REQUEST FOR PROPOSALS

Item Description:  WATERSHED SAMPLING AND ANALYSIS CONSULTING SERVICES
(EXPIRES 6/30/2024)
Date to be opened:  March, 16, 2020

Issuing Department: PROVIDENCE WATER

QUESTIONS

• Please direct questions relative to the bidding process, how to fill out forms, and how to submit a bid (Pages 1-8) to Purchasing Agent Patti Jordan.
  o Phone: (401) 680-5264
  o Email: pjordan@providenceri.gov
    • Please use the subject line “RFP Question”

• Please direct questions relative to the Minority and Women’s Business Enterprise Program and the corresponding forms (Pages 9-13) to the MBE/WBE Outreach Director for the City of Providence, Grace Diaz
  o Phone: (401) 680-5766
  o Email: gdiaz@providenceri.gov
    • Please use subject line “MBE WBE Forms”

• Please direct questions relative to the specifications outlined (beginning on page 14) to the issuing department’s subject matter expert:
  Richard Blodgett
  o (401) 521-6300 X7316
  o richardb@provwater.com

Pre-bid Conference

THERE IS NO PRE-BID CONFERENCE SCHEDULED.
INSTRUCTIONS FOR SUBMISSION

Bids may be submitted up to 2:15 P.M. on the above meeting date at the Department of the City Clerk. Room 311, City Hall. 25 Dorrance Street, Providence. At 2:15 P.M. all bids will be publicly opened and read at the Board of Contract Meeting in the City Council Chambers, on the 3rd floor of City Hall.

- Bidders must submit 2 copies of their bid in sealed envelopes or packages labeled with the captioned Item Description and the City Department to which the RFP and bid are related. (On page 1)
- Communications to the Board of Contract and Supply that are not competitive sealed bids (i.e. product information/samples) should have “NOT A BID” written on the envelope or wrapper.
- Only use form versions and templates included in this RFP. If you have an old version of a form do not recycle it for use in this bid.
- The bid envelope and information relative to the bid must be addressed to:

  Board of Contract and Supply
  Department of the City Clerk – City Hall, Room 311
  25 Dorrance Street
  Providence, RI 02903

**PLEASE NOTE: This bid may include details regarding information that you will need to provide (such as proof of licenses) to the issuing department before the formalization of an award.

This information is NOT requested to be provided in your initial bid by design.

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record. The City has made a conscious effort to avoid the posting of sensitive information on the City’s Open Meetings Portal, by requesting that such sensitive information be submitted to the issuing department only at their request.
BID PACKAGE CHECKLIST

Digital forms are available in the City of Providence Purchasing Department Office or online at http://www.providenceri.gov/purchasing/how-to-submit-a-bid/

The bid package **MUST** include the following, in this order:

- Bid Form 1: Bidder's Blank as the cover page/ 1st page (see page 6 of this document)
- Bid Form 2: Certification of Bidder as 2nd page (see page 7 of this document)
- Certificate Regarding Public Records (see page 8 of this document)
- Forms from the Minority and Women Business Enterprise Program: Based on Bidder Category. See forms and instructions enclosed (pages 9-13) or on: https://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/

*Please note: MBE/WBE forms must be completed for EVERY bid submitted and must be inclusive of ALL required signatures. Forms without all required signatures will be considered incomplete.

- Bidder’s Proposal/Packet: Formal response to the specifications outlined in this RFP, including pricing information and details related to the good(s) or service(s) being provided. Please be mindful of formatting responses as requested to ensure clarity.
- Financial Assurance, *if requested* (as indicated on page 5 of this document under “Bid Terms”)

All of the above listed documents are **REQUIRED**. (With the exception of financial assurances, which are only required if specified on page 5.)

