



CITY OF ATLANTA

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55 TRINITY AVENUE, SW
ATLANTA, GA 30303
(404) 330-6204 Fax: (404) 658-7705
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DEPARTMENT OF PROCUREMENT
SUSAN M. GARRETT
Interim Chief Procurement Officer
smgarrett@AtlantaGa.Gov

Kasim Reed
Mayor

September 22, 2017

Dear Potential Bidders:

Re: FC-9950 Peachtree Creek Trunk Stabilization

Attached is one (1) copy of **Addendum Number 1**, which is hereby made a part of the above-referenced project.

For additional information, please contact Ms., Arkeshia Hamlett, Contract Officer, at (404) 330-6328 or by email at ahamlett@atlantaga.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "Susan M. Garrett".

Susan M. Garrett
Interim Chief Procurement Officer

SMG/ah

ADDENDUM NO. 1

This Addendum No. 1 forms a part of the Invitation to Bid and modifies the original solicitation package and any prior Addenda as noted below and is issued to incorporate the following:

- **Questions and Answers**
 - Received fifty (50) question
- **Revision to Technical Specifications:**
 - Delete and replace Submittal Checklist- Attachment No. 1
 - Delete and replace Bidder Statement of Qualifications- Attachment No. 2

The Bid due date HAS been modified and Bids are due on Wednesday, October 04, 2017 and should be time stamped in no later than 2:00 P.M. EST and delivered to the address listed below:

**Susan M. Garrett
Interim Chief Procurement Officer
Department of Procurement
55 Trinity Avenue, Suite 1900
Atlanta, GA 30303-0307**

****All other pertinent information is to remain unchanged****

Acknowledgment of Addendum No. 1

Bidders must sign below and return this form with Bids to the Department of Procurement, 55 Trinity Avenue, City Hall South, Suite 1900, Atlanta, Georgia 30303 as acknowledgment of receipt of this Addendum.

This is to acknowledge receipt of **Addendum No. 1, FC-9950 Peachtree Creek Trunk Stabilization** on this the 22 day of September, 2017.

Ruby-Collins | S.E. Consortium Joint Venture

Legal Company Name of Bidder

Signature of Authorized Representative

David A. Westrick

Printed Name

Chief Executive Officer

Title

October 5, 2017

Date

Signature of Authorized Representative

Wallace M. Snowden Jr.

Printed Name

President

Title

October 5, 2017

Date

Questions and Answers:

1. On the Bidder Submittal Check Sheet (page 765 of the PDF) it states that Volume 1 Informational Bid includes the Executive Summary, Organizational Structure, Overall Experience, Management Plan and Quality Control Approach. In reviewing the remainder of the solicitation, these sections are not mentioned again with what their contents are. Would you be able to clarify what is required in each section of Volume 1?

Answer: Please delete current Bidder Submittal Checklist and replace with Attachment No. 1.

2. Section 30.A of Instruction to Bidders allows 180 days for the City to review these bids. Due to the size of this project and the number of times this project has bid previously, we request that the City reduce this review time to a maximum of 90 days. Will the City reduce the timeframe allowed for these bids to be held for evaluation to a maximum of 90 days?

Answer: The one hundred eighty (180) calendar days reference does not rerefer to review time of the submitted bids, the one hundred eighty (180) calendar days refers to irrevocable time that a bid will not be withdrawn or modified during that period.

3. The work cannot be completed in the current contract time. Will the city consider extending the contract time to 24 months?

Answer: No. Since the City will allow work to take place in multiple phases/locations, the City feels that the proposed project duration is adequate.

4. With the schedule already being a concern, will the City delay the issuance of the NTP until all permits have been acquired and the schedule has been approved?

Answer: No. The City will not delay the issuance of the NTP. However, the City will provide support as necessary with permitting related tasks.

5. To attempt to complete this work within the contract time, the contractor will have to work in multiple locations. Will the City allow the contractor to work in multiple phases at once?

