



# INVITATION TO PARTICIPATE

**Please Fax this Document  
Back to the  
Jackson County SHIP Program  
850-718-0518**

**RETURN THIS FORM IMMEDIATELY VIA FAX TO 850-718-0518**

Notice is hereby given to all interested persons or firms that Jackson County will be accepting sealed bids for the following:

**BID NUMBER: 1718-18**

**BID NAME: SHIP Housing Rehabilitation**

**GENERAL INFORMATION:** The Jackson County Board of Commissioners (JCBC) is seeking qualified general contractors to participate in work involving various forms of rehabilitation of a pre1978 single-family home.

**BID DEADLINE DATE: April 11, 2018**

**DEADLINE TIME: 2:00 PM CDT**

PLEASE FILL IN THE FOLLOWING INFORMATION AND RETURN (EMAIL OR FAX) THIS FORM IMMEDIATELY

PLEASE CHECK ONE OF THE FOLLOWING

<b>WE DO INTEND TO PARTICIPATE IN THIS BID REQUEST</b>		
<b>We DO NOT intend to participate in this Bid request; however we would like to remain on the Jackson County Active Contractor list</b>		
<b>IF THIS PROJECT REQUIRES A CONTRACTOR MEETING (see page 2)</b>		
<b>WE WILL ATTEND</b>		<b>WE WILL NOT BE ATTENDING</b>

Please indicate with an "\*" if there are any changes to the following information

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Voice Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_  
PRINTED NAME
SIGNATURE

**Please return this Invitation to Participate immediately upon receipt.**

**This form can be sent via FAX to 850-718-0518, hand delivered or mailed to:  
Jackson County SHIP Program, 4487 Lafayette Street, Marianna, Florida 32446**



**IMPORTANT NOTICE**

**CONTRACTOR MEETING**

**NOTIFICATION**

Bid Number: **1718-18**

Bid Name: **SHIP Housing Rehabilitation**

MEETING DATE: **Wednesday, March 28, 2018**

TIME: **9:00 am, CDT**

MEETING LOCATION: **Jackson County BCC Conference Room**  
2864 Madison Street  
Marianna, FL 32446

**SPECIAL NOTE:** Additional information may be handed out at this meeting. This additional information WILL NOT be mailed out to any vendors not responding to this meeting.

**THIS PROJECT DOES INVOLVE A MANDATORY CONTRACTOR MEETING(S) AND WALK-THROUGH(S).**

**Only participating contractors and verified employees or sub-contractors may attend the walk-through.**

**This is the time to take measurements and acquire information for bid submissions.**

# QUESTION & RESPONSE FORM

**BID NUMBER:** 1718-18

**BID NAME:** SHIP Housing Rehabilitation

**NOTE:** We understand that questions may arise from this bid packet or the specifications pertaining to this project. We will make every attempt to answer your questions in a timely manner. However, all questions must be in written format and on this form. You can submit your question via FAX to 850-718-0518. Please be sure that all of the requested information has been provided. Once the question has been answered, I will email the response back to you and to only those firms that have FAXED the INVITATION TO BID to the SHIP Program office (850-718-0518).

**IMPORTANT:** YOU MUST FAX THE "NOTICE TO PARTICIPATE" TO 850-718-0518 AS REQUESTED AS SOON AS POSSIBLE. Only those firms responding with the NOTICE TO PARTICIPATE will receive any response to questions asked.

**FIRM REQUESTING INFORMATION:** \_\_\_\_\_  
\_\_\_\_\_

**PERSON MAKING REQUEST:** \_\_\_\_\_

\_\_\_\_\_

ADDRESS	PHONE #	FAX #
---------	---------	-------

**QUESTION:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ANSWER::** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERSON RESPONDING TO QUESTION:** \_\_\_\_\_



# BID PACKET CONTENTS

**BID NUMBER: 1718-18**

**BID NAME: SHIP Housing Rehabilitation**

THIS PACKET CONTAINS THE FOLLOWING DOCUMENTS.

**NOTE:** SOME OF THESE DOCUMENTS NEED TO BE RETURNED. PLEASE READ AND FOLLOW THE SUBMISSION REQUIREMENT SO THAT YOUR BID WILL NOT BE DISQUALIFIED.