***Failure to meet specified deadlines, follow specific submission instructions, or enclose all required documents with all applicable signatures will result in disqualification, or in an inability to appropriately evaluate bids.***
NOTICE TO VENDORS

1. The Board of Contract and Supply will make the award to the lowest qualified and responsible bidder.
2. In determining the lowest responsible bidder, cash discounts based on preferable payment terms will not be considered.
3. Where prices are the same, the Board of Contract and Supply reserves the right to award to one bidder, or to split the award.
4. No proposal will be accepted if the bid is made in collusion with any other bidder.
5. Bids may be submitted on an “equal in quality” basis. The City reserves the right to decide equality. Bidders must indicate brand or the make being offered and submit detailed specifications if other than brand requested.
6. A bidder who is an out-of-state corporation shall qualify or register to transact business in this State, in accordance with the Rhode Island Business Corporation Act, RIGL Sec. 7-1.2-1401, et seq.
7. The Board of Contract and Supply reserves the right to reject any and all bids.
8. Competing bids may be viewed in person at the Department of the City Clerk, City Hall, Providence, immediately upon the conclusion of the formal Board of Contract and Supply meeting during which the bids were unsealed/opened. Bids may also be accessed electronically on the internet via the City’s Open Meetings Portal.
9. As the City of Providence is exempt from the payment of Federal Excise Taxes and Rhode Island Sales Tax, prices quoted are not to include these taxes.
10. In case of error in the extension of prices quoted, the unit price will govern.
11. The contractor will NOT be permitted to: a) assign or underlet the contract, or b) assign either legally or equitably any monies or any claim thereto without the previous written consent of the City Purchasing Director.
12. Delivery dates must be shown in the bid. If no delivery date is specified, it will be assumed that an immediate delivery from stock will be made.
13. A certificate of insurance will normally be required of a successful vendor.
14. For many contracts involving construction, alteration and/or repair work, State law provisions concerning payment of prevailing wage rates apply (RIGL Sec. 37-13-1 et seq.)
15. No goods should be delivered or work started without a Purchase Order.
16. Submit 2 copies of the bid to the City Clerk, unless the specification section of this document indicates otherwise.
17. Bidder must certify that it does not unlawfully discriminate on the basis of race, color, national origin, gender, gender identity or expression, sexual orientation and/or religion in its business and hiring practices and that all of its employees are lawfully employed under all applicable federal, state and local laws, rules and regulations. (See Bid Form 2.)
BID TERMS

1. Financial assurances may be required in order to be a successful bidder for Commodity or Construction and Service contracts. If either of the first two checkboxes below is checked, the specified assurance must accompany a bid, or the bid will not be considered by the Board of Contract and Supply. The third checkbox indicates the lowest responsible bidder will be contacted and required to post a bond to be awarded the contract.

   a) □ A certified check for $____ must be deposited with the City Clerk as a guarantee that the Contract will be signed and delivered by the bidder.

   b) □ A bid bond in the amount of _____ per centum (%) of the proposed total price, must be deposited with the City Clerk as a guarantee that the contract will be signed and delivered by the bidder; and the amount of such bid bond shall be retained for the use of the City as liquidated damages in case of default.

   c) □ A performance and payment bond with a satisfactory surety company will be posted by the bidder in a sum equal to one hundred per centum (100%) of the awarded contract.

   d) ☑ No financial assurance is necessary for this item.

2. Awards will be made within sixty (60) days of bid opening. All bid prices will be considered firm, unless qualified otherwise. Requests for price increases will not be honored.

3. Failure to deliver within the time quoted or failure to meet specifications may result in default in accordance with the general specifications. It is agreed that deliveries and/or completion are subject to strikes, lockouts, accidents and Acts of God.

The following entry applies only for COMMODITY BID TERMS:

4. Payment for partial delivery will not be allowed except when provided for in blanket or term contracts.

The following entries apply only for CONSTRUCTION AND SERVICE BID TERMS:

5. Only one shipping charge will be applied in the event of partial deliveries for blanket or term contracts.

6. Prior to commencing performance under the contract, the successful bidder shall attest to compliance with the provisions of the Rhode Island Worker’s Compensation Act, RIGL 28-29-1, et seq. If exempt from compliance, the successful bidder shall submit a sworn Affidavit by a corporate officer to that effect, which shall accompany the signed contract.

7. Prior to commencing performance under the contract, the successful bidder shall, submit a certificate of insurance, in a form and in an amount satisfactory to the City.
BID FORM 1: Bidders Blank

1. Bids must meet the attached specifications. Any exceptions or modifications must be noted and fully explained.

2. Bidder’s responses must be in ink or typewritten, and all blanks on the bid form should be completed.

3. The price or prices proposed should be stated both in WRITING and in FIGURES, and any proposal not so stated may be rejected. **Contracts exceeding twelve months must specify annual costs for each year.**

4. **Bids SHOULD BE TOTALED** so that the final cost is clearly stated (unless submitting a unit price bid), however **each item should be priced individually.** Do not group items. Awards may be made on the basis of total bid or by individual items.