Answer: Yes, the City will allow the Contractor to work in multiple phases/locations.

6. GC-7 of the contract documents requires the contractor to obtain and pay for all permits. What permits does the City anticipate the contractor will need and what are the costs for each of those permits?

Answer: The Contractor will be responsible for remitting payment for permits such as: tree removal and recompense, access permits, as well as other utility permits, as required. There will be no fees associated with traffic permits.

7. Special Condition SC-10 requires that the contractor obtain the traffic permits. Will the City assist in acquiring the permits? Will there be any fees associated with the permits?

Answer: Yes, the City will assist the Contractor with obtaining traffic permits. However, the Contractor will need to provide the necessary information needed to obtain such permits. The City does not anticipate there will be any fees associated with traffic permits.

8. The contract documents state that the contractor is responsible for all costs/fines associated with spills and overflows that are even partially due to the contractor's work. Since this line already surcharges under current conditions, how will the City determine if the contractor contributed to the overflow?

Answer: Should a sewer overflow occur, the City will investigate the matter pursuant to the City's Spill Response Procedures and will determine the root-cause and responsible Parties.

9. Will the City provide access to the pipeline through existing sewer easements? And will the City obtain the ROE for the access prior to work starting?

Answer: The Contractor will need to access the pipeline via existing sewer easements. Meanwhile, obtaining ROE will be obtained by the City. Reference Section 01351, Paragraph 3.15 Rights of Entry and Access to Private Property.

10. How will special stipulations generated from ROE's be paid for?

Answer: Payment for special stipulation as a result of ROE's will be paid for under Owner's Allowances.

11. Will the restoration costs associated with the restoration of the access easements be paid for under the Site Restoration Allowance?

Answer: Costs associated with the restoration of access easements should be factored into the proposed pricing under 2-S-1010 Site Work.

12. Please confirm that there will be no cost to the contractor for the Document Control Tracking Software licenses or training?

Answer: There will be no costs to the contractor for the Document Control Tracking Software licenses and training. Reference Section 1200, Part 2 – Bid Items, Section 2.01 Lump Sum Items, Paragraph A, Item #2.

13. Please confirm that the City will be providing the Public Information Officer and all associated tasks for this project.

Answer: A full-time Public Information Officer will be provided by the City.

14. Should the modifications to the existing office at RM Clayton still be included in this contract?

Answer: Yes. The City has identified an available modular construction trailer that is located at the RM Clayton WRC for use during the course of the project. Improvements need to be made to the trailer.

15. The contract documents require a Cost-loaded CPM schedule before any pay request can be submitted. This process has significantly delayed payments in the past, which could be a significant issue on this project due to the timeframe and value. Reducing this requirement to a standard non cost-loaded CPM schedule would reduce the cost to the City and eliminate numerous issues during construction. Will the City consider reducing this requirement?

Answer: The City takes exception to this request. However, the City will work with the Contractor to confirm installed quantities and percentages complete in order to expedite review and approval of the schedule and processing of payment.

16. Is the contractor required to have a field office? If so, is there an area designated for the contractor to use?

Answer: Yes. See answer to Question #14.

17. Please confirm that the manufacturer will ship all materials to the jobsite, including all shipping and import costs?

Answer: The Manufacturer will ship all materials to a location designated by the Contractor and will accommodate all shipping and import fees.

18. The required grout strength is not specified in the Technical Proposal in the contract documents, but was specified on the quote provided previously by the manufacturer as cellular grout. Please confirm that cellular grout is acceptable for the annular space and provide the required compressive strength?

Answer: The grout strength will depend upon the design requirements.

19. Will the contractor be responsible for producing tree removal plans and obtaining/paying for tree removal permits? This is a very long process in the City of Atlanta and could impact the completion of the project within the contract time.

Answer: The Contractor will not be responsible for producing tree removal plans. However, the Contractor will be responsible for remitting payment for any associated permits required.

20. Section 02546 requires a 3D laser survey to be performed prior to lining. Should that cost be included in the lining unit price?

