



CITY OF ATLANTA

SUITE 1900
55 TRINITY AVENUE, SW
ATLANTA, GA 30303
(404) 330-6204 Fax: (404) 658-7705
Internet Home Page: www.atlantaga.gov

DEPARTMENT OF PROCUREMENT
Adam L. Smith, Esq., CPPO, CPPB, CPPM, CPP,
CIPC, CISCC, CIGPM, CPPC
Chief Procurement Officer
asmith@atlantaga.gov

Kasim Reed
Mayor

July 6, 2016

Dear Potential Bidders:

Re: FC-8905, On-Call Body Repairs and Painting For Atlanta Streetcar Rail Vehicles

Attached is one (1) copy of **Addendum No. 2**, which is hereby made a part of the above-referenced project.

For additional information, please contact Elvis G. Gibbs, Business and Federal Transit Administration Procurement Manager, at (404)-865-8704, or by email at eggibbs@atlantaga.gov.

Sincerely,

A handwritten signature in blue ink that reads "Adam L. Smith".

Adam L. Smith

ALS/egg



ADDENDUM NO. 2

This Addendum No. 2 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:

1. **Bid Due Date**
The Bid due date has been extended to **Friday, July 15, 2016 at 2:00 P.M. EDT.**
2. **Revision of Table of Contents**
Table of Contents is hereby removed in its entirety and replaced with a revised Table of Contents dated 7/6/16 attached hereto as Attachment No. 1.
3. **Revision of Form 8, Part 1, Section 2, Required Submittals Checklist**
Form 8, Required Submittals Checklist is hereby removed in its entirety and replaced with a revised Form 8, Required Submittals Checklist dated 7/6/16 attached hereto as Attachment No. 2.
4. **Revision of Part 1, Section 2.1, Additional Required Submittals**
Additional Required Submittals is hereby removed in its entirety and replaced with a revised Additional Required Submittals dated 7/6/16 attached hereto as Attachment No. 3.

Addendum No. 2 for FC-8905, On-Call Body Repairs and Painting For Atlanta Streetcar Rail Vehicles is available for pick-up in the Plan Room: City Hall, 55 Trinity Avenue, Suite 1900.

The Bid due date HAS been modified and Bids are due on Friday, July 15, 2016, and should be time stamped in no later than 2:00 P.M. EDT and delivered to the address listed below:

Adam L. Smith, Esq., CPPO, CPPB, CPPM,
CPP, CIPC, CISCC, CIGPM, CPPC
Chief Procurement Officer
Department of Procurement
55 Trinity Avenue, S. W.
City Hall South, Suite 1900
Atlanta, Georgia 30303

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

Acknowledgment of Addendum No. 2

Bidders must sign below and return this form with your bid 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. 2, FC-8905, On-Call Body Repairs and Painting for Atlanta Streetcar Rail Vehicles** on this the _____ day of _____, 201__.