5. All bids **MUST BE SIGNED IN INK.**

Name of Bidder (Firm or Individual): ____________________________________________________________

Contact Name: _________________________________________________________

Business Address: _____________________________________________________________

Business Phone #: ____________________________________________________________

Agrees to bid on (Items(s) to be bid): _____________________________________________

If the bidder’s company is based in a state other than Rhode Island, list name and contact information for a local agent for service of process that **is located within Rhode Island**

Please visit http://www.naics.com/search/ and identify the NAICS Code(s) for items being bid on. Enter the NAICS code(s) here or in parentheses next to each item listed immediately above: __________________________________________

Delivery Date (if applicable): _________________________________________________

Name of Surety Company (if applicable): _______________________________________

Total Amount in Writing*: ______________________________________________________

Total Amount in Figures*: ______________________________________________________

* **If you are submitting a unite price bid, please insert “Unit Price Bid”**

Use additional pages if necessary for additional bidding details.

__________________________________________

Signature of Representation

__________________________________________

Title
BID FORM 2: Certification of Bidder
(Non-Discrimination/Hiring)

Upon behalf of__________________________________________ (Firm or Individual Bidding),

I,______________________________________________________(Name of Person Making Certification),

being its________________________________________________(Title or “Self”), hereby certify that:

1. Bidder does not unlawfully discriminate on the basis of race, color, national origin, gender, sexual orientation and/or religion in its business and hiring practices.

2. All of Bidder’s employees have been hired in compliance with all applicable federal, state and local laws, rules and regulations.

I affirm by signing below that I am duly authorized on behalf of Bidder, on
this_________________day of___________________20____.

__________________________________________________________
Signature of Representation

__________________________________________________________
Printed Name
Certificate Regarding Public Records

Upon behalf of______________________________________________ (Firm or Individual Bidding),
I,__________________________________________________________ (Name of Person Making Certification),
being its__________________________________________________ (Title or “Self”), hereby certify an understanding that:

1. All bids submitted in response to Requests for Proposals (RFP’s) and Requests for Qualification (RFQ’s), documents contained within, and the details outlined on those documents become public record upon receipt by the City Clerk’s office and opening at the corresponding Board of Contract and Supply (BOCS) meeting.

2. The Purchasing Department and the issuing department for this RFP/RFQ have made a conscious effort to request that sensitive/personal information be submitted directly to the issuing department and only at request if verification of specific details is critical the evaluation of a vendor’s bid.

3. The requested supplemental information may be crucial to evaluating bids. Failure to provide such details may result in disqualification, or an inability to appropriately evaluate bids.

4. If sensitive information that has not been requested is enclosed or if a bidder opts to enclose the defined supplemental information prior to the issuing department’s request in the bidding packet submitted to the City Clerk, the City of Providence has no obligation to redact those details and bears no liability associated with the information becoming public record.

5. The City of Providence observes a public and transparent bidding process. Information required in the bidding packet may not be submitted directly to the issuing department at the discretion of the bidder in order to protect other information, such as pricing terms, from becoming public. Bidders who make such an attempt will be disqualified.

I affirm by signing below that I am duly authorized on behalf of Bidder, on
this________________day of____________________20____.

________________________________________________________
Signature of Representation

________________________________________________________
Printed Name
WBE/MBE Form Instructions

The City of Providence actively seeks Minority and Women business enterprises to participate in bids to meet the City’s procurement needs. Pursuant to the City of Providence Code of Ordinances, Chapter 21, Article II, Sec. 21-52 (Minority and Women’s Business Enterprise) and Rhode Island General Laws (as amended), Chapter 31-14, et seq. (Minority Business Enterprise), Minority Business Enterprise (MBE) and Women’s Business Enterprise (WBE) participation goals apply to contracts.

The goal for Minority Business Enterprise (MBE) participation is **10%** of the total bid value.

The goal for Women’s Business Enterprise (WBE) participation is **10%** of the total bid value.

The goal for combined MBE/WBE participation is **20%** of the total bid value.