Answer: No. The cost for 3D laser survey will be paid for via Owner's Allowance. And documentation to substantiate the cost will be requested.

21. The contract documents require a pre and post-cleaning video of the pipe. Since this pipeline will have flow during cleaning, will the City require a Pre and Post-Cleaning Sonar Survey to verify for payment?

Answer: The City requires Pre and Post-CCTV for sections of the sewer rehabbed, as well as sections scoped for cleaning (only).

22. How will the pre and post CCTV/Sonar be paid since there is only enough quantity for one or the other?

Answer: Costs associated with Pre and Post CCTV should be factored into the contractor's proposed unit price for Bid Item 4-I-1050.

23. This is a linear project where as we perform the work, the City will immediately have beneficial use of the newly renewed pipeline. Essentially, as each segment is completed the work on that segment will be finished. Since this is the case, will the City consider reducing the retainage requirements to hold 5% of the billed amount up to the point that 50% of the contract is complete and not hold any additional after that point?

Answer: No, the City takes exception to this request.

24. Ruby-Collins requests that the City accept questions up to three days after the issuance of the question and answer addendum. This will provide an opportunity to get clarification on any answers that are unclear.

Answer: The offerors are allowed to submit questions after the issuance of the last anticipated addendum. It is at the sole discretion of the City if responses are posted as an addendum.

25. Does the City have an anticipated Notice to Proceed date for construction?

Answer: No, the City does not have an anticipated date to issue the Notice to Proceed.

26. There are no grout mix design specifications. The specs say the GC is to design the grout to meet the structural requirements, however no structural requirements are provided. Does the City or SPR have a mix design that is sufficient for the SPR liner that can be provided?

Answer: Reference answer to Question #18.

27. What is the budget or Engineer's Estimate for the project?

Answer: The City has elected not to disclose the Engineer's estimate for the project.

28. Due to Hurricane Irma our site inspection had to be postponed. Can the bid be postponed for two weeks?

Answer: Yes, the Bid due date HAS been modified and Bids are due on Wednesday, October 04, 2017 and should be time stamped in no later than 2:00 P.M. EST

29. These spec sections are in conflict with each other. Does the price include transportation to the designated project facility/site or only to the nearest port in Georgia?

Answer: Reference answer to Question #17.

30. Does pre-negotiated Items 4-N-1000 & 4-N-1001 on the Cost Proposal Form include sales tax?

Answer: The quoted price does not include any local sales and/or use taxes.

31. This product does not meet the specification regarding flow capacity for these sections of sewer. Please instruct us how to proceed for these sewer segments.

Answer: The City will elect to have the Contractor to retain in place the two (2) approved by-pass pipes (max permissible size) to coordinate with the design and compensate for any reduction in flow capacity. Reference Drawings Sheet GC-5, Detail 20.

32. The grout strength is an integral part of the specified lining system. The Manufacturer should specify the grout strength needed so all bidders are proposing the same system. Please provide the minimum grout strength for the PVC Liner System.

Answer: Reference answer to Question #18.

33. In order to estimate the cost to for a diversion/bypass system for this work the elevations of both sewers are needed. Please provide the invert elevations of these sewers preferably at manhole or structure locations.

Answer: By-pass pumping is depended upon flow in the pipe and not strictly based on the depth of the manhole. Reference Pipeline Work table included in the Drawings set.

34. This requirement contradicts the fact that a diversion or partial diversion is allowed to divert flows around the work area in lieu of bypass pumping. Please clarify.

Answer: The City considers the matter to be covered under the Contractor's means and methods.

35. The requirements listed in the Statement of Qualifications do not relate to the work that is proposed to be done on this project. We ask that the requirements on 7a and 7b be changed to closer follow the work that is to be done on this project.

Answer: Please delete the current Statement of Bidder's Qualifications and replace with Attachment No. 2.

