

IFB #: RMTA Incident Response - 2023

#### **Attachment D** VENDOR QUALIFICATION / EQUIPMENT INVENTORY CERTIFICATION

All bidders responding to this IFB are required to complete equipment information for each piece of equipment listed in question #4.

Failure to complete this attachment may render the bid non-responsive.

1. Name of Business:

2. Name of Owner or Chief Executive Officer: \_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_

3. How many years has the firm been in the business of performing the services called for in this IFB?

- 4. All equipment that will require inspection by RMTA prior to Notice of Award is listed below.
  - In Column 1 place an "O" beside each piece of owned equipment. Place N/A in any block (YEAR/MAKE/MODEL/CAPACITY/ID#/VIN) that does not apply for owned equipment
  - In Column 1 place an "R" beside each piece of equipment that will be rented/leased or sub-contracted
  - In Column 1 place a "P" beside each piece of equipment that is to be purchased.
  - For rented, subcontracted or purchased equipment no detail (Year/Make/Model/Capacity/ID#VIN) is required at time of bid submission.
  - See #5 for rented/leased, sub-contracted or purchased equipment requirements.
  - RMTA may inspect any equipment used in the performance of this contract at any time during the performance of this contract. Any substitutes for equipment listed below must be inspected and approved prior to being used in performance of this contract.

"O" "R" "P"	DESCRIPTION	YEAR	MAKE	MODEL	CAPACITY	ID #/VIN
	Maintenance of Traffic Truck - Supervisor					
	Maintenance of Traffic Truck – Skilled Highway Worker					
	Maintenance of Traffic Truck – Skilled Highway Worker					
	Maintenance of Traffic Truck – Skilled Highway Worker					
	Maintenance of Traffic Truck – After Hours					

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"O" "R" "P"	DESCRIPTION	YEAR	MAKE	MODEL	CAPACITY	ID #/VIN
	Crash Cushion					
	Crash Cushion					
	Crash Cushion					
	Arrow Board 96"x48" Type C					
	Arrow Board 96"x48" Type C					
	Message Board 133"x71"					
	Message Board 133"x71"					
	Chipper					
	Skid Steer/Trailer Bucket					
	with Broom/Bucket					
	attachment					
	Dump Truck, Single Axle					
	with Spreader					

5. Rented, leased equipment: Prior to Notice of Intent to Award RMTA shall require the bidder to provide a letter from the applicable entity on company letterhead stating the type of equipment with detailed equipment description and availability for the duration of the contract period, for any equipment intended for use to perform services of this IFB. This letter must be provided to the Contract Officer within 2 business days of request or the bidder will be deemed non-responsive.

Sub-Contracted equipment: Prior to Notice of Intent to Award RMTA shall require the bidder to complete the sub-contracting form identifying the company they intend to use for sub-contracting and listing of the equipment. This form must be provided to the Contract Officer within 2 business days of request or the bidder will be deemed non-responsive.

Future equipment purchase: Prior to Notice of Intent to Award, RMTA shall require the bidder to provide proof of purchase with detailed equipment description and confirmed delivery date for any equipment intended for use to perform services of this IFB. This proof of purchase must be provided to the Contract Officer within 2 business days of request or the bidder will be deemed non-responsive. All purchased equipment must be available by date of award.

6. Is any of the equipment listed above currently committed on any other contract (RMTA / non RMTA) contracts? Yes No If yes, identify which equipment (year, make, model, ID/VIN), where the equipment is committed, contract number(s), name the party to the contract and location.



# ATTACHMENT E

# **State Corporation Commission Form**

Failure to complete and return this attachment may result in your bid being deemed NON-RESPONSIVE.

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#### Virginia State Corporation Commission (SCC) registration information.

The bidder: \_\_\_\_\_

□ is a corporation or other business entity with the following SCC identification number: \_\_\_\_\_

#### -OR-

 $\Box$  is not a corporation, limited liability company, limited partnership, registered limited liability partnership, or business trust **-OR-**

 $\Box$  is an out-of-state business entity that does not regularly and continuously maintain as part of its ordinary and customary business any employees, agents, offices, facilities, or inventories in Virginia (not counting any employees or agents in Virginia who merely solicit orders that require acceptance outside Virginia before they become contracts, and not counting any incidental presence of the bidder in Virginia that is needed in order to assemble, maintain, and repair goods in accordance with the contracts by which such goods were sold and shipped into Virginia from bidder's out-of-state location) **-OR-**

 $\Box$  is an out-of-state business entity that is including with this bid an opinion of legal counsel which accurately and completely discloses the undersigned bidder's current contacts with Virginia and describes why those contacts do not constitute the transaction of business in Virginia within the meaning of § 13.1-757 or other similar provisions in Titles 13.1 or 50 of the Code of Virginia.

**\*\*NOTE\*\*** >> Check the following box if you have not completed any of the foregoing options but currently have pending before the SCC an application for authority to transact business in the Commonwealth of Virginia and wish to be considered for a waiver to allow you to submit the SCC identification number after the due date for bids (the Commonwealth reserves the right to determine in its sole discretion whether to allow such waiver):  $\Box$ 



### NORMAL AND EMERGENCY CONTACTS

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Send Contracts To: Bidder's Name/Title	Primary Phone Number	
Bidder's Mailing Address	E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After Work Hours	
Fax Number	
E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After	
Work Hours Fax Number	
rax mulliper	
E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After Work Hours	
Fax Number	
E-mail Address	



## ATTACHMENT G

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### SUBCONTRACTOR APPROVAL REQUEST

No portion of the work (including equipment) shall be subcontracted to another firm or individual <u>without prior</u> <u>written consent</u> of Richmond Metropolitan Transportation Authority (herein referred to as RMTA). In the event that the contractor desires to subcontract some part of the work specified herein, the contractor shall furnish RMTA with the names, qualifications, and experience of their proposed subcontractors for agency approval. The primary contractor shall, however, remain fully liable and responsible for the work performed by its subcontractor(s) and shall assure compliance with all requirements of the contract.

List proposed subcontractor(s), including name, address, contact person, and type of work to be performed under this contract below.

FIRM INDIVIDUAL'S NAME & ADDRESS	CONTACT PERSON AND PHONE NUMBER	TYPE OF WORK TO BE PERFORMED
TYPE OF EOUIPMENT PROPO	SED SUBCONTRACTOR WILL	<u>PROVIDE</u>

## **OUALIFICATIONS / EXPERIENCE LEVEL OF PROPOSED SUBCONTRACTOR**

Please indicate which above proposed subcontractors are certified (with DSBSD) as Small, Women Owned or Minority Businesses.

Certification Number(s):

#### FOR RMTA USE ONLY:

The proposed subcontractor(s) listed above is/are approved and accepted under the terms and conditions of the contract requirements herein.



## ATTACHMENT H

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#### **REFERENCES**

Bidders should provide a list of at least 3 references where similar goods and/or services have been provided. Each reference shall include the name of the organization, the complete mailing address, the name of the contact person, the email, and the telephone/fax number.

FIRM'S NAME AND ADDRESS	CONTACT PERSON	EMAIL ADDRESS	TELEPHONE / FAX #