Only businesses certified with the State of Rhode Island as minority and/or women business enterprises are counted towards the City’s goals. Eligible minority or women-owned businesses are encouraged to seek certification from the State of Rhode Island Minority Business Enterprise Compliance Office at: http://odeo.ri.gov/offices/mbeco/

**Note:** MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence’s MBE program.

Bid Requirements:

**All Bidders:** All bidders must complete and submit the **MBE/WBE Participation Affidavit** indicating whether or not they are a state-certified MBE/WBE and acknowledging the City’s participation goals. Submission of this form is required with **every bid**. Your bid will not be accepted without an affidavit.

**Bidders who will be subcontracting:** Bidders who will be subcontracting must submit the **Subcontractor Disclosure Form** as part of their bid submission. All subcontractors, regardless of MBE/WBE status, must be listed on this form. Business NAICS codes can be found at [https://www.naics.com/search/](https://www.naics.com/search/). Awarded bidders are required to submit **Subcontractor Utilization and Payment Reports** with each invoice.

Waiver Requests:

If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F on the Subcontractor Disclosure Form) and the prime contractor is not a Rhode Island State-certified MBE or WBE, the Bidder must complete the **MBE/WBE Waiver Request Form** for review. Waivers will be considered on a case by case basis.

No waiver will be granted unless the waiver request includes documentation that demonstrates that the Bidder has made good faith efforts to achieve the City's stated participation goals. Waivers must be reviewed and signed by the City of Providence’s MBE/WBE Outreach Director, Grace Diaz, or her designee. Department Directors cannot recommend a bidder for award if this form is applicable and absent. If the bid does not meet the participation goals of the City of Providence and a waiver is not filed with the signature of the MBE/WBE Outreach Director or her designee, the bid will not be accepted.

Verifying MBE/WBE Certification

It is the responsibility of the bidder to confirm that every MBE/WBE named in a proposal and included in a contract is certified by the Rhode Island Minority Business Enterprise Compliance office. The current MBE/WBE directory is available at the State of RI MBE Office, One Capitol Hill, 2nd Floor, Providence, RI, or online at [http://odeo.ri.gov/offices/mbeco/mbewbe.php](http://odeo.ri.gov/offices/mbeco/mbewbe.php). You can also call (401) 574-8670 to verify certification, expiration dates, and services that the MBE/WBE is certified to provide. Note: MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence's MBE program.

**Form Instructions:**

Access all bid forms from [http://www.providenceri.gov/oeo/](http://www.providenceri.gov/oeo/) or [http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/](http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/). **Download** the forms as blank PDFs. Once saved on your computer, fill them out using the Adobe program. The fillable PDFs must be completed in Adobe in order to be saved properly. Google Chrome and similar
platforms do not allow for the forms to be saved as filled PDFs. Therefore, please download the blank forms to your computer, then fill them out and save.

**Assistance with Form Requirements**

**Contract Requirements:**
Prime contractors engaging subcontractors must submit the *Subcontractor Utilization and Payment Report* to the City Department’s Fiscal Agent with every invoice and with request for final payment. This form is not submitted as a part of the initial bid package.

For contracts with duration of less than 3 months, this form must be submitted along with the contractor’s request for final payment. The form must include all subcontractors utilized on the contract, both MBE/WBE and non-MBE/WBE, the total amount paid to each subcontractor for the given period and to date. During the term of the contract, any unjustified failure to comply with the MBE/WBE participation requirements is a material breach of contract.

**Questions?**
For more information or for assistance with MBE/WBE Forms, contact the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.com or (401) 680-5766.
MBE/WBE PARTICIPATION AFFIDAVIT

Item Discussion (as seen on RFP):

Prime Bidder: _____________________________________________
Prime Bidder (Company) Phone Number:_________________________
Prime Bidder (Company) Zip Code: ___________

Which one of the following describes your business’ status in terms of Minority and/or Woman-Owned Business Enterprise certification with the State of Rhode Island?  _____MBE  _____WBE  _____Neither MBE nor WBE

By initialing the following sections and signing the bottom of this document in my capacity as the contractor or an authorized representative of contractor, I make this Affidavit:

It is the policy of the City of Providence that minority business enterprises (MBEs) and women business enterprises (WBEs) should have the maximum opportunity to participate in procurements and projects as prime contractors and vendors. Pursuant to Sec. 21-52 of the Providence Code of Ordinances and Chapter 31-14 et seq. of the Rhode Island General Laws (as amended), MBE and WBE participation goals apply to contracts.