<u>DESCRIPTION</u>	<u>SUBMISSION REQUIREMENT</u>
• IMPORTANT NOTICE (if a contractor meeting has been set, the information will be given on page 2.)	
• <b>INVITATION TO PARTICIPATE</b> -----	<b><u>FAX THIS DOCUMENT BACK IMMEDIATELY</u></b>
<b><u>BID PACKET CONTENTS</u></b>	<b><u>RETURN AS INDICATED</u></b>
• BID DOCUMENT-----	DO NOT RETURN
• EXPLANATION & PROCEDURE-----	DO NOT RETURN
• GENERAL CONDITIONS AND SPECIFICATIONS -----	DO NOT RETURN
• PUBLIC ENTITY CRIMES FORM-----	<b>SUBMIT ONE COPY WITH BID</b>
• BID SPECIFICATIONS-----	DO NOT RETURN
• WORK WRITE-UP FORM-----	<b>SUBMIT ONE COPIES WITH BID</b>
• VENDOR INFORMATION-----	<b>SUBMIT ONE COPY WITH BID</b>
• COPY OF FORM W-9-----	<b>SUBMIT ONE COPY WITH BID</b>
• STATEMENT OF EXPERIENCE-----	<b>SUBMIT ONE COPY WITH BID</b>
• SUBCONTRACTOR LIST-----	<b>RETURN IF SUBCONTRACTORS WILL BE USED</b>

**ADDITIONAL DOCUMENTS REQUIRED IN CONJUNCTION WITH THIS BID**

Documents that are in **BOLD ARE** required for submission. Documents NOT in BOLD are NOT required.

- BID BOND
- PAYMENT BOND
- PERFORMANCE BOND
- **PROOF OF WORKMAN’S COMPENSATION INSURANCE**
- **PROOF OF CURRENT LIABILITY INSURANCE (County may, if necessary request an increase)**

**DOCUMENTS WHICH WILL BE ISSUED UPON AWARD**

1. **CONTRACT**
2. **NOTICE OF AWARD**
3. CHANGE ORDER (when necessary, requires Board approval)
4. CERTIFICATE OF FINAL COMPLETION - Must be completed and submitted to SHIP Program or final payment will not be made

**BID DOCUMENT**  
**EXPLANATION & PROCEDURES CONTINUED**

**WARNING - THESE PROCEDURES WILL BE FOLLOWED**

If an attempt to circumvent this process is made and the invoice for payment is sent directly to the Finance Department, the Finance Department will forward the invoice to the SHIP Program Office. If a Notice of Final Completion is not on file with the SHIP Program Office, the Contractor will immediately be notified to initiate the Final Completion process.

If the total project cost is more or less than that provided on the Bid response, the SHIP Program Office will review the records for an approved Change Order form. If one does not exist, **PAYMENT WILL NOT BE MADE**. Any and all change orders **MUST** be approved by the Jackson County Board of County Commissioners or authorized representative. If in the event a Change Order was not found, the SHIP Program Office will require the contractor to complete in detail a Change Order form. The Program Office will then present the Change Order to the Board of Commissioners at their next regular meeting. This does not guarantee that this Change Order will be approved. The Program Office will follow the direction that the Board of Commissioners dictates.

**GENERAL**

The procedures listed here will be followed by everyone responding to a Bid Request. Failure to comply with these procedures **COULD RESULT IN DISQUALIFICATION**

**PUBLIC ENTITY CRIMES - SWORN STATEMENT FORM - RETURN WITH BID RESPONSE PACKET**

State law dictates that all individuals or firms doing business with a Governmental Agency must provide that agency with written documentation that they have not been convicted of any crimes which would prohibit them from conducting business with a Government Agency.

**BID BOND – CONSTRUCTION BIDS \$50,000.00 AND OVER-RETURN WITH BID RESPONSE PACKET**

Bid Bonds are insurance agreements in which a third party agrees to be liable to pay a certain amount of money in the event that a specific bidder, if the bid is accepted, fails to accept the contract as bid. NOTE: unless otherwise noted, this bid bond requirement is primarily for construction type bids and NOT for PRODUCT type bids.