Legal Company Name of Bidder

Signature of Authorized Representative

Printed Name

Title

Date

Attachment No. 1

Revised Table Of Contents

FC-8905, On-Call Body Repairs and Painting For Atlanta Streetcar Rail Vehicles

Table of Contents

<u>Section</u>	<u>Title</u>	<u>Page</u>
Invitation to Bid		
PART I:		
Section 1 - Instructions to Bidders		
1.	Solicitation/Not an Offer	1
2.	Receipt and Opening of Bids	1
3.	Preparation of Bids	2
4.	Georgia Utility Contractor's License (N/A)	2
5.	How to Submit Bids	2
6.	Execution of Bidding Documents	3
7.	Failure to Bid	4
8.	Errors in Bids	4
9.	Disqualification of Bidders	4
10.	Rejection of Bids	5
11.	Failure to Perform	5
12.	Bid Schedule	5
13.	Bid Guarantee	5
14.	Statement of Bidders Qualifications	6
15.	Affidavit	6
16.	Equal Business Opportunity Program	7
17.	Authorization to Transact Business	7
18.	Business Non-Discrimination Policy	7
19.	Equal Employment Opportunity in Purchasing and Contracting	7
20.	Contract Employment Report	7
21.	First Source Jobs Policy Employment Agreement (N/A)	7
22.	Bid Form; Bid Data; Checklist	7
23.	Wage Rates of City of Atlanta Funded Construction Projects	8
24.	Pre-Bid Inspection	8
25.	Addenda and Interpretations	8
26.	Prohibited Contacts	8
27.	Pre-Bid Conference	9
28.	Time for Receiving Bids	9
29.	Bid Modification and Withdrawal	9
30.	Bid Evaluation	10
31.	Award Criteria	11
32.	Surety Bonds	12
33.	Power of Attorney	13
34.	Insurance Requirements	13
35.	Laws and Regulations	13
36.	Agreement Terms	13

37.	Liquidated Damages (N/A)	13
38.	Execution of Agreement	14
39.	Pre-Construction Conference	14
40.	Substitutions	14
41.	Illegal Immigration Reform and Enforcement Act	16
42.	Multiple Awards	16
43.	Site Visit/Tour Release Form	17

Section 2 – Required Submittal Forms

Form 1; Illegal Immigration Reform and Enforcement Act Forms

Form 2; Contractor Disclosure Form

Form 3; Bid Bond

Form 4.1; Certification of Insurance Ability

Form 5; Acknowledgment of Addenda

Form 6; Bidder’s Contact Directory

Form 7; Reference List

Form 8; Required Submittal Checklist

Section 2.1 – Additional Required Submittals

A. Buy America Certification (*Federal Certificate*)

B. Bidder’s Qualifications:

- 1) Prime Contractor
- 2) Lower-Tier Contractor
- 3) Work In Progress, Prime Contractor
- 4) Key Personnel
- 5) Safety and Health History Form

C. Federal Certifications:

- 1) Certification of Primary Participant Regarding Debarment, Suspension and Other Responsibility Matters
- 2) Certification of Lower-Tier Participant Regarding Debarment, Suspension and Other Ineligibility and Voluntary Exclusion
- 3) Certification Regarding Lobbying
- 4) Disclosure of Lobbying Activities

PART II

Draft Master Services Agreement

Exhibit A –Scope of Services

Exhibit A.1 – Compensation and Fee Schedule / Bid Form

Exhibit B – Definition

Exhibit C – Authorizing Legislation

Exhibit D – City Security Policies

Exhibit E – Dispute Resolution Procedures

Appendix A - Requirements of the Office of Contract Compliance

Appendix B – Insurance Requirements

Appendix C – Supplemental Instructions

Appendix D – General Conditions (Not Applicable)

Appendix E – Supplemental Conditions

Appendix F – Federal Requirements

Appendix G – Additional Contract Documents

1. Atlanta Streetcar System Safety Program Plan
2. Attachment A
 - 1) S-70 Rail Vehicle Specifications
 - 2) STS-ESN-032 Rev. G, Equipment Specification for Structural Fiberglass.
 - 3) STS-ENS-117.18270 Rev. A, STS Engineering Specification for Painting of Atlanta Streetcar Equipment.
 - 4) STS-ENS-010 Rev. E, General Specification for Smoke Flame and Toxicity
 - 5) STS-ENS-118 Rev D (SD160)
 - 6) Drawing No. C2837400 Rev D, Painting, Exterior – A/B Car

Attachment No. 2

Revised Form 8, Part 1, Section 2, Required Submittals Checklist

Required Submittal (FORM 8)

Required 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 Bidder's 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 five (5) 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.

