



## **Town of Bolton Conservation Department**

### **Request for Proposals**

#### **Phase II Inspection Services and 90-day Follow-up Inspections of Fyfeshire Dam**

The Town of Bolton, acting through its Conservation Department, invites qualified parties to submit a proposal to provide professional engineering services to complete a Phase II Inspection of the Fyfeshire Dam and routine 90 day follow-up inspections pursuant to a Office of Dam Safety Order (March 13, 2009). Terms and conditions and the Request for Proposals are available at the Town Hall, 663 Main Street, Bolton, MA 01740, Monday through Thursday from 9:00 a.m. until 2:30 p.m. Sealed proposals are due at this address no later than one o'clock p.m., Thursday, April 23, 2009. The Bolton Board of Selectmen will award the contract. The Board reserves its right to refuse any and all proposals. For further information contact the Conservation Administrator, Carol A. Gumbart, at the above address, telephone 978-779-3304.

### **REQUEST FOR PROPOSALS**

#### **PHASE II INSPECTION SERVICES & 90 DAY FOLLOW-UP INSPECTIONS**

Closing Time: 1:00 P.M.  
Closing Date: THURSDAY, APRIL 23, 2009

This Request for Proposal Package includes:

- I. INTRODUCTION**
- II. DAM BACKGROUND – PHASE I INSPECTION**
- III. SCOPE OF SERVICES**
- IV. FORMAT FOR RESPONSE**
- V. SUBMISSION OF RESPONSES**
- VI. CONSULTANTS RESPONSIBILITIES**
- VII. SELECTION PROCESS**

## **I. INTRODUCTION:**

The Town of Bolton has been ordered by the Department of Conservation and Recreation, Office of Dam Safety to have a Phase II Inspection and routine 90 day follow-up inspections performed on the Fyfeshire Dam.

The Town is accepting proposals from qualified individuals and firms to provide proposals that meet the Office of Dam Safety inspection requirements. See appendix A.

The Town of Bolton grants access to any firm interested in viewing the dam via a public trail located on Wattaquadock Hill Road.

The Town of Bolton is solely responsible for obtaining any and all temporary easements.

Individuals and firms are invited to submit a response if they are:

- Experienced in performing Phase II inspections and routine follow-up inspections on dams
- Familiar with current Massachusetts Dam Safety Law
- Familiar with applicable local, state, and federal wetland laws
- Familiar with the Massachusetts Natural Heritage and Endangered Species Program and applicable regulations for work in an Estimated Habitat Area
- Familiar with Massachusetts Historical Commission and preservation laws
- Possess all applicable certifications and licenses
- Available to complete the Phase II Inspection in a five (5) month time period

## **II DAM BACKGROUND – PHASE I INSPECTION:**

See Appendix B

### **III. SCOPE OF SERVICES:**

The engineering consultant (herein after the “Consultant”), will be responsible for administrative and technical work associated with the Phase II Inspection and routine 90 day follow-up inspections including:

#### **Phase II Inspection -**

- Review of Existing Information
- Subsurface Investigations
- Topographic Survey
- Wetlands flagging and delineation
- Stability Analysis
- Hydrologic/Hydraulic Analysis
- Alternatives Analysis and presentation of conceptual designs and associated estimated design
- Permitting and construction costs to bring the dam structure into compliance with Dam Safety Laws and regulations
- Final Report
- Maintain good public relations while in the field

The consultant shall obtain all applicable permits, and licenses to conduct work or activity on the site to complete the Phase II Inspection.

#### **Follow-up Inspections**

- Quarterly Inspections with the reports being submitted to the Office of Dam Safety on or before September 1, 2009, January 1, 2010, April 1, 2010 and July 1, 2010.

#### **IV. FORMAT FOR RESPONSE**

All proposals submitted to this request should include, where specified, the following headings to assist evaluation. Statements should be clear and to the point.

- A. Completed Qualification Cover Sheet;
- B. Schedule
- C. Point of Contact: identification of key person who shall coordinate communication and meeting attendance;
- D. Qualifications: summary of qualifications and firm history;
- E. Personnel: list personnel assigned to project and attach resume summaries of each;
- F. Experience: list and describe at least three (3) comparable projects completed in the past five (5) years, including contact person, address, and telephone number of each client;
- G. Comments/exceptions; include any additional desired comments from the firm, also identify exceptions to any specific or general conditions within this RFP;
- H. References
- I. Separate Cost Response shall be submitted detailing:
  - Price for Phase II Inspection
  - Price for 90 day Follow-up Inspections
  - Response must comply with bid form

## **V. SUBMISSION OF RESPONSES**

### **A. Deadline**

All responses submitted pursuant to this Request for Proposals must be delivered to:

Bolton Town Hall  
Attn Linda Day, Town Secretary  
Town Hall  
663 Main Street  
Bolton, MA 01740

Deadline for submittal is by one o'clock p.m., April 23, 2009. Responses received after that time will not be considered and will be returned, unopened, to sender. All responses shall be submitted in two (2) envelopes, one marked "Dam Inspection Services" and the other marked "Price Considerations". Responses will be publicly opened at one o'clock p.m., April 23, 2009, in the Board of Selectmen's Chamber, Town Hall. The Town reserves the right to reject any or all proposals.