36. The pre-bid conference was held on 9/6/17. It was clear in the meeting per Mr. Bruce Bell's comments related to not coming to pre-bid with a pre-established Joint Venture arrangement and due to Hurricane Irma and the disruption, distraction and complications which caused entities to not be able to circulate to interview and meet with prospective JV Partner's to form a JV. Also, due to Hurricane Irma our site inspection had to be postponed effecting our ability to form questions. We are requesting that the Question and Answer period be extended to Friday September 15, 2017.

Answer: No, the question due date has NOT been modified and questions are due on Wednesday, September 13, 2017 and should be received no later than 5:00 P.M. EST

37. Due to Hurricane Irma, we are requesting the bid opening date of September 27, 2017 at 2:00 pm EST be delayed two weeks and rescheduled to Wednesday, October 11, 2017, at 2:00 p.m. EST.

Answer: Reference answer to Question #28.

38. These two documents state different quantities of copies that are required to be submitted with the Original Bid. Can you please verify whether it is five (5) or seven (7) copies that are required to be submitted?

Answer: Please delete current Bidder Submittal Checklist and replace with Attachment No. 1.

39. Will the City of Atlanta's or Sekisui provide the bidders a firm 3rd party stamped design allowing bidder's to provide an equivalent proposal using the same engineered information?

Answer: Sekisui SPR Americas LLC can provide a PE approved design but uses a PE that might not be registered in Georgia. We will follow up but suggest that in the meantime the bidder will be informed that Sekisui SPR Americas LLC will provide the design by a professional engineer after bid date.

40. During the pre-bid conference it was mentioned by Watershed representatives that the pipe was being cleaned prior to the start of the project?

Answer: During the Pre-bid conference the City stated that strategic "sections" of the sewer were being cleaned in advance of the project.

A: Will more information be provided to allow for better information as to the scope of the cleaning work required?

Answer: The City does not have any pertinent information to share at this juncture.

B: Will the Prime contractors have access to discussing the pipe condition with the cleaning company?

Answer: No.

C: Will the Prime Contractor's be informed who is completing the ongoing cleaning project that is to continue until December 2017 as was mentioned in the pre-bid conference?

Answer: No.

41. What grout quantity would you like grouting companies to quote?

Answer: The Contractor should utilize the quantity that is stated on both the Bid Form under bid item 4-N-1010, and also stated in the SPR Technical Proposal, Page 7.

42. What is the grout mix/mix design that you would like grouting companies to quote?

Answer: Reference answer to Question #18.

43. How long of a grout section between bulkheads are you planning to use (e.g. 300 lf, 350 lf, 375 lf)? How much will be available for grout daily?

Answer: Reference answer to Question #18.

44. What is the location and number of injection ports per location that you plan to use in your design?

Answer: The location and number of injection ports is based on the manufacturer's recommendation, PVC liner strength, and internal framing support system.

45. With the contradiction of bypass flow requirement from Part 1.01 & Part 2.01 what is the required capacity of the temporary bypass system to be designed for? Full pipe Capacity to handle wet weather flows, or dry weather flows?

Answer: The City expects that the contractor will be able to by-pass peak dry weather flow with the ability to utilize the existing pipe during peak weather flow conditions.

46. Could the Peachtree Creek Relief Sewer be utilized as a discharge point for the temporary bypass on the Peachtree Creek Trunk Sewer? If so, how much additional capacity could the Relief sewer can handle from the Trunk Sewer?

Answer: Yes, the Relief sewer can be utilized during dry weather flow conditions. However, during wet weather flow conditions the bypass pumping and trunk sewer will need to be utilized to accommodate wet weather flow.

47. Are there any experience level requirements for the pump watch personnel? Are there any experience level requirements for the company performing the bypass?

Answer: It is the Prime Contractor's responsibility to ensure that they are retaining subcontractors and associated personnel with the necessary competencies to provide support services. However, the City will be reviewing all by-pass pumping plans and submittals. Reference Section 02750.

