#### Addendum No. 1, RFQ 16-24



# CITY OF SOMERVILLE, MASSACHUSETTS

# Department of Purchasing JOSEPH A. CURTATONE MAYOR

To: Prospective bidders RFQ 16-24, Owner's Project Management Services, City Hall Renovation Project

From: Angela M. Allen, Purchasing Director

Date: September 28, 2015

**Re:** Responses to Written Questions

Addendum No. 1 to RFQ 16-24

Please acknowledge receipt of this Addendum by signing below and including this form in your proposal package. Failure to do so may subject the proposer to disqualification.

X	
Name of Authorized Signatory	
Title of Authorized Signatory	

# **Questions from Prospective OPM Applicants**

1. Could you please confirm the Project Phases and Designer Work Plan durations? The two schedules in the RFQ are listed as one at an 87 week total duration, and the other at an 83 week total duration.

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#### Response:

It appears this was a formatting error. There should only be one anticipated schedule:

Anticipated Project Phases and Designer Work Plan:

- Schematic Design Two (2) Options with Preliminary Cost Estimates: 10 weeks
- 35% Design and Updated Cost Estimate: 8 weeks
- 80% Design and Updated Cost Estimate: 6 weeks
- 100% Design and Final Cost Estimate: 6 weeks
- Bidding & Award: 5 weeks
- Construction Administration Phase: 52 weeks
- Estimated Total Duration (Exclusive of Completion Phase): 87 weeks
- 2. Why has the City opted to request that respondents complete a Designer Selection Board form? Many OPM solicitations require that an OPM form be completed.

The City has typically used this form in the past. It is widely used throughout the design industry and requests the relevant information that the City needs to know in evaluating applicants for OPM work.

Regardless, attached to this addendum is an OPM-specific application form that can replace the DSB application form. The City will accept **either** form as responsive to this Request for Qualifications for OPM Services. In other words, if respondents have already completed the standard DSB in the original RFQ package, the City will accept that and the applicant does not need to complete the attached OPM-specific form.

3. Is it anticipated that the building will be occupied during construction?

#### Response:

This is one of the primary items that will be determined during the design. Ideally, work will be completed in a phased approach that would only impact certain offices or certain floors at one time. However, until we have a design team on board, our options are unclear. It is anticipated that satellite office space would be required to support the construction. Location for that space would be determined during design.

4. Given the size of this project, does the City anticipate needing a full-time project representative?

#### Response:

Given the age and historical significance of the building and the anticipated impacts to City staff, this project will require full time oversight during construction.

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5. What is the current construction budget for this project?

#### Response:

Based on the report completed by CDR Maguire, the work is estimated to be approximately \$4.2 million dollars. The City understands this may go up due to changes in construction costs or costs associated with relocating City staff.

6. Do you anticipate any funding/lending sources other than CPA money and/or City money (such as State or Federal grants/loans)?

#### Response:

At this time no other funding sources are being considered. If the OPM or Design Team have suggestions to consider, the City is open to all ideas.

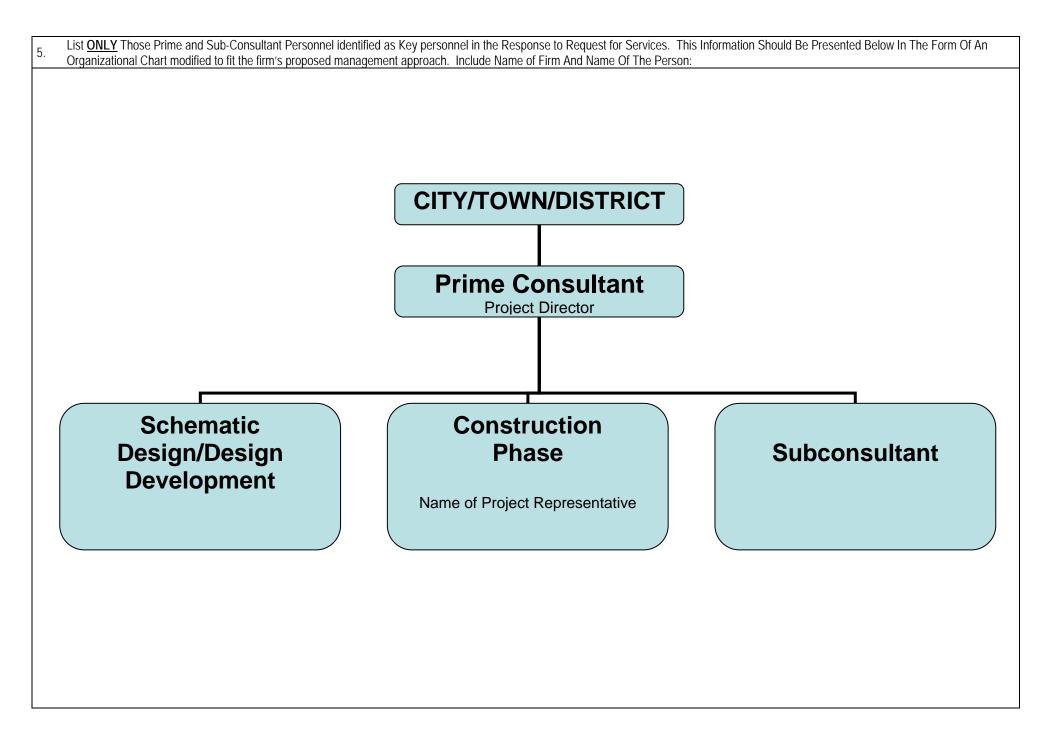
7. What are your LEED goals? Are they hoping to achieve a certification or just incorporate as many components as they can?

#### Response:

The City aims to have all buildings certifiable. The historical significance of this building could make that challenging in this case; however, we would like to consider it.

