "NO").</p>	<u>YES</u> <u>NO</u> YES = cannot prequalify
6.	<p>Has your Firm or an Associated Firm or any of their owners or officers been convicted of a crime under federal, state, or local law involving:</p> <ul style="list-style-type: none"> <li>(1) Bidding for, awarding of, or performance of a contract with a public entity;</li> <li>(2) Making a false claim(s) to any public entity; or</li> <li>(3) Fraud, theft, or other act of dishonesty to any contracting party within the past <b>ten (10) years?</b></li> </ul> <p>(Please circle "YES" or "NO").</p>	<u>YES</u> <u>NO</u> YES = cannot prequalify

7.	Is your current year Experience Modification Rate at or above 0.96? (Please circle "YES" or "NO").	YES NO YES = cannot prequalify
8.	Has a performance bond surety for your Firm or a performance bond surety for an Associated Firm had to: (1) Take over or complete a project, (2) Supervise the work of a project, or (3) Pay amounts to third parties, related to construction activities of your Firm or an Associated Firm within the past five (5) years? (Please circle "YES" or "NO").	YES NO YES = cannot prequalify
 <p><b>If you answered: "NO" to questions 1-3 or "YES" to questions 4-8, then STOP. You are not eligible for prequalification at this time.</b></p>		

<b>Scored Questions</b>		
1.	Has your Firm paid liquidated damages pursuant to a contract for a project with either a public or private owner within the past five (5) years? (Please circle "YES" or "NO").  If YES, explain and indicate on separate signed sheet(s) the project name(s), damages(s), and date(s).	YES NO
2.	Has your Firm paid a premium of more than one percent (1%) for a performance and payment bond on any project(s) within the past five (5) years? (Please circle "YES" or "NO").  If YES, explain and indicate on separate signed sheet(s) the project name(s), the premium amount(s), and date(s).	YES NO
3.	Has any insurer had to pay amounts to third parties that were in any way related to construction activities of your Firm within the past five (5) years? (Please circle "YES" or "NO").  If YES, explain and indicate on separate signed sheet(s) the project name(s), the amount(s) paid, and date(s).	YES NO
4.	Has your Firm's Workers' Compensation Experience Modification Rate exceeded 0.96 at any time for the past five (5) premium years? (Please circle "YES" or "NO").  If YES, explain and indicate on separate signed sheet(s) the EMR(s) and the applicable date(s).	YES NO
5.	Has there been a period when your Firm had employees but was without workers' compensation insurance or state-approved self-insurance within the past five (5) years? (Please circle "YES" or "NO").  If YES, explain and indicate on separate signed sheet(s) the reason(s) for not having this insurance and the applicable date(s).	YES NO



<p>6. Has your Firm declared bankruptcy or been placed in receivership within the past five (5) years? (Please circle "YES" or "NO").</p> <p>If YES, explain and indicate on separate signed sheet(s) the type of bankruptcy, the Firm's current recovery plan, and the applicable date(s).</p>	<p><u>YES</u> <u>NO</u></p>
<p>7. Has your Firm been denied bond coverage by a surety company, or has there been a period of time when your Firm had no surety bond in place during a public construction project when one was required within the past five (5) years? (Please circle "YES" or "NO").</p> <p>If YES, provide details on a separate signed sheet indicating the date(s) when your Firm was denied coverage and the name of the company or companies which denied coverage; and the period(s) during which you had no surety bond in place.</p>	<p><u>YES</u> <u>NO</u></p>
<p>8. Has a project owner, general contractor, architect, or construction manager filed claim(s) in an amount exceeding \$50,000 against your Firm, or has your Firm filed claim(s) in an amount exceeding \$50,000 against a project owner, general contractor, architect, or construction manager in the past five (5) years? (Please circle "YES" or "NO").</p> <p>If YES, explain and indicate on separate signed sheet(s) the project name(s), claim(s) and the date(s) of claim(s).</p>	<p><u>YES</u> <u>NO</u></p>

<p>9. Has your Firm or an Associated Firm been cited and/or assessed any penalties for non-compliance with state and/or federal laws and/or regulations, including public bidding requirements and Labor Code violations, within the past five (5) years? (Please circle "YES" or "NO").</p> <p>If "YES," indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation(s) and/or assessment(s).</p>	<p><u>YES</u> <u>NO</u></p>
<p>10. Has your Firm been required to pay either back wages or penalties for its failure to comply with California's prevailing wage laws, with California's apprenticeship laws or regulations, or with federal Davis-Bacon prevailing wage laws within the past five (5) years? (Please circle "YES" or "NO").</p> <p>If "yes," indicate on separate signed sheet(s) the project name(s), the nature of the violation(s), the name and owner of the project(s), the number of employees who were initially underpaid and the amount of back wages and penalties that your Firm was required to pay.</p>	<p><u>YES</u> <u>NO</u></p>
<p>11. Does your Firm or an Associated Firm have any <b>pending</b> claims for non-compliance with state and/or federal laws and/or regulations, including public bidding requirements and Labor Code violations? (Please circle "YES" or "NO").</p> <p>If YES, explain and indicate on separate signed sheet(s) the project name(s), claim(s), the date(s) of claim(s) and the status of the claim(s).</p>	<p><u>YES</u> <u>NO</u></p>
<p>12. Has your Firm been cited and/or assessed penalties by the Environmental Protection Agency, any air quality management district, any regional water quality control board, or any other environmental agency within the past five (5) years? (Please circle "YES" or "NO").</p> <p>If "yes," indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation.</p>	<p><u>YES</u> <u>NO</u></p>

13.	<p>Has Cal/OSHA and/or federal Occupational Safety and Health Administration cited and assessed penalties against your Firm, including any “serious,” “willful” or “repeat” violations of safety or health regulations within the past five (5) years? (Please circle “YES” or “NO”).</p> <p>If “yes,” indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation. If the citation was appealed and a decision has been issued, state the case number and the date of the decision.</p>	<p><u>YES</u> <u>NO</u></p>
14.	<p>Does your Firm require <b>weekly</b> documented safety meetings to be held for construction employees and field supervisors during the course of a project? (Please circle “YES” or “NO”).</p>	<p><u>YES</u> <u>NO</u></p>
15.	<p>Provide the name, address and telephone number of the apprenticeship program (approved by the California Apprenticeship Council) from whom you intend to request the dispatch of apprentices to your Firm for use on any public work project for which you are awarded a contract by the District.</p>	

## CONTRACTOR PROJECT REFERENCES

**List ALL projects in which your Firm has participated as a contractor or first-tier subcontractor during the past seven (7) years with a Firm contract value of more than \$21,500,000.**

- You may limit your response to the **five (5)** most-recently completed projects, but one of the five projects submitting for in the application **must** include all projects that satisfy the “**Pass/Fail Questions (Essential Criteria)**” requirements above.
- Include all information indicated below on separate signed sheets as necessary, and explain or clarify any response as necessary

Project name/identification:
Project address/location:
Project owner, contact person, and telephone:
Project architect name and telephone number:
If contractor was a subcontractor on the project, name of general contractor and telephone number:
Indicate if the project was under lease-leaseback, design-build, design-bid-build or other delivery structure:
Scope of work:
Original completion date:
Date completed:
Initial contract value (as of time of bid award):
Final contract value:

**ADDENDA**

I acknowledge that I have received, reviewed and incorporated Addendum's \_\_\_\_\_ in my response to the prequalification requirements.

**CERTIFICATION**

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct:

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

Proper Name of Contractor: \_\_\_\_\_

Signature: \_\_\_\_\_

By: \_\_\_\_\_ (Print Name)

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