**ADDENDUM FORMS**

Changes are made from time to time pertaining to the Bid. These changes or additional information will be provided to everyone that has returned the Invitation to Participate. If the Invitation to Participate has not been returned, the SHIP Program Office will make the determination that your firm does not wish to respond to this Bid request. As a result, any Addendum's will NOT be sent to your firm.

**RECIPIENT OF THE BID AWARD**

Failure to strictly adhere to the procedures listed here could result in delays for any or all payment requests.

**NOTICE OF AWARD - RETURN THIS DOCUMENT WITHIN 15 DAYS**

This document will be sent to the successful bidder as notification of the award of the bid. The contractor must return this document within 15 calendar days. Return two copies of the Contract along with the Notice of Award. **No work on the project is to occur until the Contractor has received the NOTICE TO PROCEED**. However Contractor may take the necessary steps to prepare for the work to begin. These steps could include but not be limited to scheduling, ordering items/equipment etc. The contractor shall also send the remainder of the required documents, Performance Bonds, Insurance requirements, etc. at this time.

**PERFORMANCE BOND - BIDS \$50,000-00 A" OVER -RETURN WITH THE NOTICE OF AWARD** This is a contract of guaranty executed subsequent to award by a successful bidder to protect the government from loss due to contractor inability to complete the contract as agreed. The firm receiving the Bid award shall execute a Performance Bond for the entire amount of the bid itself and **naming Jackson County Board of County Commissioners as recipient**. Once this has been accomplished, the **Notice of Award and Performance Bond must be sent to the SHIP Program Office**.

NOTE: unless otherwise noted, this bid bond requirement is primarily for construction type bids and NOT for PRODUCT type bids.

NOTICE TO PROCEED - RETURN THIS DOCUMENT UPON EXECUTION

**The Notice to Proceed will be given to the contractor only after all the required forms have been received by the SHIP Program Office through a closing.** The Notice to Proceed will specify a starting date on which the contractor shall start work. This document will also specify the total amount of days allowed for the completion of this project and will identify the date in which this project should conclude.

TIME ZONE

Jackson County is in the Central Time Zone. An any and all reference to time is made in the Central Time zone. Those responding to this Request for Bid are responsible for correctly responding.

CERTIFICATE OF FINAL COMPLETION

**NOTE: This procedure MUST BE FOLLOWED. This document MUST be on file in the SHIP Program Office or final Payment will not be processed for Payment by the Department.**

The purpose of this document is a final inspection of the project. The Contractor shall notify the SHIP Program Office via the Notice of Final Completion only when the Contractor has fully completed the project. The Housing Grants Coordinator will schedule a date for both the Owner and Contractor to complete a final inspection of the project. The results of this final inspection will be either a listing of items which remain to be completed or agreement between both parties as to the completeness of the project. The contractor will receive the final signed copy of the Notice of Final Completion once the work has been completed and released. Contractor should then provide the SHIP Program Office with the final invoice for payment. The SHIP Program Office shall process said invoice and deliver the invoice for payment to the Finance Department.



# GENERAL CONDITIONS AND SPECIFICATIONS

**PROJECT NUMBER: 1718-18**

**PROJECT NAME: SHIP Housing Rehabilitation**

## GENERAL

- A. These documents constitute the complete set of specification requirements and forms. The Request for Bid (RFB) including all sheets and attachments must be filled in, executed and submitted in a sealed envelope bearing the RFB number on the outside and mailed or presented to the SHIP Program Office on or before the specified time and date. The face envelope shall contain the return address, the date of RFB opening, the RFB number and title.
- B. It is the sole responsibility of the respondent to ensure that his or her response reaches the SHIP Program Office on or before the closing date and time. The County of Jackson shall in no way be responsible for delays, caused by any other occurrence. Offers by telephone, telegram or facsimile shall not be accepted unless otherwise specified.
- C. All responses must be typewritten or written in ink, and must be signed in ink by an officer or employee having authority to bind the company or firm.
- D. **Provide one original signed copy and one (1) additional copy** of any Response pages which have to be prepared by your firm as directed in response to this request. The original copy of the RFB must contain an original, manual signature of an authorized representative of the company.
- E. Respondents shall not be allowed to modify their packets after the opening time and date. RFB files may be examined during normal working hours, after the opening, by appointment only.
- F. The RFB packets will be publicly opened by the SHIP Program Office of the Board of County Commissioners of Jackson County. This will take place at 2864 Madison Street, Marianna, Florida 32448 on the date and time indicated in RFB packet.