The goal for Minority Business Enterprise (MBE) participation is 10% of the total bid value.
The goal for Women’s Business Enterprise (WBE) participation is 10% of the total bid value.
The goal for combined MBE/WBE participation is 20% of the total bid value.

I acknowledge the City of Providence’s goals of supporting MBE/WBE certified businesses. Initial __________

If awarded the contract, I understand that my company must submit to the Minority and Women’s Business Coordinator at the City of Providence (MBE/WBE Office), copies of all executed agreements with the subcontractor(s) being utilized to achieve the participation goals and other requirements of the RI General Laws.  I understand that these documents must be submitted prior to the issuance of a notice to proceed. Initial __________

I understand that, if awarded the contract, my firm must submit to the MBE/WBE Office canceled checks and reports required by the MBE/WBE Office on a quarterly basis verifying payments to the subcontractors(s) utilized on the contract. Initial __________

If I am awarded this contract and find that I am unable to utilize the subcontractor(s) identified in my Statement of Intent, I understand that I must substitute another certified MBE and WBE firm(s) to meet the participation goals. I understand that I may not make a substitution until I have obtained the written approval of the MBE/WBE Office. Initial __________

If awarded this contract, I understand that authorized representatives of the City of Providence may examine the books, records and files of my firm from time to time, to the extent that such material is relevant to a determination of whether my firm is complying with the City’s MBE/WBE participation requirements. Initial __________

I do solemnly declare and affirm under the penalty of perjury that the contents of the foregoing Affidavit are true and correct to the best of my knowledge, information and belief.

________________________________________  ______________________
Signature of Bidder  Printed Name

________________________  ______________
Company Name  Date
**SUBCONTRACTOR DISCLOSURE FORM**  
Fill out this form only if you WILL SUBCONTRACT with other parties. If you will not subcontract any portion of the proposed bid, do not fill out this form.  
Prime Bidder: __________________________________________ Primary NAICS Code: ______________________________________  
Item Description (as seen on RFP): __________________________________________

Please list all Subcontractors below. Include the total dollar value that you propose to share with each subcontractor and the dollar amount to be subcontracted. Please check off MBE and WBE where applicable. The directory of all state-certified MBE/WBE firms is located at www.mbe.ri.gov. Business NAICS codes can be found at https://www.naics.com/search/

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<th>Proposed Subcontractor</th>
<th>MBE</th>
<th>WBE</th>
<th>Primary NAICS Code</th>
<th>Date of Mobilization</th>
<th>$ Value of Subcontract</th>
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A. MBE SUBCONTRACTED AMOUNT: $  
B. WBE SUBCONTRACTED AMOUNT: $  
C. NON MBE WBE SUBCONTRACTED AMOUNT: $  
D. DOLLAR AMOUNT OF WORK DONE BY THE PRIME CONTRACTOR: $  
E. TOTAL AMOUNT OF BID (SUM OF A, B, C, & D): $  
F. PERCENTAGE OF BID SUBCONTRACTED TO MBEs AND WBEs. (%

(Add A and B. Divide by E and multiply result by 100).

Please read and initial the following statement acknowledging you understand. If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F) and the prime contractor is NOT a Rhode Island State-certified MBE or WBE, you must fill out the MBE/WBE WAIVER REQUEST FORM for consideration by City of Providence MBE/WBE Outreach Director. Initial ______

________________________________________  
Signature of Bidder  

________________________________________  
Printed Name
MBE/WBE Waiver Request Form
Fill out this form only if you are subcontracting and did not meet the 20% MBE/WBE participation goal.
State-certified MBE or WBE Prime Bidders are NOT REQUIRED to fill out this form.

Submit this form to the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.gov, for review prior to bid submission. This waiver applies only to the current bid which you are submitting to the City of Providence and does not apply to other bids your company may submit in the future.

Prime Bidder: __________________________________________________
Company Trade: __________________________________________________
Item Discussion (as seen on RFP):
____________________________________________________________________________________________________

To receive a waiver, you must list the certified MBE and/or WBE companies you contacted, the name of the primary individual with whom you interacted, and the reason the MBE/WBE company could not participate on this project.

