# **Attachment A**

**Technical Proposal Forms**

The following forms must be included within the Technical Proposal. However, please refer to Section 00300 for further required contents of the technical proposal. Completion of these forms is not the entire technical proposal.

\_\_\_\_\_\_\_\_\_\_\_\_ **(Mandatory) Transmittal Letter**

\_\_\_\_\_\_\_\_\_\_\_\_ Bid/Proposal Affidavit

\_\_\_\_\_\_\_\_\_\_\_\_ "Key Personnel Form" for Contract Manager

\_\_\_\_\_\_\_\_\_\_\_\_ "Key Personnel Experience/References (3) for Contract Manager

\_\_\_\_\_\_\_\_\_\_\_\_ “Key Personnel Form” for Lead Mechanic

\_\_\_\_\_\_\_\_\_\_\_\_ "Key Personnel Experience/References (3) for Lead Mechanic

\_\_\_\_\_\_\_\_\_\_\_\_ “Key Personnel Form” for Elevator Adjustor

\_\_\_\_\_\_\_\_\_\_\_\_ "Key Personnel Experience/References (3) for Elevator Adjustor

\_\_\_\_\_\_\_\_\_\_\_\_ Proposer’s Experience Forms (3)

\_\_\_\_\_\_\_\_\_\_\_\_ Specific Background

\_\_\_\_\_\_\_\_\_\_\_\_ Firm Equipment Experience

\_\_\_\_\_\_\_\_\_\_\_\_ Local Capabilities

\_\_\_\_\_\_\_\_\_\_\_\_ Engineering Capability

\_\_\_\_\_\_\_\_\_\_\_\_ Spare Parts Supply and Network

\_\_\_\_\_\_\_\_\_\_\_\_ Reporting and Monitoring Services

\_\_\_\_\_\_\_\_\_\_\_\_ Company Profile

\_\_\_\_\_\_\_\_\_\_\_\_ Annual Sales

\_\_\_\_\_\_\_\_\_\_\_\_ Statement of Approach

\_\_\_\_\_\_\_\_\_\_\_\_ Acknowledgment of Amendment(s) (if any)

It is the Proposer’s responsibility to thoroughly review the RFP documents, in particularly Section 300, to ensure all required contents are submitted.

**BID/PROPOSAL AFFIDAVIT**

A. AUTHORIZED REPRESENTATIVE

I HEREBY AFFIRM THAT:

I am the (title) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and the duly authorized representative of (business) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and that I possess the legal authority to make this Affidavit on behalf of myself and the business for which I am acting.

B. CERTIFICATION REGARDING COMMERCIAL NONDISCRIMINATION

The undersigned bidder hereby certifies and agrees that the following information is correct: In preparing its bid on this project, the bidder has considered all proposals submitted from qualified, potential subcontractors and suppliers, and has not engaged in "discrimination" as defined in §19-103 of the State Finance and Procurement Article of the Annotated Code of Maryland. "Discrimination" means any disadvantage, difference, distinction, or preference in the solicitation, selection, hiring, or commercial treatment of a vendor, subcontractor, or commercial customer on the basis of race, color, religion, ancestry, or national origin, sex, age, marital status, sexual orientation, or on the basis of disability or any otherwise unlawful use of characteristics regarding the vendor's, supplier's, or commercial customer's employees or owners. "Discrimination" also includes retaliating against any person or other entity for reporting any incident of "discrimination". Without limiting any other provision of the solicitation on this project, it is understood that, if the certification is false, such false certification constitutes grounds for the State to reject the bid submitted by the bidder on this project, and terminate any contract awarded based on the bid. As part of its bid or proposal, the bidder herewith submits a list of all instances within the past 4 years where there has been a final adjudicated determination in a legal or administrative proceeding in the State of Maryland that the bidder discriminated against subcontractors, vendors, suppliers, or commercial customers, and a description of the status or resolution of that determination, including any remedial action taken. Bidder agrees to comply in all respects with the State's Commercial Nondiscrimination Policy as described under Title 19 of the State Finance and Procurement Article of the Annotated Code of Maryland.

B-1. Certification Regarding Minority Business Enterprises.