ALL RESPONDENTS OR THEIR REPRESENTATIVES ARE INVITED TO BE PRESENT

For information concerning this project, please contact:

Wendy Schlesinger, Housing Grants Coordinator  
JACKSON COUNTY SHIP PROGRAM  
COUNTY HEALTH DEPARTMENT BUILDING  
4979 HEALTHY WAY, SUITE B  
MARIANNA, FLORIDA 32446  
VOICE—850-482-9083 FAX 850-718-0518

## LEGAL REQUIREMENTS

Respondents are required to comply with all provisions of Federal, State and County laws and Ordinances, rules and regulations that are applicable to the items being requested. Lack of knowledge by the respondent shall in no way be a cause for relief from responsibility, or constitute a cognizable defense against the legal effect thereof.

## PUBLIC ENTITY CRIMES

Any person submitting a bid/proposal in response to this invitation must execute the enclosed SWORN STATEMENT UNDER SECTION 287.133 (A), FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES, including proper check(s) in the space(s) provided, and enclose it with the bid/proposal.

No award will be executed with any person affiliate identified on the Department of General Services “Convicted Vendor” list. This list is defined as consisting of persons and affiliates who are disqualified from public contracting and purchasing process because they have been found guilty of a public entity crime. No public entity shall award any contract to, or transact any business in excess of the threshold amount provided in Section 287.017, Florida Statutes for Category Two (2) (currently \$10,000.00) with any person or affiliate on the “Convicted Vendor” list for a period of thirty-six (36) months from the date that person or affiliate was placed on the “Convicted Vendor” list unless that person or affiliate has been removed from the list pursuant to Section 287.133 (3)(f) Florida Statutes.

### **DRUG FREE WORKPLACE PROGRAMS**

Preference shall be given to business with Drug-Free Work Place programs, whenever two or more packets which are equal with respect to quality and service are received by the County of Jackson for the procurement of commodities or contractual services.

### **PROCUREMENT REGULATIONS**

This request is governed by the Jackson County procurement Regulations. A copy of the Procurement Regulations is available for your review at the County Purchasing Office.

### **PROTESTS OR DISPUTES**

Any protests or disputes pursuant to this request and/or contract award shall be governed by the procedures noted in the Procurement Regulations.

### **FEDERAL AND STATE TAX**

The County of Jackson is exempt from Federal and State Taxes for tangible personal property. The Purchasing Department will supply the successful respondent with an exemption certificate if required. Vendors or contractors doing business with Jackson County shall not be exempted from paying sales tax to their suppliers for materials to fulfill contractual obligations with the County, nor shall any Vendor/Contractor be authorized to use the County Tax Exemption Number in securing such materials.

### **ACCEPTANCE/REJECTION**

The County reserves the right to reject the response of any vendor who has previously failed in the proper performance of an award or to deliver on time contracts of a similar nature or who is not in a position to perform properly under this award. The County reserves the right to inspect all facilities of firms in order to make a determination as to the forgoing. Jackson County reserves the right to waive any irregularities and technicalities and may at its discretion request to re-advertise this RFB.

### **ALTERNATIVES/APPROVED EQUAL DEVIATIONS**

Unless otherwise specified, the mention of the particular manufacture’s brand name or number in the specifications does not imply that this particular product is the only one that will be considered for purchase. This reference is intended solely to designate the type or quality of merchandise that will be acceptable. Alternate offers will be considered and must include descriptive literature and/or specifications. Failure to provide descriptive literature and/or specifications with alternate offers may be cause for disqualification of the response. The determination as to whether any alternate product or service is or is not equal shall be made by Jackson County and such determination shall be final and binding upon all responses.

**The respondent shall be responsible for reading very carefully, and understanding completely, the requirements and the specifications of the items requested.** Any deviation from specifications listed herein must be clearly indicated, otherwise it will be considered that items offered are in strict compliance with these specifications, and the successful respondent will be held responsible therefore; deviations must be explained in detail on an attached sheet(s) and itemized by number. Any item or items that do not meet County specifications upon delivery will not be accepted and if the item cannot be brought up to specifications in a reasonable time, the firm will be required to compensate the County for difference in price entailed in going to the next low firm.