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<tr>
<th>MBE/WBE Company Name</th>
<th>Individual’s Name</th>
<th>Company Trade</th>
<th>Why did you choose not to work with this company?</th>
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I acknowledge the City of Providence’s goal of a combined MBE/WBE participation is 20% of the total bid value. I am requesting a waiver of ______ % MBE/WBE (20% minus the value of Box F on the Subcontractor Disclosure Form). If an opportunity is identified to subcontract any task associated with the fulfillment of this contract, a good faith effort will be made to select MBE/WBE certified businesses as partners.

Signature of Prime Contractor ___________________ Printed Name ___________________ Date Signed __________

Signature of City of Providence MBE/WBE Outreach Director ___________________ Printed Name of City of Providence MBE/WBE Outreach Director ___________________ Date Signed __________
BID PACKAGE SPECIFICATIONS
SUPPLEMENTAL INFORMATION

If the issuing department for this RFP determines that your firm’s bid is best suited to accommodate their need, you will be asked to provide proof of the following prior to formalizing an award.

An inability to provide the outlined items at the request of the department may lead to the disqualification of your bid.

This information is NOT requested to be provided in your initial bid that you will submit to the City Clerk’s office by the “date to be opened” noted on page 1. This list only serves as a list of items that your firm should be ready to provide on request.

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record.

You must be able to provide:

- Business Tax ID will be requested after an award is approved by the Board of Contract and Supply.
- PROOF OF INSURANCE
1.0 INTRODUCTION

1.1 The Providence Water Supply Board (Providence Water) is seeking formal bids to conduct field sampling and analysis for Cryptosporidium and Giardia on the Scituate Reservoir watershed, and in the P.J. Holton Water Purification plant by qualified applicants (Firm) as enumerated within this Request for Proposal (RFP).

1.2 Providence Water is seeking proposals to:

- conduct watershed sampling four times per year, which includes two periods of high stream flow, as described in detail below
- sample at seven (7) locations, within streams or at reservoir spillways, near a crossing with a Providence Water firelane, state highway or town road
- quarterly sampling of two sites (raw water influent and finished water effluent) located within the water treatment plant
- provide reports of results within twenty-one (21) days of the sampling
- conduct viability assays on selected samples, as determined by Providence Water

1.3 The watershed for Providence Water’s Scituate Reservoir is located in northwestern Rhode Island, and includes approximately 60,000 acres (92.8 square miles). Land use is a mix of forest land and open space, residential development and commercial development.

1.4 The P.J. Holton Water Purification plant is located at 61 North Rd., Route 116 in Hope, RI 02831.

1.5 The mission of Providence Water’s Watershed Protection Division is to “safeguard raw water quality through controlling land uses on the watershed, and monitoring water quality within the Scituate Reservoir and its tributaries”.

1.6 All approvals on behalf of Providence Water will be made by the General Manager or his designated alternate.

2.0 INFORMATION TO ALL BIDDERS

2.1 This contract covers a four (4) year and three (3) month time period, from April 1, 2020 to June 30, 2024. **ALL PRICES QUOTED MUST REMAIN FIRM FOR THIS TIME PERIOD.** Providence Water reserves the right to extend this contract for a period not to exceed two years if deemed to be in its best interest.
2.2 Providence Water reserves the right to cancel the contract at any time with 30 days written notice and compensate the Firm for the proportionate share of work completed through the date of notice to terminate.

2.3 This RFP requests “lump-sum” bid amounts in Section 7.1 with appropriate supplemental schedules. Any fees or expenses not specifically included within this RFP will only be paid upon written approval of the General Manager, consistent with procurement provisions of the Charter of the City of Providence.

2.4 The award of this Contract in no way obligates the City of Providence to expend the entire dollar amount quoted by the Firm. Providence Water reserves the right to delete specific tasks from the proposal.

2.5 The names of any subcontractors to be used by the Firm must be submitted in writing to Providence Water for prior approval. Providence Water reserves the right to approve or disapprove any subcontractor, and subcontractors shall be able to provide performance references upon the request of Providence Water. The Firm will be solely responsible for the completeness and adequacy of all work performed by his/her subcontractors under this contract, and no contractual relationship shall be created between a subcontractor and Providence Water under this contract.

2.6 Failure to comply with any conditions of the contract specifications will be cause for suspension of the operation and/or termination of the contract.

2.7 If the contract is terminated by the Firm, the Firm shall be liable for any damages incurred by Providence Water resulting from the Firm’s breach of the contract.