The undersigned bidder hereby certifies and agrees that it has fully complied with the State Minority Business Enterprise Law, State Finance and Procurement Article, §14-308(a)(2), Annotated Code of Maryland, which provides that, except as otherwise provided by law, a contractor may not identify a certified minority business enterprise in a bid or proposal and:

(1) Fail to request, receive, or otherwise obtain authorization from the certified minority business enterprise to identify the certified minority proposal;

(2) Fail to notify the certified minority business enterprise before execution of the contract of its inclusion in the bid or proposal;

(3) Fail to use the certified minority business enterprise in the performance of the contract; or

(4) Pay the certified minority business enterprise solely for the use of its name in the bid or proposal.

Without limiting any other provision of the solicitation on this project, it is understood that if the certification is false, such false certification constitutes grounds for the State to reject the bid submitted by the bidder on this project, and terminate any contract awarded based on the bid.

C. AFFIRMATION REGARDING BRIBERY CONVICTIONS

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business (as is defined in Section 16-101(b) of the State Finance and Procurement Article of the Annotated Code of Maryland), or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities including obtaining or performing contracts with public bodies has been convicted of, or has had probation before judgment imposed pursuant to Criminal Procedure Article, §6-220, Annotated Code of Maryland, or has pleaded nolo contendere to a charge of, bribery, attempted bribery, or conspiracy to bribe in violation of Maryland law, or of the law of any other state or federal law, except as follows (indicate the reasons why the affirmation cannot be given and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of person(s) involved, and their current positions and responsibilities with the business):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D. AFFIRMATION REGARDING OTHER CONVICTIONS

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities including obtaining or performing contracts with public bodies, has:

(1) Been convicted under state or federal statute of:

(a) A criminal offense incident to obtaining, attempting to obtain, or performing a public or private contract; or

(b) Fraud, embezzlement, theft, forgery, falsification or destruction of records or receiving stolen property;

(2) Been convicted of any criminal violation of a state or federal antitrust statute;

(3) Been convicted under the provisions of Title 18 of the United States Code for violation of the Racketeer Influenced and Corrupt Organization Act, 18 U.S.C. §1961 et seq., or the Mail Fraud Act, 18 U.S.C. §1341 et seq., for acts in connection with the submission of bids or proposals for a public or private contract;

(4) Been convicted of a violation of the State Minority Business Enterprise Law, §14-308 of the State Finance and Procurement Article of the Annotated Code of Maryland;

(5) Been convicted of a violation of §11-205.1 of the State Finance and Procurement Article of the Annotated Code of Maryland;

(6) Been convicted of conspiracy to commit any act or omission that would constitute grounds for conviction or liability under any law or statute described in subsections (1)—(5) above;

(7) Been found civilly liable under a state or federal antitrust statute for acts or omissions in connection with the submission of bids or proposals for a public or private contract;

(8) Been found in a final adjudicated decision to have violated the Commercial Nondiscrimination Policy under Title 19 of the State Finance and Procurement Article of the Annotated Code of Maryland with regard to a public or private contract; or

(9) Admitted in writing or under oath, during the course of an official investigation or other proceedings, acts or omissions that would constitute grounds for conviction or liability under any law or statute described in §§B and C and subsections D(1)—(8) above, except as follows (indicate reasons why the affirmations cannot be given, and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of the person(s) involved and their current positions and responsibilities with the business, and the status of any debarment):

E. AFFIRMATION REGARDING DEBARMENT

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities, including obtaining or performing contracts with public bodies, has ever been suspended or debarred (including being issued a limited denial of participation) by any public entity, except as follows (list each debarment or suspension providing the dates of the suspension or debarment, the name of the public entity and the status of the proceedings, the name(s) of the person(s) involved and their current positions and responsibilities with the business, the grounds of the debarment or suspension, and the details of each person's involvement in any activity that formed the grounds of the debarment or suspension).

F. AFFIRMATION REGARDING DEBARMENT OF RELATED ENTITIES

I FURTHER AFFIRM THAT:

(1) The business was not established and it does not operate in a manner designed to evade the application of or defeat the purpose of debarment pursuant to Sections 16-101, et seq., of the State Finance and Procurement Article of the Annotated Code of Maryland; and

(2) The business is not a successor, assignee, subsidiary, or affiliate of a suspended or debarred business, except as follows (you must indicate the reasons why the affirmations cannot be given without qualification):

G. SUB-CONTRACT AFFIRMATION

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, has knowingly entered into a contract with a public body under which a person debarred or suspended under Title 16 of the State Finance and Procurement Article of the Annotated Code of Maryland will provide, directly or indirectly, supplies, services, architectural services, construction related services, leases of real property, or construction.