48. Please provide an updated quote for a 792SU winding machine and a spare parts price listing.

Answer: It is the contractor's decision how many machines are required for the project but it is anticipated that it could be 3 full sets plus the spare parts that are also listed on the same page.

49. Please provide a proposal for 500 LF of the bracing system listed in the technical proposal provided within the FC-9950 bid documents.

Answer: The parts for the bracing are listed out and can be obtained locally.

50. Please also indicate if there is a discount for additional winding machines, parts or discount if we purchase more than 500LF of bracing.

Answer: It has not been proposed in the attached document but SSPRA can give a 5% discount on the 2nd, 3rd or more machine, if required.

Attachment No. 1

Submittal Checklist

The following submittals shall be completed and submitted with each Bid see table below “Required Bid Submittal Check Sheet.” Please verify that these submittals are in the envelope before it is sealed. Disclaimer: It is each Bidders sole responsibility to ensure that their Bid to the City is inclusive of all required submittal documents outlined on the below- referenced checklist; as well as within other parts of the solicitation document.

Submit one (1) Original Bid, signed and dated, and seven (7) complete copies of the Original Bid including all required attachments.

In addition to the hard copy submissions, each Bidder shall submit two (2) digital versions of its Bid Submission in Adobe Portable Document Format (“PDF”) on compact disk (CDs). CD One (1) version should be a duplicate of the hard copy of the Bid with no deviations in order or layout of the hard copy Bid. CD Two (2) version should be a redacted version of the hard copy Bid Submission. Please refer to the Georgia Open Records Acts (O.C.G.A. § 50-18-72) for information not subject to public disclosure.

The City assumes no liability for differences in information contained in the Bidder’s printed Bid Submission and that contained on the CDs. In the event of a discrepancy, the City will rely upon the information contained in the Bidder’s printed material (Hard Copy). Each CD should be labeled with the Project Number, Project Name, and the CD Number.

Item Number	Bidder Submittal Check Sheet	Check <input checked="" type="checkbox"/>
1	Part I, Section 1- Instruction to Bidders (Bid Guarantee Included)	<input checked="" type="checkbox"/>
2	Appendix A- Office of Contract Compliance (Required Submittals Forms)	<input checked="" type="checkbox"/>
3	<p>Part I, Section 2-- All Required Procurement Documents (if any of the required submittal documents are not submitted or incomplete within your Bid submittal package, your firm may be deemed non-responsive).</p> <p><u>Required Submittals include but are not limited to:</u></p> <ul style="list-style-type: none"> ☐ Form 1; Illegal Immigration Reform and Enforcement Act ☐ Form 2; Contractor Disclosure and Declaration Form ☐ Form 3; Bid Bond ☐ Form 4.1; Certification of Insurance Ability ☐ Form 4.2; Certification of Bonding Ability ☐ Form 5; Acknowledgement of Addenda ☐ Form 6; Bidder Contact Directory ☐ Form 7; Reference List ☐ Submittal Checklist ☐ Authority to Transact Business in the State of Georgia ☐ Georgia Utilities Licenses 	
4	<p>Bidder's Official Company Name: <u>Ruby-Collins S.E. Consortium Joint Venture</u></p> <p>Company Physical Address: <u>4806 Wright Drive Smyrna, Georgia 30082</u></p> <hr/> <hr/>	
5	<p>President/Vice President/Owner Name: <u>David A. Westrick</u></p> <p>Title: <u>Chief Executive Officer</u></p> <p>Office Telephone Number: <u>770-432-2900</u></p> <p>Direct Cell Telephone Number: <u>404-226-0983</u></p> <p>Email Address: <u>dwestrick@ruby-collins.com</u></p>	
6	<p>Primary Point-of-Contact Concerning ITB: <u>David A. Westrick</u></p> <p>Title: <u>Chief Executive Officer</u></p> <p>Office Telephone Number: <u>770-432-2900</u></p> <p>Direct Cell Telephone Number: <u>404-226-0983</u></p> <p>Email Address: <u>dwestrick@ruby-collins.com</u></p>	