Owner's Project Manager Application Form – adapted from MSBA Standard OPM Form of May 2008 (rev. Sept. 2010)						
1.Project Name/Location for Which Firm is Filing:						
1a. Project Number:						
2a. Respondent, Firm (Or Joint-Venture) - Name And Address Of Primary Office To Perform The Work:	2b. Name And Address Of Other Participating Offices Of The Prime Applicant, If Different From Item 3a Above:					
2c. Date Present And Predecessor Firms Were Established:	2d. Name And Address Of Parent Company, If Any:					
2e. Federal ID #:	2f. Name of Proposed Project Director:					
<ol> <li>Personnel From Prime Firm Included In Question #2 Above By Discipline (List Each Person Period. Indicate Both The Total Number In Each Discipline):</li> </ol>	n Only Once, By Primary Function Average Number Employed Throughout The Preceding 6 Month					
Admin. Personnel  Architects  Acoustical Engrs.  Civil Engrs.  Code Specialists  Construction Inspectors  Cost Estimators  Electrical Engrs.  Environmental Engrs.  Licensed Site Profs.  Mechanical Engrs.	Other					
4. Has this Joint-Venture previously worked together?	□ No					

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6.	Brief Resume for Key Personnel <u>ONLY</u> as indicated in the Request for Services. Resumes Should Be Consistent With The Persons Listed On The Organizational Chart In Question # 5.  Additional Sheets Should Be Provided Only As Required For The Number Of Key Personnel And They Must Be In The Format Provided. By Including A Firm As A Subconsultant, The Prime Applicant Certifies That The Listed Firm Has Agreed To Work On This Project, Should The Team Be Selected.							
a.	Name And Title Within Firm:	a.	Name And Title Within Firm:					
b.	Project Assignment:	b.	Project Assignment:					
C.	Name And Address Of Office In Which Individual Identified In 6a Resides:	C.	Name And Address Of Office In Which Individual Identified In 6a Resides:					
d.	Years Experience: With This Firm: With Other Firms:	d.	Years Experience: With This Firm: With Other Firms:					
e.	Education: Degree(s) /Year/Specialization	e.	Education: Degree(s) /Year/Specialization					
f.	Date of MCCPO Certification:	f.	Date of MCCPO Certification:					
g.	Applicable Registrations and Certifications :	g.	Applicable Registrations and Certifications:					
h.	Current Work Assignments And Availability For This Project:	h.	Current Work Assignments And Availability For This Project					
i.	Other Experience And Qualification Relevant To The Proposed Project: (Identify Firm By Which Employed, If Not Current Firm):	i.	Other Experience And Qualification Relevant To The Proposed Project: (Identify Firm By Which Employed, If Not Current Firm):					

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7a	Past Performance: List all C Services for all Public Agenc	Completed Projects, in excess of \$1.5 cies within the Commonwealth within the	million, for which the ne past 10 years.	Prime Applicant h	nas performed,	or has entered	into a contract	to perform Ow	ner's Project M	anagement
a.	Project Name And Location Project Director	b. Brief Description Of Project And Services (Include Reference To Areas Of Similar Experience)	c. Project Dollar Value	d. Completion Date (Actual Or Estimate)	e. On Time (Yes Or No)	f. Original Construction Contract Value	g. Change Orders	h. Number of Accidents and Safety Violations	i. Dollar Value of any Safety fines	j. Number And Outcome Of Legal Actions
(1)										
(2)										
(3)										
(4)										
(5)										

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7b. Past Performance: Provide the following information for those completed Projects listed above in 7a for which the Prime Applicant has performed, or has entered into a contract to perform (cont) Owner's Project Management Services for all Public Agencies within the Commonwealth within the past 10 years.							
a.	Project Name And Location Project Director	b. Original Project Budget	c. Final Project Budget	d. If different, provide reason(s) for variance	e. Original Project Completion	e. Actual Project Completion On Time (Yes or No)	f. If different, provide reason(s) for variance.
(1)							
(2)							
(3)							
(4)							
(5)							

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8. <b>Capacity:</b> Identify all current/ongoing Work by Prime Applicant, Joint-Venture Members or Subconsultants. Identify project participants and highlight any work involving the project participants identified in the response.								
Project Name And Location Project Director	b. Brief Description Of Project And Services (Include Reference To Areas Of Similar Experience)	c. Original Project Budget	d. Current Project Budget	d. Project Completion Date	e. Current forecast completion date On Time (Yes Or No)	f. Original Construction Contract Value	g. Number and dollar value of Change Orders	h. Number and dollar value of claims
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9.	9. References: Provide the following information for completed and current Projects listed above in 7 and 8 for which the Prime Applicant has performed, or has entered into a contract to perform Owner's Project Management Services for all Public Agencies within the Commonwealth within the past 10 years.							
a.	Project Name And Location Project Director	Client's Name, Address and Phone Number. Include Name of Contact Person	Project Name And Location Project Director	Client's Name, Address and Phone Number. Include Name of Contact Person	Project Name And Location Project Director	Client's Name, Address and Phone Number. Include Name of Contact Person		
1)			5)		9)			
2)			6)		10)			
3)			7)		11)			
4)			8)		12)			

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9.	Use This Space To Provide Any Additional Information Or Description Of Resources Support Double-Sided 8 ½" X 11" Supplementary Sheets Will Be Accepted. APPLICANTS ARE RECREQUESTED.		
10.	I hereby certify that the undersigned is an Authorized Signatory of Firm and is a Principal or Cundersigned under the pains and penalties of perjury.	Officer of Firm. The information contained in this application is true, accura	ite and sworn to by the
	Submitted By (Signature)	Printed Name And Title	Date

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