2.8 The successful bidder agrees to indemnify and hold harmless the City of Providence, Providence Water, its officers, members, agents, employees and successors, from and against any and all claims or liability for injury or damage that may result from their actions. It is further understood and agreed that the successful bidder, its agents and employees are to be considered independent contractors for the sole purpose of this project. Neither the successful bidder, its employees and/or agents are to be considered employees and/or agents of the City of Providence and/or Providence Water.

2.9 Firm will provide an Original Certificate of Insurance coverage, as described in the Certificate of Insurance attachment. The certificate must read “The City of Providence, Providence Water Supply Board, its Officers and Agents are named as additional insured”.

2.10 BCI Requirement -- The successful bidder is required to submit all names of all employees who will be performing work on behalf of Providence Water (PW). The successful bidder, at no costs to PW, is required to perform a National BCI check on those employees. PW requires a sworn notarized affidavit stating that
the following individuals have successfully passed a National BCI check. As new employees, and or subcontracted employees are hired, the BCI procedure must be updated prior to them performing work for PW. The successful bidder is responsible for the professional behavior of their employees and subcontractor employees while working at a PW job site. In the event there is mitigating circumstances or blemish on the BCI, PW may consider granting an exemption. Exemptions are considered case by case once all parties agree to release the BCI results to PW. PW executive panel reviews and makes a determination.

2.11 Any questions should be directed to the Project Manager, Mr. Richard Blodgett of Providence Water’s Water Supply Department. Mr. Blodgett may reached by calling (401) 521-6300 ext. 7316, or by e-mail at rblodgett@provwater.com

3.0 SCOPE OF WORK

This section contains details on the work to be completed. Attached to this RFP are two maps, which provide a general location of the seven (7) sites.

3.1 Sampling Frequency -- Details regarding the frequency of sampling are described below:

3.1.1 Each of the seven (7) sites will be sampled four times per year

3.1.2 At each site, two (2) of the four (4) quarterly samples must be taken within forty-eight (48) hours of a one-half inch (1/2") or greater rain storm
   • Providence Water also maintains an automated rain gauge which is accessible through the internet. The Firm is responsible for monitoring rainfall and determining when a one-half inch (1/2") or greater rain storm has occurred
   • the Firm then has forty-eight (48) hours to conduct the sampling, or postpone until the next one-half inch (1/2") or greater rain storm has occurred

3.1.3 Four (4) of the seven (7) sampling locations are located at the outfall of a tributary reservoir. On average, these reservoirs only spill over for eight (8) months out of the year. Each of the four (4) quarterly samples must be taken when the reservoirs are spilling

3.1.4 No more than one (1) set of samples may be taken within any given one (1) month period

3.1.5 All seven (7) samples for any given quarter must be taken within forty-eight (48) hours of one another
REQUEST FOR PROPOSALS -- Watershed Sampling and Analysis

3.1.6 The two P.J. Holton Water Purification plant samples (raw water influent and finished water effluent) must be collected on the same date, but may be sampled within a date range separate from the watershed samples.

3.2 **Sampling Locations** -- Details regarding the location of sampling sites are described below:

3.2.1 All sampling sites are located on the Scituate Reservoir watershed, which is located in the northwest section of Rhode Island

3.2.2 All sampling sites are located within two hundred feet (200') of a town road, state highway or Providence Water fire lane

3.2.3 P.J. Holton Water Purification plant is also located in the northwest section of Rhode Island. Address is:
   61 North Rd.
   Route 116
   Hope, RI 02831

3.3 **Procedure and Analysis** -- Details regarding the procedure and analysis of the sampling are described below:

3.3.1 All analytical procedures must be performed in strict accordance with the Environmental Protection Agency's (EPA) Method 1623.1

3.3.2 Laboratories must be EPA certified to perform the indicated analyses. Copies of the most recent EPA performance evaluation results must be provided upon request

3.3.3 In order to achieve the detection levels described above, Providence Water recognizes that additional slides may need to be prepared. Providence Water will be billed per additional slide, consistent with pricing in Section 7.0. Providence Water must be notified by e-mail prior to the preparation of any additional slides. The Firm may not bill Providence Water for any additional slides without prior approval. Should Providence Water not authorize the additional slide work to occur, the Firm will present the results based on the one slide.