	Required Bid Submittal Checklist	Check (√)
1	Part I – Instruction to Bidders (5% Bid Guarantee Included)	()
2	Appendix A - Office of Contract Compliance (Required Submittals Included)	()
3	<p>Part I, Section 2 – All Required Submittal Forms (if any of the required submittal documents are not submitted or incomplete within your Bid submittal package, your firm may be deemed non-responsive). Required Submittals include but are not limited to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Form 1; Illegal Immigration Reform and Enforcement Act Forms <input type="checkbox"/> Form 2; Contractor Disclosure Form <input type="checkbox"/> Form 3; Bid Bond <input type="checkbox"/> Form 4.1; Certification of Insurance Ability <input type="checkbox"/> Form 4.2; Certification of Bonding Ability <input type="checkbox"/> Form 5; Acknowledgment of Addenda <input type="checkbox"/> Form 6; Bidder’s Contact Directory <input type="checkbox"/> Form 7; Reference List <input type="checkbox"/> Form 8; Required Submittal Checklist <p>Additional Required Submittals</p> <ul style="list-style-type: none"> <input type="checkbox"/> Buy America Certification <input type="checkbox"/> Exhibit A.1; Compensation and Fee Schedule <input type="checkbox"/> Authority to Transact Business in the State of Georgia <input type="checkbox"/> Bidder’s Qualifications – Experience Statement <input type="checkbox"/> Bidder’s Qualifications – Lower Tier Experience Statement <input type="checkbox"/> Bidder’s Qualifications – Work in Progress <input type="checkbox"/> Bidder’s Qualifications – Key Personnel <input type="checkbox"/> Bidder’s Qualifications – Safety and Health History Form <p>Federal Submittals</p> <ul style="list-style-type: none"> <input type="checkbox"/> Certification of Primary Participant Regarding Debarment, Suspension and Other Responsibility Matters <input type="checkbox"/> Certification of Lower-Tier Participant Regarding Debarment, Suspension and Other Voluntary Exclusions <input type="checkbox"/> Certification Regarding Lobbying <input type="checkbox"/> Disclosure of Lobbying Activities 	()
4	<p>Bidder’s Official Company Name: _____</p> <p>Company Physical Address: _____</p> <p>_____</p>	
5	<p>President/Vice President/Owner Name: _____</p> <p>Title: _____</p> <p>Office Telephone Number: _____</p> <p>Direct Cell Telephone Number: _____</p> <p>Email Address: _____</p>	
6	<p>Primary Point-of-Contact Concerning ITB: _____</p> <p>Title: _____</p> <p>Office Telephone Number: _____</p> <p>Direct Cell Telephone Number: _____</p> <p>Email Address: _____</p>	

Attachment No. 3

Revised Part 1, Section 2.1, Additional Required Submittals

PART I

Section 2.1 – Additional Required Submittals

All Respondents, including, but not limited to, corporate entities, limited liability companies, joint ventures, or partnerships, that submit a Bid in response to this solicitation must fill out all six forms in their entirety, and all forms must be signed, notarized or sealed with the corporate seal (if applicable), as required per each form's instructions.

If Respondent intends to be named as a Prime Contractor(s) with the City, then Respondent must fill out all the forms listed in this solicitation document; otherwise, Respondent may be deemed non-responsive.

PART I

Section 2.1 – Additional Required Submittals

A. Buy America

B. Bidders Qualifications

- a. Prime Contractor
- b. Lower Tier Experience Statement
- c. Work In Progress
- d. Key Personnel
- e. Safety and Health History Form

C. Federal Certifications

- a. Certification of Primary Participant Regarding Debarment, Suspension, and Other Responsibility Matters
- b. Certification of Lower-Tier Participant Regarding Debarment, Suspension, and Other Ineligibility and Voluntary Exclusions
- c. Certification Regarding Lobbying
- d. Disclosure of Lobbying Activities

PART I

Section 2.1 – Additional Required Submittals

A. Buy America

BUY AMERICA CERTIFICATION

NOTICE TO BIDDERS

Your bid will not be considered unless one of the certifications on this form is completed, signed and returned with your bid. If you submit an incomplete Buy America certificate or an incorrect certificate of non-compliance through inadvertent or clerical error; within 10 days of receipt of bids, you may submit to City of Atlanta, for review by the FTA Chief Counsel, an explanation of the circumstances surrounding the submission of the incomplete or incorrect certification.