### **B. Specific Submittal Requirements**

1. The following are required for all submitted responses:
  - a. One response clearly marked "Dam Inspection Services" shall be submitted, accompanied by six (6) copies; and
  - b. One response clearly marked "PRICE CONSIDERATIONS" shall be submitted.
2. ALL information requested of Consultant by the RFP shall be provided. Failure to do so may disqualify Consultant's response.
3. An authorized representative of the firm shall sign responses. Signature on Master Copies of Qualifications and Cost Responses shall be originals.
4. Responses may be submitted in person, by U.S. Mail, special delivery, or courier service. Regardless, if delivery is beyond due time, the response will be rejected. No telephone, telegraphic, email or facsimile responses will be accepted. Bolton Town Hall is open Monday through Thursday 9:00 a.m. to 2:30 p.m.

A responder who wishes to withdraw a proposal must make the request in writing with the qualified signature. Any correction or modification to a proposal must also be submitted in writing (sealed) with the qualified signature.

## **VII. SELECTION PROCESS**

The Town of Bolton intends to award this agreement based on the Consultant's overall qualifications; firm's proven ability to provide comprehensive consulting services; and response which, in the Town's opinion, appears to be most advantageous for the Town.

A designated committee following the closing date will evaluate responses. Interviews may be scheduled with selected firms at a time to be determined after evaluation of responses. Any firm not meeting the minimum criteria will not be called in for an interview. The Town of Bolton reserves the right to limit the number of firms interviewed. The committee shall recommend a firm to the Board of Selectmen.

### **A. Evaluation Criteria**

#### **(i) Minimum Criteria**

1. Firm's response was received by 1:00 p.m., APRIL 23, 2009
2. Firm submitted all specific submittal requirements
3. Project manager identified

#### **(ii) Comparative Criteria**

1. Firm's demonstrated success in handling projects similar in size and complexity;

Advantageous	Multiple similar projects
Not Advantageous	Similar projects
Unacceptable	No previous experience
2. Knowledge and experience working with the Office of Dam Safety (ODS);

Advantageous	Experience with ODS projects
Not Advantageous	Familiarity with regulations governing Dam Safety but no direct experience
Unacceptable	Not familiar with ODS and regulations
3. Familiarity and experience working with Wetlands Protection laws and regulations;

Advantageous	Has experience and demonstrates familiarity with wetland laws and regulations
Not Advantageous	Demonstrates familiarity with wetland laws and regulations
Unacceptable	Not familiar with wetland laws and regulations
4. Familiarity and experience working with MA Natural Heritage and Endangered Species Program (NHESP);

Advantageous	Has experience and demonstrates familiarity with MA NHESP
Not Advantageous	Demonstrates familiarity with MA NHESP
Unacceptable	Not familiar with MA NHESP

5. Familiarity and experience working with MA Historical Commission and preservation laws;
 

Advantageous	Has experience and demonstrates familiarity with MA Historical Commission and preservation laws
Not Advantageous	Demonstrates familiarity with MA Historical Commission and preservation laws
Unacceptable	Not familiar with MA Historical Commission and preservation laws
  
6. Firm's demonstrated success in completing similar projects on an aggressive time schedule;
 

Advantageous	Has experience and demonstrates management of fast-tracked projects.
Not Advantageous	Experience with one such project.
Unacceptable	Not experienced with fast tracked projects.
  
7. Firm's ability to perform tasks without subcontracting work;
 

Advantageous	Can perform work 75% or more of the work without subcontracting out work.
Not Advantageous	Can perform work 50% to 75% of the work without subcontracting out work.
Unacceptable	Can perform less than 50% of the work without subcontracting out work.

Respondents that meet all minimum criteria will be rated according to the Comparative Criteria above. Price submissions will be ranked separately (the lowest price being the most competitive) and following the evaluation of all eligible respondents by the comparative criteria, the price submissions will be brought to the attention of the committee. A final decision will be determined as to the most beneficial respondent for the project and Town based upon both the comparative criteria and the price ranking.

## 1) **INSURANCE**

The consultant shall, at its own expense, provide and maintain throughout the agreement period, occurrence based insurance as follows:

- (a) Professional Liability Insurance for errors, omissions or negligent acts arising out of the performance of the agreement in the amount of \$1,000,000.
- (b) Worker's Compensation Insurance, including Employer's Liability Insurance in accordance with the laws of the state(s) in which the Consultant may be required to pay compensation.

Prior to commencing work under an agreement and thereafter when requested by the Town, the Consultant shall provide the Owner with a certificate of insurance indicating the Consultant possesses insurance in the types and amounts indicated. The Consultant shall require its subcontractors, if any, to obtain the same insurance and shall furnish the Owner with proof of such insurance on request.