3.3.4 The firm must differentiate between cysts/oocysts which are empty, those with one or more internal structures, and those with amorphous structures

3.3.5 Upon prior written approval, the Firm may be required to conduct a viability assay on selected samples. HTC-8 cell culture / focal detection or PCR (Polymerase Chain Reaction) must be used. The Firm may not bill Providence Water for any viability assays without prior written approval.
3.4 **Reporting** -- Details regarding the reporting of the sampling results are described below:

3.4.1 Written reports must be submitted to Providence Water within twenty-one (21) days of completion of the analysis

3.4.2 Two (2) copies of the report must be provided

4.0 **DELIVERABLES**

4.1 Reports of sampling results

4.2 Invoices which provide a breakdown of costs

5.0 **PROPOSAL REQUIREMENTS**

5.1 Each bidder’s proposal shall contain the following elements:

5.1.1 **Approach to Project**

This section should illustrate the Firm’s broad understanding of the project, the Firm’s technical approach and ability, as well as a description of the steps to be taken in the process, and a listing of site visits and client meetings needed to accomplish the objectives defined in Section 1.0 herein.

5.1.2 **Experience of Bidding Firm / Qualifications of Project Team**

This section shall include the following information:

5.1.2 (a) A description of the Firm’s business background (and all proposed subcontractors, including their financial position), an estimated percentage of total tasks subcontracted to others, subcontractors’ main address, telephone numbers, and names of principals.

5.1.2 (b) An identification of the Firm’s staff and/or subcontractors proposed as members of the project team, and the duties, responsibilities, and concentration of effort which apply to each.

5.1.2 (c) A comprehensive listing of similar projects undertaken and/or clients served within the last five (5) years, including a brief
description of the projects, name, address, telephone number, and contact person of each client referenced;

5.1.3 **Pricing**

Provide in Bidder’s Blank Section 7.1 (lump sum totals of costs), Section 7.2 (additional slide work described in 3.3.4) and Section 7.3 (viability assay described in 3.3.5). Include in Section 7.1 all charges for meetings in half day and full day increments, including all travel costs and expenses.

5.2 Applicants failing to provide complete information requested in this section will be disqualified.

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### 6.0 SELECTION CRITERIA

Those Firms responding to this RFP will be evaluated on the following:

6.1 Firm’s approach to project;

6.2 Competitiveness of the Firm’s price bid to implement the sampling and analysis as defined in this document;

6.3 The Firm’s qualifications, experience and capability to render required services within time constraints and within budget;

6.4 Compliance with all Bid Requirements, including full completion of the Bidder’s Blank.
REQUEST FOR PROPOSALS -- Watershed Sampling and Analysis

Honorable Jorge O. Elorza, Mayor
Board of Contract and Supply
City Hall, Room 311
Providence, RI 02903

CITY OF PROVIDENCE
State of Rhode Island

BIDDER’S BLANK

7.0 In order for Providence Water to ascertain competitiveness of rates, applicants will be required to provide a competitive price as detailed herein and in Section 5.1.3 and for each deliverable or combination of deliverables as described in Section 4.0 of this document. Failure to comply with any of the requirements of this RFP will result in the disqualification of the Firm.

NAME OF COMPANY

7.1 Firm proposes to complete all work requested for a TOTAL (4 years):

$________________________

7.2 Additional pricing for the optional two (2) year extension (Section 2.1): $________________________

7.2 Additional pricing for each additional slide (Section 3.3.4): $________________________

7.3 Additional pricing for each viability assay (Section 3.3.6): $________________________

( ) Conforms to Specifications

( ) Modifications to Specifications - If yes, please note (use additional pages if necessary):

NAME OF COMPANY

FEDERAL ID# OR SOCIAL SECURITY: ________________________________

NAME OF RESPONSIBLE OFFICIAL (Please type or print): ________________________________

SIGNATURE OF OFFICIAL (Listed Above): ________________________________

TITLE OF PERSON (Listed Above): ________________________________
REQUEST FOR PROPOSALS -- Watershed Sampling and Analysis

DATE: ______________________

COMPANY ADDRESS: ______________________________________________________

PHONE NUMBER: ___________________ FAX NUMBER: _______________________

DELIVERY DATE: ________________

NAME OF SURETY COMPANY: ____________________________________________