COMPLIANCE FORM

CERTIFICATE FOR COMPLIANCE WITH SECTION 165 (a) "Procurement of Steel, Iron or Manufactured Products"

The Bidder hereby certifies that it will comply with the requirements of Section 165 (a) of the Surface Transportation Assistance Act of 1982, as amended, and the applicable regulations in 49 CFR Part 661

Date:	Firm:
Name:	Signature:
Title:	

NON-COMPLIANCE FORM

CERTIFICATE FOR NON-COMPLIANCE WITH SECTION 165 (a) "Procurement of Steel, Iron or Manufactured Products"

The Bidder hereby certifies that it **cannot** comply with the requirements of Section 165 (a) of the Surface Transportation Assistance Act of 1982, as amended, but it may qualify for an exception to the requirement pursuant to Section 165 (b) (2) or (b) (4) of the Surface Transportation Assistance Act of 1982, and its regulations in 49 CFR Part 661.7

Identify items that are not compliant in the space below:

Date:	Firm:
Name:	Signature:
Title:	

PART I

Section 2.1 – Additional Required Submittals

B. Bidders Qualifications

- a. Experience Statement (*Prime Contractor*)
- b. Lower Tier Experience Statement
- c. Work In Progress
- d. Key Personnel
- e. Safety and Health History Form

BIDDER'S QUALIFICATIONS - EXPERIENCE STATEMENT (Prime Contractor)

The Bidder submits the following statement as to its experience qualifications. In the case of a joint venture or LLC, separate forms will be submitted for previous experience of the joint venture and the experience of each [arty of the joint venture or LLC.

COMPANY NAME: _____
 CONTACT: _____

PHONE: _____
 E-MAIL: _____

ADDRESS:

1. This company has been engaged in the contracting business under its present business name for _____ years.
2. Experience in work of a nature similar in type and magnitude to that set forth in the ITP extends over a period of _____ years.
3. Awarded contracts have been satisfactorily completed, except as follows (Name any and all exceptions and reasons therefore, attaching additional pages if necessary):

Exceptions

Reasons

- a.
- b.
- c.

4. The following contracts, demonstrate three (3) years of experience in the inspection and cosmetic and structural repair of automotive and commercial vehicles of types and sizes as listed in the Scope of Work and performed in accordance with Occupational Safety and Health Administration (OSHA) requirements. Experience should include general fabrication, modification, finishing and painting for automotive and commercial vehicles. Contractor's personnel performing work must have completed a safety and inspection training program within the past five (5) years.

5. Column completion notes:

- a. Work Description: Describe work scope and then indicate if prime or subcontract.
- b. Start/Stop: Provide starting date and actual/forecast completion by mo/yr, e.g. Jan 03/Sep04.
- c. Schedule and Budget: State either "over", "on", or "under" the contract schedule and budget.

Item No.	Customer Name, Address, Representative and Phone No.	Work Description	Location	Value	Start/Stop	Schedule	Budget

BIDDER'S QUALIFICATIONS - LOWER-TIER EXPERIENCE STATEMENT

This statement of experience qualifications is submitted for the following lower-tier subcontractor:

COMPANY NAME: _____
 CONTACT: _____

PHONE: _____
 E-MAIL: _____

ADDRESS:

1. This company has been engaged in the contracting business under its present business name for _____ years.
2. Experience in work of a nature similar in type and magnitude to that set forth in the RFP extends over a period of _____ years.
3. Awarded contracts have been satisfactorily completed, except as follows (Name any and all exceptions and reasons therefore, attaching additional pages if necessary):

Exceptions

Reasons

- a.
- b.
- c.