H. AFFIRMATION REGARDING COLLUSION

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business has:

(1) Agreed, conspired, connived, or colluded to produce a deceptive show of competition in the compilation of the accompanying bid or offer that is being submitted;

(2) In any manner, directly or indirectly, entered into any agreement of any kind to fix the bid price or price proposal of the bidder or offeror or of any competitor, or otherwise taken any action in restraint of free competitive bidding in connection with the contract for which the accompanying bid or offer is submitted.

I. FINANCIAL DISCLOSURE AFFIRMATION

I FURTHER AFFIRM THAT:

I am aware of, and the above business will comply with, the provisions of Section 13-221 of the State Finance and Procurement Article of the Annotated Code of Maryland, which require that every business that enters into contracts, leases, or other agreements with the State of Maryland or its agencies during a calendar year under which the business is to receive in the aggregate $100,000 or more shall, within 30 days of the time when the aggregate value of the contracts, leases, or other agreements reaches $100,000, file with the Secretary of State of Maryland certain specified information to include disclosure of beneficial ownership of the business.

J. POLITICAL CONTRIBUTION DISCLOSURE AFFIRMATION

I FURTHER AFFIRM THAT:

I am aware of, and the above business will comply with, Election Law Article, §§14-101—14-108, Annotated Code of Maryland, which requires that every person that enters into contracts, leases, or other agreements with the State of Maryland, including its agencies or a political subdivision of the State, during a calendar year in which the person receives in the aggregate $100,000 or more shall file with the State Board of Elections a statement disclosing contributions in excess of $500 made during the reporting period to a candidate for elective office in any primary or general election.

K. DRUG AND ALCOHOL FREE WORKPLACE

(Applicable to all contracts unless the contract is for a law enforcement agency and the agency head or the agency head's designee has determined that application of COMAR 21.11.08 and this certification would be inappropriate in connection with the law enforcement agency's undercover operations.)

I CERTIFY THAT:

(1) Terms defined in COMAR 21.11.08 shall have the same meanings when used in this certification.

(2) By submission of its bid or offer, the business, if other than an individual, certifies and agrees that, with respect to its employees to be employed under a contract resulting from this solicitation, the business shall:

(a) Maintain a workplace free of drug and alcohol abuse during the term of the contract;

(b) Publish a statement notifying its employees that the unlawful manufacture, distribution, dispensing, possession, or use of drugs, and the abuse of drugs or alcohol is prohibited in the business' workplace and specifying the actions that will be taken against employees for violation of these prohibitions;

(c) Prohibit its employees from working under the influence of drugs or alcohol;

(d) Not hire or assign to work on the contract anyone whom the business knows, or in the exercise of due diligence should know, currently abuses drugs or alcohol and is not actively engaged in a bona fide drug or alcohol abuse assistance or rehabilitation program;

(e) Promptly inform the appropriate law enforcement agency of every drug-related crime that occurs in its workplace if the business has observed the violation or otherwise has reliable information that a violation has occurred;

(f) Establish drug and alcohol abuse awareness programs to inform its employees about:

(i) The dangers of drug and alcohol abuse in the workplace;

(ii) The business' policy of maintaining a drug and alcohol free workplace;

(iii) Any available drug and alcohol counseling, rehabilitation, and employee assistance programs; and

(iv) The penalties that may be imposed upon employees who abuse drugs and alcohol in the workplace;

(g) Provide all employees engaged in the performance of the contract with a copy of the statement required by §K(2)(b), above;

(h) Notify its employees in the statement required by §K(2)(b), above, that as a condition of continued employment on the contract, the employee shall:

(i) Abide by the terms of the statement; and

(ii) Notify the employer of any criminal drug or alcohol abuse conviction for an offense occurring in the workplace not later than 5 days after a conviction;

(i) Notify the procurement officer within 10 days after receiving notice under §K(2)(h)(ii), above, or otherwise receiving actual notice of a conviction;

(j) Within 30 days after receiving notice under §K(2)(h)(ii), above, or otherwise receiving actual notice of a conviction, impose either of the following sanctions or remedial measures on any employee who is convicted of a drug or alcohol abuse offense occurring in the workplace:

(i) Take appropriate personnel action against an employee, up to and including termination; or

(ii) Require an employee to satisfactorily participate in a bona fide drug or alcohol abuse assistance or rehabilitation program; and

(k) Make a good faith effort to maintain a drug and alcohol free workplace through implementation of §K(2)(a)—(j), above.