Attachment No. 2

PEACHTREE CREEK STABILIZATION PROJECT

STATEMENT OF QUALIFICATIONS

This Statement is to accompany proposals submitted for the following project: **FC- 9950, Peachtree Creek Stabilization Project. Proponents must meet the minimum qualification criteria set forth under items 5, 7, 8, 9, 10 and 11 of this section, must provide the organization chart as set forth under item 6 of this section and must complete the project experience forms for qualifying projects to be deemed a "Responsible and Responsive Proponent".**

1. NAME OF PROPONENT: Ruby-Collins | S.E. Consortium Joint Venture

2. BUSINESS ADDRESS: 4806 Wright Drive Smyrna, Georgia 30082

3. TELEPHONE NUMBER: 770-432-2900

4. OFFICIAL REPRESENTATIVE AND TITLE: David A. Westrick Chief Executive Officer

Wallace M. Snowden Jr. President

5. Using the forms provided in this Section, list previously completed or current projects which are similar in scope and complexity to this project which were completed or assigned to your firm or joint venture, including: Name of project, location of project, owner's name, address and phone number, description of work performed, initial contract amount, final contract amount, start date, scheduled completion date and actual completion date. (If a joint venture, list separately for each joint venture partner.)

a. Contractor must have successfully completed the following work within the last ten (10) years in the United States of America: Cleaning of not less than 15,000 linear feet of large diameter sewers 66-inch or larger in diameter. Construction of not less than 2,000 linear feet of Grouted PVC Profile Sewer Pipe Lining System of large diameter sewers 66-inches in diameter or larger. The aggregate construction value of this work must not be less than \$5,000,000. These requirements may be satisfied by the prime contractor or by a combination of prime and subcontractor experience.

6. Provide the following information for the organization proposed for this project:

a. Organizational chart.

b. Indicate the participation by the various members in the organization including all

sub-contractors, as shown on the organizational chart; in the management; and in the division of work (If a joint venture, indicate percent of man hours and percent of project cost to be performed by each joint venture member).

7. Using the forms provided in this Section, provide information for key project personnel, Project Manager, Project Superintendent, and Safety Engineer.
 - b. Project Manager must have 15+ years of experience and have successfully managed the following work within the last five years in the United States of America and have worked on at least five (5) contracts involving construction of pipe projects of similar size and complexity as this project. In addition, the Project Manager should have a thorough knowledge of sewer cleaning, sewer line foam treatment, and sewer inspection utilizing CCTV/Sonar inspection techniques.
 - c. Project Superintendent must have 15+ years of experience and have successfully managed the following work within the last five years in the United States of America and have worked on at least five (5) contracts involving construction of pipe projects of similar size and complexity as this project. In addition, the Project Superintendent should be fully competent in sewer cleaning, sewer line foam treatment, and sewer inspection utilizing CCTV/Sonar inspection techniques.
 - d. Project Engineer must have 5+ years of experience and have worked on at least three (3) contracts involving construction of pipe projects of similar size and complexity as this project.
 - e. Safety Engineer must have 8+ years of experience and have worked on at least five (5) contracts involving construction of pipe projects of similar size and complexity as this project.
 - f. Project Controls Scheduler Engineer must have 7+ years of experience and have worked on at least five (5) contracts involving construction of pipe projects of similar size and complexity as this project.
8. The Contractor must have an established Safety Program that as a minimum includes those items as listed on the attachment entitled "*CONTRACTOR SAFETY RECORD FORM*".
9. The Contractor's Workman's Compensation Ratings (EMR-Experience Modification Rate) must not exceed an average of 1.0 over the last three (3) years.
 - a. Contractor's Workman's Compensation Ratings (EMR-Experience Modification Rate) 2016 = .78 2015 = .91 2014 = .87