4. The following contracts, demonstrate three (3) years of experience in the inspection and cosmetic and structural repair of automotive and commercial vehicles of types and sizes as listed in the Scope of Work and performed in accordance with Occupational Safety and Health Administration (OSHA) requirements. Experience should include general fabrication, modification, finishing and painting for automotive and commercial vehicles. Contractor's personnel performing work must have completed a safety and inspection training program within the past five (5) years.
5. Column completion notes:
 - a. Work Description: Describe work scope and then indicate if prime or subcontract.
 - b. Start/Stop: Provide starting date and actual/forecast completion by mo/yr, e.g. Jan 93/Sep94.
 - c. Schedule and Budget: State either "over", "on", or "under" the contract schedule and budget.

Item No.	Customer Name, Address, Representative and Phone No.	Work Description	Location	Value	Start/Stop	Schedule	Budget

BIDDER'S QUALIFICATIONS – KEY PERSONNEL

Bidder must provide a listing of personnel and certifications and accreditations for key personnel. Submission of these names constitutes a commitment to use these individuals if the Bidder is selected, and changes may be made only with the prior written consent of the City.

1) **Project Manager / Superintendent / Owner**

Essential Duties and Responsibilities:

- Has overall responsibility for the successful completion of work performed under the contract in compliance with the contract, required timeline(s) and City of Atlanta standard details and applicable laws;
- Reads, understands, interprets, and enforces safety policies and practices as well as plans, specifications, vehicle drawings and schematics;
- Schedules and documents all required inspections, quality testing, or other compliance requirements;
- Supervises the completion of daily reports (such as units complete, safety reports, EEO meetings and weekly unit cost worksheets, etc.);
- Confers with personnel to resolve complaints and grievances within work force; and
- Attends Superintendent Meetings.

Minimum Qualifications:

- Experience includes: Minimum of three (3) years of experience in cosmetic and structural body repairs of automotive and commercial vehicles;
- Experience should include general fabrication, modification, finishing and painting for automotive and commercial vehicles; and
- Completion of a safety and inspection training program within the past five (5) years.

2) **Safety Manager**

Essential Duties and Responsibilities:

- Develops monitors and coordinates Safety Plan and continuous safety training program.

Minimum Qualifications:

- 3+ years of related cosmetic and structural body repairs of automotive and commercial vehicles experience; or
 - 5 years' experience and possessing a Certified Safety Professional (CSP) Certification or Safety and Health degree; and
 - Average of twenty-four (24) hours of formal safety training each year for the past four years.
-

The contactor must include the following with their submittal package:

- A list of all personnel performing inspections and repairs under this contract;
- Documentation of certifications and accreditations for all personnel performing inspections and repairs under this contract; and
- Documentation of completion of safety and inspection training program within the past five (5) years for all personnel performing inspections and repairs under this contract.

BIDDER'S QUALIFICATIONS - SAFETY AND HEALTH HISTORY FORM

1. EXPERIENCE MODIFICATION RATE			
1A. List your firm's Interstate Experience Modification Rate (EMR) for the three (3) most recent years and total hours worked.			
	20_____	20_____	20_____
a. EMR	_____	_____	_____
b. Hours Worked	_____	_____	_____
1B. If the state where the jobsite is located has an EMR rating system, provide the state EMR for the three (3) most recent years and total hours worked.			
	20_____	20_____	20_____
a. EMR	_____	_____	_____
b. Hours Worked	_____	_____	_____
2. SAFETY PERFORMANCE			
2A. List safety performance incident rates for the three (3) most recent years:			
	20_____	20_____	20_____
a. OSHA Recordable Incident Rate	_____	_____	_____
b. Lost Workday Case Incident Rate	_____	_____	_____
2B. Use your OSHA No. 200 Log to fill in the three (3) most recent years:			
	20_____	20_____	20_____
a. Number of first aid cases	_____	_____	_____
b. Number of lost workday cases.	_____	_____	_____
c. Number of restricted workday cases.	_____	_____	_____
d. Number of cases with medical attention only.	_____	_____	_____
e. Number of fatalities.	_____	_____	_____
3. Check your type of work:			
___ Non-Residential Building		___ Earthwork	
___ Heavy (Non-Highway) Construction		___ Concrete	
___ Mechanical		___ Architectural	
___ Electrical			
___ Other (State Type): _____			