(3) If the business is an individual, the individual shall certify and agree as set forth in §K(4), below, that the individual shall not engage in the unlawful manufacture, distribution, dispensing, possession, or use of drugs or the abuse of drugs or alcohol in the performance of the contract.

(4) I acknowledge and agree that:

(a) The award of the contract is conditional upon compliance with COMAR 21.11.08 and this certification;

(b) The violation of the provisions of COMAR 21.11.08 or this certification shall be cause to suspend payments under, or terminate the contract for default under COMAR 21.07.01.11 or 21.07.03.15, as applicable; and

(c) The violation of the provisions of COMAR 21.11.08 or this certification in connection with the contract may, in the exercise of the discretion of the Board of Public Works, result in suspension and debarment of the business under COMAR 21.08.03.

L. CERTIFICATION OF CORPORATION REGISTRATION AND TAX PAYMENT

I FURTHER AFFIRM THAT:

(1) The business named above is a (domestic \_\_\_) (foreign \_\_\_) corporation registered in accordance with the Corporations and Associations Article, Annotated Code of Maryland, and that it is in good standing and has filed all of its annual reports, together with filing fees, with the Maryland State Department of Assessments and Taxation, and that the name and address of its resident agent filed with the State Department of Assessments and Taxation is:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(If not applicable, so state).

(2) Except as validly contested, the business has paid, or has arranged for payment of, all taxes due the State of Maryland and has filed all required returns and reports with the Comptroller of the Treasury, the State Department of Assessments and Taxation, and the Department of Labor, Licensing, and Regulation, as applicable, and will have paid all withholding taxes due the State of Maryland prior to final settlement.

M. CONTINGENT FEES

I FURTHER AFFIRM THAT:

The business has not employed or retained any person, partnership, corporation, or other entity, other than a bona fide employee, bona fide agent, bona fide salesperson, or commercial selling agency working for the business, to solicit or secure the Contract, and that the business has not paid or agreed to pay any person, partnership, corporation, or other entity, other than a bona fide employee, bona fide agent, bona fide salesperson, or commercial selling agency, any fee or any other consideration contingent on the making of the Contract.

N. Repealed.

O. ACKNOWLEDGEMENT

I ACKNOWLEDGE THAT this Affidavit is to be furnished to the Procurement Officer and may be distributed to units of: (1) the State of Maryland; (2) counties or other subdivisions of the State of Maryland; (3) other states; and (4) the federal government. I further acknowledge that this Affidavit is subject to applicable laws of the United States and the State of Maryland, both criminal and civil, and that nothing in this Affidavit or any contract resulting from the submission of this bid or proposal shall be construed to supersede, amend, modify or waive, on behalf of the State of Maryland, or any unit of the State of Maryland having jurisdiction, the exercise of any statutory right or remedy conferred by the Constitution and the laws of Maryland with respect to any misrepresentation made or any violation of the obligations, terms and covenants undertaken by the above business with respect to (1) this Affidavit, (2) the contract, and (3) other Affidavits comprising part of the contract.

I DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Authorized Representative and Affiant)

12.0021 (Rev. 07/2010)

**KEY PERSONNEL FORMS RFP91166DM** Page 1 of 4

BIDDING FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.** **KEY PERSON'S NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** **POSITION TO BE ASSIGNED**: # of Personnel

for this Position:

□ Contract Manager 1

□ Lead Mechanic 1

□ Elevator Adjuster 1

**3.** **TECHNICAL TRAINING/EDUCATIONAL BACKGROUND**: \*\*

Association/ Apprenticeship/ Licenses/Seminars

Institution Degree - Major Date Earned

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4.** **EMPLOYMENT HISTORY**: (If a person has more than three employers in his/her employment history, please provide complete employment history via supplemental page(s) and attach to this form.)