10. The Contractor's OSHA Incidence Rates must not exceed the Industry Standard published by the U.S. Department of Labor(2002) (i.e.-Recordable Incidence Rates of 6.2 and Loss Time Incidence Rates of 2.4 per OSHA definition and calculation) for the last three (3) years.
- a. Contractor's Recordable Incidence Rates $\frac{2016 = 4.2 \quad 2015 = 4.6 \quad 2014 = 3.3}{2016 = 0 \quad 2015 = 0 \quad 2014 = 0}$
 - b. Contractor's Lost Time Incidence Rates $\frac{2016 = 0 \quad 2015 = 0 \quad 2014 = 0}{2016 = 0 \quad 2015 = 0 \quad 2014 = 0}$
11. "If there have been any fatalities during the last five (5) years on any projects performed by the Contractor or on any work performed under the direct supervision of a proposed Project Manager and the Contractor or proposed Project Manager was cited by OSHA for "Willful", in performing the work in which the fatality occurred, the Contractor will be disqualified based on the City's review. The Contractor may also be disqualified in the event that a Recordable Incident occurred due to the same condition that existed when a previous fatality occurred and resulted in an OSHA citation or failure to implement a corrective action plan."
- a. Fatalities during the last five years where Contractor was cited by OSHA for "Willful" Violation 0
 - b. Fatalities during the last five years where the proposed Project Manager was cited by OSHA for "Willful" Violation. 0

The previous statements and attachments are true, correct, and complete to the best of my knowledge.

Date: September 25, 2017

Firm Name: Ruby-Collins | S.E. Consortium Joint Venture

By: _____

David A. Westrick

Wallace M. Snowden Jr.

Title: Chief Executive Officer

President

Sworn to and subscribed before me

this 5 day of October, 2017

Notary Public

STATEMENT OF QUALIFICATIONS
COMPANY PROJECT EXPERIENCE

(Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Project Manager:	
Contractor's Project Superintendent:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
PROJECT MANAGER EXPERIENCE

(Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Project Manager:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
PROJECT SUPERINTENDENT'S PROJECT EXPERIENCE
 (Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Project Superintendent:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
SAFETY ENGINEER'S EXPERIENCE

(Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Safety Engineer:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
PROJECT ENGINEER'S EXPERIENCE
 (Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Project Engineer:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
PROJECT CONTROLS SCHEDULER'S EXPERIENCE
 (Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Project Controls Scheduler:	
Owners Representative & Phone Number:	
Design Engineer Representative Name & Phone Number:	
Pipe, LF:	
Open Cut Sewer Installation, LF:	
External Sewer Point Repairs, No.:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

STATEMENT OF QUALIFICATIONS
PUBLIC INFORMATION OFFICER EXPERIENCE
 (Complete Form Only For Projects That Meet Minimum Criteria)

Project Name:	
Project Location:	
Contractor's Public Information Officer:	
Owners Representative & Phone Number:	
Initial Contract Amount:	\$
Final Contract Amount:	\$
Project Duration:	Date Started: Date Completed: Time Extensions:
Was Project Completed on Time?	
Description of Major Project Components:	

I. General Information

Name of Firm: Ruby-Collins, Inc.	
Business Address: 4806 Wright Drive Smyrna, Georgia 30082	
Telephone: 770-432-2900	Fax: 770-434-0586
Prepared by/Title: Ray Hudson Safety Director	Date prepared: October 5, 2017

II. Experience Modification Rates

- A. List your firm's Workers Compensation Experience Modification Rates (EMR) for the last three years.

Year	Experience Modification Rate (EMR)
2016	.78
2015	.91
2014	.87

III. OSHA Incidence Rates

- A. List your firm's Occupational Safety Health Administration (OSHA) incidence rates for the last three years.