SAFETY AND HEALTH HISTORY (Continued)

4. Are accident reports (OSHA 200) and report summaries sent to the following and how often?					
	No	Yes	Monthly	Quarterly	Annually
a. Project Superintendent/Site Mgr.	—	—	—	—	—
b. Vice President/Mgr. of Construction	—	—	—	—	—
c. Safety Director	—	—	—	—	—
d. President of Firm	—	—	—	—	—
5. Do you hold site safety meetings for field employees both Manual and Non-Manual? Yes ___ No ___ How Often? Weekly ___ Bi-Weekly ___ Monthly ___ Less Often, As Needed ___					
6. Do you conduct project safety inspections? Yes ___ No ___ If yes, who conducts this inspection?					
TITLE				HOW OFTEN?	
7. How are accident records and accident summaries kept? How often are they reported?					
	No	Yes	Monthly	Annually	
a. Accidents totaled for the entire company	—	—	—	—	
b. Accidents totaled by project	—	—	—	—	
(1) Subtotalled by superintendent	—	—	—	—	
(2) Subtotalled by foreman	—	—	—	—	
8. How are the costs of individual accidents kept? How often are they reported?					
	No	Yes	Monthly	Annually	
a. Costs totaled for the entire company	—	—	—	—	
b. Costs totaled by project	—	—	—	—	
(1) Subtotalled by superintendent	—	—	—	—	
(2) Subtotalled by foreman ___	—	—	—	—	

SAFETY AND HEALTH HISTORY (Continued)

9. List key Safety and Health personnel planned for this project. Please list name, expected position and safety performance on their last three projects (OSHA Recordable and Lost Workday Case Incident (LWCI) rates). When a project has not been specified, list key company personnel.

NAME	POSITION	PROJECT	OSHA	LWCI

10. Do you have a written safety program?

Yes ___ No ___

If yes, submit a copy for evaluation.

11. Do you have an orientation program for new hires?

Yes ___ No ___

If yes submit a copy for evaluation. Does it include instruction on the following?

	Yes	No		Yes	No
a. Head protection	___	___	i. Fire protection	___	___
b. Eye protection	___	___	j. First aid facilities	___	___
c. Hearing Protection	___	___	k. Emergency procedures	___	___
d. Respiratory protection	___	___	l. Toxic substances	___	___
e. Safety belts and lifeline	___	___	m. Trenching and excavation	___	___
f. Scaffolding	___	___	n. Signs, barricades, flagging	___	___
g. Perimeter guarding	___	___	o. Electrical safety	___	___
h. Housekeeping	___	___	p. Rigging and crane safety	___	___
			q. Road Safety (Driving)	___	___

SAFETY AND HEALTH HISTORY (Continued)

12. Do you have a program for newly hired or promoted foremen?

Yes ___ No ___

If yes submit a copy for evaluation. Does it include the following?

	Yes	No		Yes	No
a. Safe work practices	___	___	e. First aid procedures	___	___
b. Safety supervision	___	___	f. Accident investigation	___	___
c. Toolbox meetings	___	___	g. Fire protection and prevention	___	___
d. Emergency procedures	___	___	h. New worker orientation	___	___

13. Do you hold craft "toolbox" safety meetings?

Yes ___ No ___

How Often?

Weekly ___ Bi-Weekly ___ Monthly ___ Less Often, As Needed ___

14. Do you have a written Hazard Communication program?

Yes ___ No ___

If yes, how is it implemented on each project?