4.1 CURRENT EMPLOYER'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.2 PRIOR EMPLOYER'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **KEY PERSONNEL FORMS** Page 2of 4

**RFP91166DM**

BIDDING FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERSON'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.3 PRIOR EMPLOYER'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.** **ACHIEVEMENTS/OTHER NOTATIONS (NOT REQUIRED)**:

**6.** **LEAD MECHANIC: PROVIDE CURRENT MAINTENANCE RESPONSBILITY WITH THE BIDDING FIRM:** Provide the number of elevators outside of the University contract for which the mechanic has current responsibility. If the number of currently responsible elevators is greater than 50, provide a detailed explanation how that number will be reduced to accommodate the University contract or how the firm will structure their service offering to still allow the required response to the University’s needs.

**KEY PERSONNEL FORMS** Page 3of 4

**RFP91166DM**

**7. SIMILAR CONTRACTS/PROJECTS EXPERIENCES/REFERENCES**: (COMPLETE THE ATTACHED CHART BELOW– KEY PERSONNEL FORMS for each of the submitted key people; that is, the Contract Manager, Lead Mechanic and Elevator Adjuster). Please note: A **minimum of three (3) contracts/projects** are to be listed **for each key person**.

**\*\* NOTE: If a Bidder finds the space provided is insufficient for any category, he can attach additional pages to this form as he finds appropriate and just indicate on this form to "See Attached Page".**

**KEY PERSONNEL FORMS** Page 4 of 4

**CONTRACTS/PROJECTS EXPERIENCES/REFERENCES ATTACHMENT**

**RFP91166DM**

**KEY** **PERSON'S NAME:**

PROPOSER: PROJECT OWNER’S NAME:

PROJECT NAME: ADDRESS:

START DATE: **\*\***CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPLETION DATE: **\*\***TELEPHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTRACT AMT: $ PROPOSER’S CONTRACT MANAGER:

CONTRACT METHOD: \_\_\_\_ T&M \_\_\_\_ LUMP SUM/FP PROPOSER’S LEAD MECHANIC:

\_\_\_\_ OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­ PROPOSER’S ELEVATOR ADJUSTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SETTINGS: \_\_\_\_\_ OCCUPIED, \_\_\_\_\_URBAN ENVIRONMENT, \_\_\_\_\_ HIGHER EDUCATION

WORK INCLUDED: (check all that apply)

Operation \_\_\_\_\_ repairs \_\_\_\_\_ adjustments \_\_\_\_\_\_ emergency service \_\_\_\_\_\_\_ elevator controls

\_\_\_\_\_ preventive maintenance \_\_\_\_\_ testing services \_\_\_\_\_ inspection services \_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief, but detailed, description of the contract/project inclusive of type of contract/project and Contract/Project Schedule.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**\*\* NOTE: Be sure that the Contact Person and Telephone # are accurate as the University will be contacting them for a reference**.

**ELEVATOR MAINTENANCE PROPOSER’S EXPERIENCE FORM**

**#RFP91166DM**

**A. Elevator Maintenance Contracts/Projects**

PROPOSER: PROJECT OWNER’S NAME:

PROJECT NAME: ADDRESS:

START DATE: CONTACT PERSON:

COMPLETION DATE: TELEPHONE NUMBER:

CONTRACT AMT: $ PROPOSER’S Contract Manager:

CONTRACT METHOD: LUMP SUM/FP COST PLUS PROPOSER’S LEAD MECHANIC:

\_\_\_\_ T&M \_\_\_\_ MAINTENANCE ­ \_\_\_\_\_ OTHER PROPOSER’S ELEVATOR ADJUSTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SETTINGS: \_\_\_\_\_ FULLY OCCUPIED, \_\_\_\_\_UNOCCUPIED, \_\_\_\_\_URBAN ENVIRONMENT, \_\_\_\_\_ HIGHER EDUCATION

ELEVATORS: \_\_\_\_\_ NUMBER OF HYDRAULIC, \_\_\_\_\_ NUMBER OF ELECTRIC/TRACTION

ELEVATOR WORK INCLUDED: (check all that apply)

operation \_\_\_\_\_ repair \_\_\_\_\_ adjustments \_\_\_\_\_\_ emergency service

