

**TAMPA-HILLSBOROUGH COUNTY
EXPRESSWAY AUTHORITY**

Letter of Clarification No. 1

FOR

REQUESTS FOR PROPOSALS

Aesthetic Lighting Concepts REL RFP

RFP No. O-00917

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Date of Letter of Clarification: July 18, 2017

A. The following responds to questions received on the solicitation reference above:

Question 1:	Are fiber network/electrical infrastructure in the Reversible Express Lanes (REL)?
Response 1:	There are maintenance lighting and several mini-power within segments of the REL. However, it does not cover the entire REL span with power, such as over areas where there is water/ponds. Fiber network is continuous throughout facility.
Question 2:	Does this RFP include segmented highway lighting or aesthetic lighting?
Response 2:	Only aesthetic lighting. No highway lighting.
Question 3:	Regarding structural needs, are there any structural drawing or as-built documents available or drawings showing fibers and existing light drawings?
Response 3:	Drawings are available upon request as the files are large in size. Potential respondents who attended the PreBid meeting will be provided with a link to these documents.
Question 4:	If a firm submit a design, does it preclude the firm from doing construction on this project?
Response 4:	Yes.
Question 5:	Are the financial information required in the Required Forms Section ~ Form 1 – Contractor’s Questionnaire of the RFP?
Response 5:	The following sections in Form 1 does not apply to this RFP and should be omitted: Section 3.2 ~ Equipment Section 5 ~ Financial Status Section 6 ~ Subcontracting Section 7 ~ Defaults, Claims, Litigation and Violations The remainder of questions in Form 1 are applicable to this RFP. See attached revised Form 1.

All other items, conditions, and specifications in the RFP document not specifically changed by this document remain unchanged.

Please send all questions to THEA’s Procurement Manager, Man Le, via email at Man.Le@tampa-xway.com.

CONTRACTOR'S QUESTIONNAIRE ~ FORM 1 ~ REVISED 7/18/17

Contractor shall complete this questionnaire, sign, date and submit with its proposal package.

1. BUSINESS INFORMATION:

1.1. Name of Primary Contractor: _____

1.2. Location of primary office which will handle this project:

1.3. Business Organization:

a. Number of years your firm (under any name) has been in Business: _____

b. With same person in top management position _____

c. Under present name _____

d. Number of years in Florida _____

e. Total number of full-time staff _____

f. Additional Part-time Staff _____

g. States in which you have performed activities: _____

1.4. List all subcontractors on this project: _____

2. EXPERIENCE AND REFERENCES:

2.1. Experience:

2.1.1. State the total Aesthetic Lighting services volume and value that your organization has been responsible for in the past five years in:

a. Total Dollar value _____

b. Number of Contracts _____

2.1.2. List the dollar volume and number of governmental projects you have completed in the past 5 years:

a. Dollar Value _____

b. Number of government projects _____

2.2 Provide information on at least three projects that Contractor has performed within the past five (5) years that were similar to this project. List chronologically, starting with the last project:

3.2.1 **Project # 1:**

a. Date Project Completed: _____

b. Project Name: _____

c. Owner Name: _____

d. Owner Address: _____

e. Owner Telephone: _____

f. Name of Reference for this Project: _____

g. Relationship of Reference to Owner: _____

h. Title and Position Reference held for this Project:

i. Firm name where Reference was employed for this Project:

j. Reference's Telephone: _____

k. Dollar Amount: _____

l. List any other special criteria – i.e. specialized repair or equipment, etc. worked: _____

m. Describe Your Specific Scope of Work: _____

n. Beginning and Ending Contract Amount: _____

o. Your Participation was:

p. Completion Date: _____

q. Was Project completed on time? _____

r. Was Project completed within budget? _____

s. If not, explain: _____

t. Penalties imposed? (Yes or No; if Yes, explain) _____

- u. Any liens, claims, or lawsuits? (Yes or No, if Yes, explain): _____
- v. If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success did your firm have in achieving the goal. _____
- w. Provide names and phone numbers of the D/W/MBE or SBE firms used on the project: _____
- x. List Key personnel and their role on the project. _____

[Use additional sheets as necessary.]

2.2.2 Project # 2:

- a. Date Project Completed: _____
- b. Project Name: _____
- c. Owner Name: _____
- d. Owner Address: _____
- e. Owner Telephone: _____
- f. Name of Reference for this Project: _____
- g. Relationship of Reference to Owner: _____
- h. Title and Position Reference held for this Project:

- i. Firm name where Reference was employed for this Project:

- j. Reference's Telephone: _____
- k. Dollar Amount: _____
- l. List any other special criteria – i.e. specialized repair or equipment, etc. worked: _____
- m. Describe Your Specific Scope of Work: _____
- n. General Contract Amount: _____
- o. Your Participation was:

- p. Completion Date: _____
- q. Was Project completed on time? _____
- r. Was Project completed within budget? _____
- s. If not, explain: _____
- t. Penalties imposed? (Yes or No; if Yes, explain) _____
- u. Any liens, claims, or lawsuits? (Yes or No, if Yes, explain):

- v. If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success did your firm have in achieving the goal.

- w. Provide names and phone numbers of the D/W/MBE or SBE firms used on the project: _____
- x. List Key personnel and their role on the project. _____

[Use additional sheets as necessary.]

2.2.3 Project # 3:

- a. Date Project Completed: _____
- b. Project Name: _____
- c. Owner Name: _____
- d. Owner Address: _____
- e. Owner Telephone: _____
- f. Name of Reference for this Project: _____
- g. Relationship of Reference to Owner: _____
- h. Title and Position Reference held for this Project:

- i. Firm name where Reference was employed for this Project:

- j. Reference's Telephone: _____
- k. Dollar Amount: _____

- l. List any other special criteria – i.e. specialized repair or equipment, etc. worked: _____
- m. Describe Your Specific Scope of Work: _____
- n. General Contract Amount: _____
- o. Your Participation was: _____
- p. Completion Date: _____
- q. Was Project completed on time? _____
- r. Was Project completed within budget? _____
- s. If not explain: _____
- t. Penalties imposed? (Yes or No; if Yes explain) _____
- u. Any liens, claims, or lawsuits? (Yes or No, if Yes explain):

- v. If a D/W/MBE or Small Business Enterprise (SBE) percentage goal was required, indicate what the goal was and what success did your firm have in achieving the goal.

- w. Provide names and phone numbers of the D/W/MBE or SBE firms used on the project: _____
- x. List Key personnel and their role on the project. _____

[Use additional sheets as necessary.]

3. **STAFF:**

3.1 Provide information on Contractor's staff that will be assigned to this Project including name, years' experience, credentials and professional licenses.

POSITION	EMPLOYEE NAME	CREDENTIALS & PROFESSIONAL LICENSE	YEARS EXP
Project Manager			
Others			

4. **WORKLOAD:**

4.1 Total number of projects in the active planning phase _____

Dollar Amount \$ _____

4.2 Total number of projects presently under Aesthetic Lighting _____

Dollar Amount \$ _____

4.3 Provide a list of Contractor's active Aesthetic Lighting contracts which are currently in progress along with Owner's contact name and telephone number.

Contract Description	Contract Amount	Percent Complete	Owner's Representative	
			Name	Phone

The Contractor signature below attests that the information provided herein is true and accurate.

Signature

Printed Name

Title

Date

[END OF FORM 1 - CONTRACTOR'S QUESTIONNAIRE]