15. Do you have/require Material Safety Data Sheets (M.S.D.'s) for material/chemicals/equipment?

Yes ___ No ___

If yes, explain field procedure for informing craft workers about potential hazards:

SAFETY AND HEALTH HISTORY (Continued)

16. List three (3) client references that could verify the quality and management commitment of your safety program.

Name	Address	Phone No.
a. _____	_____ _____	_____
b. _____	_____ _____	_____
c. _____	_____ _____	_____

PART I

Section 2.1 – Additional Required Submittals

C. Federal Certifications

All Respondents, including, but not limited to, corporate entities, limited liability companies, joint ventures, or partnerships, that submit a Bid in response to this solicitation must fill out all four required federal certification forms in their entirety, and all forms must be signed, notarized or sealed with the corporate seal (if applicable), as required per each form's instructions.

The Respondents are encouraged to provide the four (4) executed required Federal Certification Forms listed below when submitting their bids. Respondents who fail to execute and provide the four (4) required Federal Certification Forms prior to award recommendation may be deemed non-responsible and will not be recommended for award of a contract.

- a. Certification of Primary Participant Regarding Debarment, Suspension, and Other Responsibility Matters
- b. Certification of Lower-Tier Participant Regarding Debarment, Suspension, and Other Ineligibility and Voluntary Exclusions
- c. Certification Regarding Lobbying
- d. Disclosure of Lobbying Activities

CERTIFICATION OF PRIMARY PARTICIPANT
REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

The Primary Participant (potential consultant for a major third party contract), _____, certifies to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
2. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or Local) with commission of any of the offenses enumerated in paragraph (2) of this certification; and
4. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or Local) terminated for cause or default.

(If the primary participant is unable to certify to any of the statements in this certification, the participant shall attach an explanation to this certification.)

THE PRIMARY PARTICIPANT, (POTENTIAL CONSULTANT FOR A MAJOR THIRD PARTY CONTRACT) _____, CERTIFIES OR AFFIRMS THE TRUTHFULNESS AND ACCURACY OF THE CONTENTS OF THE STATEMENTS SUBMITTED ON OR WITH THIS CERTIFICATION AND UNDERSTANDS THAT THE PROVISIONS OF 31 U.S.C. SECTIONS 3801 ET SEQ. ARE APPLICABLE THERETO.

Signature and Title of Authorized Official

Date

CERTIFICATION OF LOWER-TIER PARTICIPANT
REGARDING DEBARMENT, SUSPENSION, AND OTHER INELIGIBILITY AND
VOLUNTARY EXCLUSION

The Lower-Tier Participant (potential subconsultant under a major third party contract), _____, certifies by submission of this proposal that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(If the Lower-Tier participant is unable to certify to any of the statements in this certification, such participant shall attach an explanation to this proposal.)

THE LOWER-TIER PARTICIPANT (POTENTIAL SUBCONSULTANT UNDER A MAJOR THIRD PARTY CONTRACT) _____, CERTIFIES OR AFFIRMS THE TRUTHFULNESS AND ACCURACY OF THE CONTENTS OF THE STATEMENTS SUBMITTED ON OR WITH THIS CERTIFICATION AND UNDERSTANDS THAT THE PROVISIONS OF 31 U.S.C. SECTIONS 3801 ET SEQ. ARE APPLICABLE THERETO.

Signature and Title of Authorized Official

Date

CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence a member of the Board of Directors, officer, or any elected, appointed, or employed official or employee of the State of Georgia, member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, or the amendment or modification of any Federal contract.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence a member of the Board of Directors, officer, or a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal Contract, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award of all subcontracts anticipated to be of a value of \$100,000 or more and that all subcontractors shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature: _____ Date: _____

Title: _____ Telephone No.: _____

Firm or Corporate Name: _____

Address: _____

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal Action, or a material change to a previous filing, pursuant to the fide 31 U. S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence and officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is an/or has been secured to influence the outcome of a covered Federal Action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, suite and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation., United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loan, and loan commitments.
8. Enter the most appropriate Federal Identifying number available for the Federal action identified in Item I (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (Item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulated amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es) that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services tendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying officer shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Page _____ of _____

Reporting
Entity: _____