\_\_\_\_\_\_\_ elevator controls \_\_\_\_\_ preventive maintenance \_\_\_\_\_ testing services \_\_\_\_\_ inspection services

\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ELEVATOR TYPES:

US Elevator Dover \_\_\_\_\_\_ OTIS \_\_\_\_\_\_ ThyssenKrupp \_\_\_\_\_\_ Hollister Whitney

KONE/Montgomery General \_\_\_\_\_\_ Bedeo \_\_\_\_\_\_ Gillespie \_\_\_\_\_\_ Delaware

|  |  |
| --- | --- |
| Brief, but detailed, description of the project inclusive of (1) type of project, (2) Setting and (3) Project Schedule. | Similarities of your project to the Elevator Maintenance Work: |
|  |  |
|  |  |
|  |  |
|  |  |

**SPECIFIC BACKGROUND** **FORM**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Please be sure to provide a brief but informative summary of your firm’s ability to perform Elevator Maintenance Contracts/Projects. Please address the following points:

Please be sure to include a brief, but **informative**, history of your firm **including** your firm's background on performing Elevator Maintenance type work and the various types of Elevator Maintenance Contracts/Projects.

Total number of elevators under service agreements throughout the United States. Provide Separate totals of hydraulic elevators and traction elevators.

Total number of elevators under service agreements in the Baltimore area. Provide separate totals of hydraulic elevators and traction elevators.

How your overall firm is organized to perform Elevator Maintenance Contracts/Projects.

**FIRM EQUIPMENT EXPERIENCE**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Elevator contractor shall submit documentation defining its experience with providing maintenance on equipment that is similar to the installed equipment at the UMB Campus. Proposal should include emphasis on similar make and models, refer to Attachment F. Number of units under maintenance that are of the same type of equipment as listed below:

a) Virginia Controls

b) ThyssenKrupp

c) Otis

d) Dover

e) Hollister Whitney

f) KONE/Montgomery

**LOCAL CAPABILTIES**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Elevator Contractor shall submit local staffing information. Include an organizational chart as well as the following information:

a) Total field employees in Baltimore Metropolitan Area

b) Maintenance Field employees in the Baltimore Metropolitan Area

c) Management Staff

d) Administration employees

e) Engineering employees

f) Organization chart

Contractor shall also submit information regarding offices and warehouse facilities located in the Baltimore Metropolitan Area. Include the following information for each facility:

a) Address

b) Function – i.e. office, warehouse, shop, etc.

c) Total square footage of facility

d) Owned or leased. If leased, include lease expiration date.

e) Total number of employees at this facility

**ENGINEERING CAPBILITY**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Elevator Contractor shall submit documentation defining its engineering capabilities. Proposal should include information documenting experience in their technical centers dedicated to maintenance and repair of elevator equipment not manufactured by the Elevator Contractor. Include the following items:

a) Engineering facilities in USA

b) Registered engineers on staff

c) Specific engineering projects applicable to existing elevators associated with maintenance, component replacement or repairs in a public facility similar to a University environment. List a minimum of three (3) jobs.

**SPARE PARTS SUPPLY AND NETWORK**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Elevator Contractor shall submit documentation defining its spare parts supply and network of obtaining and providing for OEM parts and supplies, drawings, manuals, etc. Proposal should include emphasis on elevator parts and technical support. Include the following information:

a) Suppliers for elevator parts for the following equipment:

1. Virginia Controls

2. ThysenKrupp

3. Otis

4. Dover

5. Hollister Whitney

6. KONE/Montgomery

b) Suppliers for elevator circuit board repair

c) Test tools or software for computer interface with elevators and controllers

**REPORTING AND MONITORING SERVICES**

**RFP91166DM**

**ELEVATOR MAINTENANCE**

Elevator Contractor shall submit documentation defining its proposed capabilities and systems used to monitor and report the execution of the proposed maintenance contract.

a) Elevator Contractor may have an on-line maintenance reporting capability for full access by UMB.

b) Provide overview of system and give a brief description of available reports

c) If Elevator Contractor does not have the capability for an on-line maintenance reporting, provide information listing documentation available to document services performed

