

T4 PROPOSAL AND PRICING FORM

ANT-3525-00 Design-Build of new building For The Boise Service Support Center, Boise, ID

☑ Original Issue □ Amendment Number:

Instructions to Offerors: Use this form to respond to the evaluation criteria included as part of the above referenced solicitation. All requested information must be provided to submit a responsive proposal. Refer to Section M for further guidance on the evaluation criteria. An approved pre-qualification submittal is a prerequisite for award consideration.

A. COMPANY INFORMATION

Legal Business Name:

Trade Name (doing business as):						
□ Main Office	Branch Office	Address Line 1:				
Website:		Address Line 2:				
City:		State:		Zip:		
Phone:		Fax:		Email:		
Contact Name & Title:						
Contractor's License No.:			State:			

B. EVALUATION CRITERIA

Insurance Rating: Please provide your company's Workers Compensation Experience Modification Rate (EMR) for the past three years. A written explanation is required If the rate is 1.0 or higher.		Year	EMR
		2020	
		2019	
		2018	
Bonding Capacity:		Value Currently Under Bond:	

B.1 Bonding and Insurance

□ Yes □ No Is your company able to comply with the insurance limits required in the subcontract (Section H.12)?

B.2 Safety Criteria

□ Yes □ No Has your company been inspected by OSHA and/or received any OSHA citations in the last three (3) years?

If yes, please provide an attachment describing the outcome of the inspection along with copies of citations received, along with the actions taken to abate the citations. Respond to any open citations shown on the OSHA website <u>www.OSHA.gov</u>.

□ Yes □ No Has your company had any safety incidents in the last nine (9) months? If yes, attach an explanation.



B.3 Technical Criteria - The following items must be submitted as attachments to this form.

- 1. Key Personnel. Resumes of Superintendent and Project Manager to be assigned to the construction subcontract. Include number of years with your firm, prior FAA project experience, similar work performed as anticipated under this subcontract and any OSHA, safety or other specialized training. By submitting and signing this Offer, the Offeror warrants and guarantees that the individuals submitted will be assigned to the project for the duration of this subcontract. No substitutions shall be allowed unless agreed to in writing by Parsons after receipt of proper notice.
- 2. **Past Performance.** Provide information on three (3) similar projects completed within the past five (5) years. Of these projects, please highlight projects completed while working on or near an active airport.
- 3. **Project Team.** Provide a list of proposed major subcontractors and suppliers, including scope and percentage of work to be performed. If a lower-tier subcontractor is proposed for civil, electrical, or crane work, provide certifications and work history.
- 4. Schedule. Provide a preliminary Construction Progress Schedule based on the contract documents. This schedule must set out your approach to accomplishing all work no later than 289 calendar days from Notice to Proceed. The schedule must include properly sequenced work packages and key activities with durations. Provide any assumptions, constraints, or qualifications associated with your proposed schedule. Key milestones should be included in the preliminary Construction Progress Schedule.

B.4 Estimated time to complete all work in calendar days:

B.5 Percentage of work to be self-performed by your company (Section F.2 minimum 25%):

PRICING CONTINUES ON FOLLOWING PAGE



C. PRICING

Your offer shall include furnishing of all labor, including full-time competent supervision, materials, supplies, construction tools and equipment, utilities and services, transportation and drayage, receiving, handling and storage, insurance, overhead, profit, applicable taxes and all other services and expenses necessary to perform the work described in the technical specifications and drawings.

OFFEROR NAME:

Total Firm-Fixed-Price: \$_____

Breakdown of Firm-Fixed-Price:

If proposing "or equal" equipment or products, provide manufacturer and other relevant information as an attachment.

70% Design	<u>\$</u>	
100% Design	<u>\$</u>	
	Total Design Price	\$
General Requirements		
Mobilization	<u>\$</u>	
Demobilization	<u>\$</u>	
Bonds & Insurance	<u>\$</u>	
	<u>\$</u>	
Construction Administration	<u>\$</u>	
	\$	
Civil Work		
Demo/excavation	<u>\$</u>	
Concrete/Foundation	<u>\$</u>	
Paved Parking Lot & Access Road	<u>\$</u>	
Landscaping	<u>\$</u>	
	<u>\$</u>	
Architectural Work		
Shell	<u>\$</u>	
Interiors	<u>\$</u>	
	Total Architectural Work	<u>\$</u>
Services		
Electrical	<u>\$</u>	
Mechanical	<u>\$</u>	
PBX Telephone Removal and Reinstallation	<u>\$</u>	
Plumbing	<u>\$</u>	
	<u>\$</u>	
	\$	
ITEMS REQUIRED FOR PROJECT CLOSEOUT (m	\$	
TOTAL FIXED PRICE	<u>\$</u>	



D. CERTIFICATIONS

Person Authorized to Sign Documents on Behalf of Offeror. The Offer states that the following persons are authorized to negotiate on your behalf with Parsons in connection with this offer.

NAME	TITLE	PHONE NUMBER

The Offeror, by signing its offer, hereby certifies to the best of its knowledge and belief that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on its behalf in connect with the awarding of this contract.

By submitting this evaluation criteria and pricing information, whether electronically or in hardcopy form, I certify that the facts contained herein are true and complete to the best of my knowledge and belief. I acknowledge that my firm has participated in the pre-proposal meeting and is familiar with site conditions. I understand that if given the opportunity to propose on a project or if awarded a subcontract, falsified statements on this application shall be grounds for disqualification or subcontract termination. I understand that the information provided herein may be verified. I hereby authorize Parsons to contact references noted or associated with the information provided herein for the purpose of verifying my qualifications to provide construction services to Parsons. I hereby release Parsons, the FAA, and other from liability or damage that may result from furnishing the information requested. This offer is valid for 90 days after the RFO closing date. The representative signing this form represents and warrants that he/she has the full right, power, and authority to execute this form.

Signature

Printed Name and Title

Company Name

Date