The Consultant shall require its insurer to notify in writing the Certificate Holder of any cancellation or reduction in coverage no less than thirty (30) days prior to such cancellation or reduction. The Certificate Holder shall read exactly as follows: Town of Bolton, 663 Main Street – Town Hall, Bolton, MA 01740.



## **APPENDIX A**

### **RESPONSE COVER SHEET**

(Respondent may retype this form if desired)

Respondent: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Firms Responding: \_\_\_\_\_

Name(s) & Address(s): \_\_\_\_\_

Response received by Town Secretary

Time: \_\_\_\_\_ Date: \_\_\_\_\_

## **APPENDIX B**

### **CERTIFICATIONS**

The undersigned certifies that the Respondent has not given, offered, or agreed to give any gift, contribution, or offer of employment as an inducement for, or in connection with, the award of the contract for the consulting services.

The undersigned declares that no person in the employ of the Town is pecuniary interested in this proposal or in the contract for the work proposed to be done.

The undersigned certifies that no consultant to, or subcontractor for, the Respondent has given, offered, or agreed to give any gift, contribution, or offer of employment tot he Respondent, or any other person, corporation, or entity as an inducement for, or in connection with, the award to the consultant or subcontractor of the contract for consulting services.

The names and residences of all persons and parties, as principals, interested in the proposal are as follows:

(Give first and last names in full, in the instance of a corporation, give president's treasurer's, and clerk's names; and, in the instance of a partnership, give all partners' names and addresses. Attach additional pages as needed.)

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## SIGNATURES

Note: If Respondent is a corporation, indicate State of corporation under signature and affix corporate seal; or, if a partnership, give full names and residential addresses, if different from business address. If contract-award Respondent is a corporation, an affidavit giving the principal the authority to sign contract must accompany executed contract.

If an INDIVIDUAL: Date: \_\_\_\_\_

Bidder Signature: \_\_\_\_\_  
(owner/proprietor)

Business Name (d/b/a): \_\_\_\_\_

Business Address: \_\_\_\_\_

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If a PARTNERSHIP: Date: \_\_\_\_\_

Bidder Signature: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

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Names and Addresses of ALL Partners: (attach additional pages if needed)

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If an CORPORATION: Date: \_\_\_\_\_

Bidder Signature: \_\_\_\_\_  
(President or \*authorized agent)

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

\*Statement of authorization, duly signed by proper authority, to be attached to this document.)

## **CERTIFICATE OF NON-COLLUSION**

The undersigned certifies, under penalties of perjury, that this Bid and Proposal have been made and submitted in good faith and without collusion, or fraud, with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, other organization, entity, or group of individuals.

Signature: \_\_\_\_\_

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

Name of Business: \_\_\_\_\_

## **STATEMENT OF TAX COMPLIANCE**

Pursuant to Massachusetts General Laws, Chapter 62C, Section 49A, as inserted by the Acts of 1983, Section 36:

I, \_\_\_\_\_, authorize signatory for

\_\_\_\_\_, whose principal place of

business is at \_\_\_\_\_,

have complied with all laws of the Commonwealth of Massachusetts relating to taxes.

Signature: \_\_\_\_\_

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

## **COMMONWEALTH OF MASSACHUSETTS**

Worcester, ss

Then appeared before me the above-named \_\_\_\_\_,  
proved to me through satisfactory evidence which  
was/were \_\_\_\_\_

And having been duly sworn, stated that the foregoing statements were true and correct.

\_\_\_\_\_  
(Notary Public) My commission expires: \_\_\_\_\_

## BID FORM

Name of Company: \_\_\_\_\_

Name of Principal: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Company Information:

Number of Employees: \_\_\_\_\_ Years in Business: \_\_\_\_\_

☐ Corporation; where incorporated: \_\_\_\_\_ ☐ Sole Proprietorship ☐ Partnership

Federal Employer I.D. # or Social Security #: \_\_\_\_\_ ☐ DBA

\_\_\_\_\_

Minority Owned Business: Yes ☐ No ☐ Woman Owned Business: Yes ☐ No ☐

Are you certified as a Registered Professional Engineer in Massachusetts? Yes ☐ No ☐

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**PLEASE ATTACH YOUR CURRENT CERTIFICATION FORM(s)**

List three (3) references from projects that you have completed within the past year (name, address/association, and telephone number):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List two (2) references from municipalities that you have worked with within the past year on dam safety projects (name of town, contact name, address/department, and telephone number, describe the height of the dam and the size of the impoundment):

1. \_\_\_\_\_
2. \_\_\_\_\_

**Cost of Services (delivered in separate envelope):**

1. Phase II Inspection \_\_\_\_\_
2. 90 Day Follow-up Inspections \_\_\_\_\_

Please attach a separate sheet if you want to list prices for items that we did not ask for but you think may be relevant.

I certify that all the information in this statement is true and complete to the best of my knowledge and belief.

Name of Individual Filing Proposal:

\_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_