**COMPANY PROFILE**

**ELEVATOR MAINTENANCE**

**RFP91166DM**

BIDDING FIRMS COMPANY NAME:

(Local branch which will service UMB contract)

ADDRESS OF COMPANY:

(Local branch which will service UMB contract)

DATE OF INCORPORATION: STATE OF INCORPORATION:

PARENT COMPANY INFORMATION (IF APPLICABLE):

DATE OF INCORPORATION: STATE OF INCORPORATION:

TYPE OF ORGANIZATION (I.E., CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE):

NUMBER OF YEARS IN BUSINESS UNDER PRESENT NAME:

# OF YEARS IN BUSINESS: # OF YEARS IN BUSINESS\_\_\_\_\_\_\_\_\_\_\_\_\_

(PARENT OFFICE) (BRANCH OFFICE)

OTHER OR FORMER NAMES UNDER WHICH YOUR ORGANIZATION HAS OPERATED:

TYPE OF WORK PERFORMED (*CHECK ALL THAT ARE APPLICABLE*):

 Repair,  Adjustments,  Emergency Service,  Preventive Maintenance,

 Testing Services,  Inspection Services,

 OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF SERVICES WHICH WILL BE PROVIDED BY LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB:

TYPE OF SERVICES WHICH WILL BE PROVIDED BY PARENT COMPANY (IF APPLICABLE) TO UMB:

TYPE OF SUPPORT SERVICES PROVIDED BY PARENT OFFICE TO THE LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB:

**NOTE:** ATTACH ORGANIZATIONAL CHART OF BOTH THE PARENT COMPANY (IF APPLICABLE) AND THE LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB.

NAME OF PRINCIPAL(S) AND TITLE(S) AT THE BRANCH OFFICE WHICH WILL SERVICE UMB:

NAME OF PRINCIPAL(S) AND TITLE(S):

BRIEF HISTORY OF COMPANY: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
|  | TOTAL COMPANY | LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB | EMPLOYEES IN THE BALTIMORE METROPOLITAN AREA |
| Number of Managers |  |  |  |
| Number of Supervisors |  |  |  |
| Number of Mechanics |  |  |  |
| Number of Modernization/Construction Field Staff |  |  |  |
| Number of Maintenance Field employees |  |  |  |
| Number of Engineering employees |  |  |  |
| Number of Office/Administrative Personnel |  |  |  |
| **TOTAL NUMBER OF EMPLOYEES:** |  |  |  |

**BID SECURITY:**

**BONDING COMPANY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BONDING CAPACITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTE: If a Bidder finds the space provided is insufficient, he can attach additional pages to this form as he finds appropriate and just indicate on this form to "See Attached Page(s)".**

**ANNUAL SALES VOLUME/NUMBER OF PROJECTS**

**ELEVATOR MAINTENANCE**

**RFP91166DM**

BIDDER'S FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**YEAR SALES VOLUME $ # OF PROJECTS LARGEST**

**COMPLETED PROJECT SIZE**

2022 $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

2023 $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

2024 $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

The above figures should be for the **local** company, which will service the University.

**STATEMENT OF APPROACH FORM**

**ELEVATOR MAINTENANCE**

**RFP91166DM**

In response to the BID, Bidders are to provide their statement of approach as to **how** the Contractor will be provided Elevator Maintenance as specified in this bid document. The information to be provided under this category is to include, but not limited to the following:

a. A description of **how** your firm will respond quickly to the University for the operation, repair, adjustments, emergency service, preventative maintenance, testing and inspection services work under this contract, from the initial call/request through the completion of the project;

b. A discussion of your Key Personnel approach to coordinating all work including how your firm plans to provide project management of the task orders in order to minimize disruption to the University, students, staff and faculty when providing services under this Elevator Maintenance Contract; and,

c. Particular challenges which these Projects present and how the Bidder would address these challenges.

**RFP NO.**: 91166DM

**FOR**: **ELEVATOR MAINTENANCE**

**TECHNICAL PROPOSAL DUE DATE**: Thursday, February 6, 2025, on or before 2:00pm

**NAME OF PROPOSER**:

**ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA**

The undersigned, hereby acknowledges the receipt of the following addenda:

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_