**NO RESPONSE**

Where more than one item is listed, any items not included in the response shall be indicated by a written "NO RESPONSE" beside the item. If no items are represented, a "Statement of NO RESPONSE" should be returned, with the envelope plainly marked "NO RESPONSE" and with the RFB number. Failure to comply will be an indication that the firm does not wish to be considered for future requests.

**NON-COLLUSION**

Firm certifies that this response is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a response for the same materials, services, supplies, or equipment and is in all respects fair and without collusion or fraud.

No premiums, rebates or gratuities permitted; either with, prior to or after any delivery of material or provision of service. Any such violation may result in contract cancellation, return of materials or discontinuation or services and possible removal from the vendor list(s).

**CONFLICT OF INTEREST**

The award is subject to provisions of State Statutes and County Ordinances if any. All respondents must disclose with their response the name of any office, director, or agent who is an employee of Jackson County. Further, all firms must disclose the name of any County employee who owns, directly or indirectly, an interest of ten percent (10%) or more in the firm or any of its branches

**UNIFORM COMMERCIAL CODE**

The Uniform Commercial Code (Florida Statutes, Chapter 672) shall prevail as the basis for contractual obligations between the awarded contractor/vendor and the County for any terms and conditions not specifically stated in this Invitation.

**AVAILABILITY OF FUNDS**

The obligations of Jackson County under this award are subject to the availability of funds lawfully appropriated for its purpose by the State of Florida and Jackson County.

**EEO STATEMENT**

Jackson County is committed to assuring equal opportunity in the award of contracts and, therefore, complies with all laws prohibiting discrimination on the basis of race, color, religion, national origin, age and sex.

**SUBCONTRACTING**

If a vendor subcontracts any portion of a contract for any reason, he must submit the name and address of the subcontractor and the name of the person to be contracted. Jackson County reserves the right to accept or reject any or all responses wherein a subcontractor is named and to make the award to the firm, who, in the opinion of the County, will be in the best interest of and/or most advantageous to the County. Jackson County also reserves the right to reject a response of any firm if the response names a subcontractor who has previously failed in the proper performance of an award or failed to deliver on time contracts of a similar nature, or who is not in a position to perform properly under this award. Jackson County reserves the right to make the determination as to the foregoing.

**QUESTIONS PERTAINING TO THE PROJECT**

No questions regarding this project will be answered unless said question is in written form. Questions pertaining to the specifications of this project will be delivered to the Housing Grants Coordinator via Fax, Mail or hand delivered. The original question along with the answer will be sent via Fax or Mail to every firm who has returned the Invitation to Participate.

**NEGOTIATIONS**

Negotiations will be conducted in accordance with Florida State Statute 11.45.



## **BID SPECIFICATIONS AND REQUIREMENTS**

**BID NUMBER: 1718-18**

**BID NAME: SHIP Housing Rehabilitation**

### **Procedures for having questions answered:**

1. All questions will be directed to the Housing Grants Coordinator unless otherwise indicated.
2. All questions will be in written form utilizing the provided question form.
3. Questions can be either:
  - A. Emailed to the Housing Grants Coordinator at [wschlesinger@jacksoncountyfl.com](mailto:weschlesinger@jacksoncountyfl.com) or
  - B. FAX questions to the Housing Grants Coordinator at 850-718-0518
4. All questions will be distributed along with the answer to ONLY THOSE respondents which have returned the INVITATION TO PARTICIPATE and/or attended the Mandatory Contractor's Meeting/Walk-through.
5. Please read ALTERNATIVES/APPROVED EQUAL DEVIATIONS regarding product specifications.

### **IMPORTANT INFORMATION:**

- Once this project has been awarded, the contractor/vendor will have 10 calendar days to begin services starting with the issuance of the "Notice to Proceed".
- The contractor/vendor may file a "Change Order" with the SHIP Program Office. The Change Order will be presented to the Board of County Commissioners for approval. If approved, the requested time extension will be granted.

### **SPECIFICATIONS**

**Please refer to the Project Work Write-up Sheets for the scope of work. Owner information will be provided to Contractors at the mandatory meeting(s) prior to the walk-through(s).**