Year	Total Recordable Incidents	Total Hours Worked	OSHA Incidence Rate*
2016	2	94,600	4.2
2015	3	86,460	4.6
2014	1	60,164	3.3

* Use your OSHA Form No. 200 and the formula:

$$(\text{Total Incidents} \times 200,000 \text{ hours}) \div (\text{Number of hours worked}) = \text{Incidence Rate}$$

III. OSHA Incidence Rates (cont'd)

B. Provide your incidence rates over the last three years for the following categories:

Category	Incidence Rate by Year*		
	Year 2016	Year 2015	Year 2014
Fatalities	0	0	0
Injuries and Illnesses with Lost Work Days	0	0	0
Injuries and Illnesses with Restricted Work Days	2.1	2.3	3.3

* Use your OSHA Form No. 200 and the formula:

$$(\text{Total Incidents} \times 200,000 \text{ hours}) \div (\text{Number of hours worked}) = \text{Incidence Rate}$$

C. Does your firm have any upheld OSHA citations in the past five years?

Yes No (If yes, attach explanation)

IV. Safety Program Information

A. Do you have a written safety program?

Yes No (If yes, attach outline)

B. Which of the following does your safety program contain:

1. Does your company require health and safety training of its subcontractors?

Yes No

2. Is documentation of health and safety training required?

Yes No

3. Do you have a Hazard Communication Program (29 CFR 1910.1200, CCR Title 8 Section 5194)?

Yes No

4. Do you have a Confined Space Entry and Rescue Program (29 CFR 1910.146, CCR Title 8 Section 5156-5159)?

Yes No (If yes, attach explanation)

5. Do you have a "Hot Work" permit program (29 CFR 1910.146, CCR Title 8 5156-5159)?

Yes No (If yes, attach explanation)

IV. Safety Program Information (cont'd)

B. Which of the following does your safety program contain (cont'd):

6. Do you have a "Lock-Out/Tag-Out" program (29 CFR 1910.417)?

Yes No (If yes, attach explanation)

C. Do you have an Equipment Maintenance Program for the following:

1. Miscellaneous construction tools and equipment? Yes No

2. Ladders? Yes No

3. Scaffolds? Yes No

4. Heavy Equipment? Yes No

5. Vehicles? Yes No

D. Do you have a new employee safety orientation program?

Yes No

1. If yes, does it include instruction in the following:

- | | | |
|-----------------------------------|---|--|
| (a) Company Safety Policy | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (b) Company Safety Rules | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (c) Safety Meeting Attendance | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (d) Company Safety Record | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (e) Hazard Recognition | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (f) Hazard Reporting | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (g) Injury Reporting | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (h) Non-Injury Accident Reporting | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (i) Personal Protective Equipment | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (j) Respiratory Protection | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (k) Fire Protection | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (l) Housekeeping | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (m) Toxic Substance | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (n) Electrical Safety | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (o) Fall Protection | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (p) First-Aid/CPR | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (q) Driving Safety | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (r) Hearing Conservation | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (s) Lock-Out/Tag-Out | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (t) Bloodborne Pathogens | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (u) Asbestos | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (v) Confined Spaces | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| (w) Hazard Communication | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

IV. Safety Program Information (cont'd)

E. Do you conduct safety meetings for your employees? Yes No

1. If yes, how often:

Daily Weekly Bi-weekly Monthly As Needed

F. Do you conduct health and safety audits of work in progress?

Yes No

1. If yes, who conducts the audits?

Safety Director & Safety Coordinator

2. How often are the audits conducted?

At least weekly

G. Do you notify all employees of accidents and precautions related to accidents and near misses?

Yes No

1. If yes, how is this notification accomplished?

(a) Safety meetings	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
(b) Post notification in office	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
(c) Post notification at the site where the incident occurred	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
(d) Other _____		

H. Is safety a criteria in evaluating the performance of:

1. Employees	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2. Supervisors	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
3. Management	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

I. Does your firm hold "tailgate" safety meetings? Yes No

1. If yes, how often:

Daily Weekly Bi-weekly Monthly As Needed

J. Does your company have a drug and alcohol testing policy?

Yes No

K. Does your company require that subcontractors participate in a drug surveillance/testing program?

Yes No

L. Does your company have a method of disseminating safety information?

Yes No