



CITY OF
SANDERSVILLE

Request for Proposals

RFP # 2024-08

Lead & Copper Rule Compliance Services

Due Date: Tuesday, May 14, 2024 at 3:00 PM

**CITY OF SANDERSVILLE
REQUEST FOR PROPOSALS
LEAD & COPPER RULE COMPLIANCE SERVICES**

Description and Nature of Project

The City of Sandersville (City) has been awarded a grant from the Georgia Environmental Finance Authority (GEFA) to implement the requirements of the U.S. EPA's Lead & Copper Rule. The City of Sandersville is seeking a qualified consultant to provide compliance and implementation services to assist in this effort. The successful candidate will assist the City in the development of a Service Line Inventory (SLI) with field investigations, Service Line Replacement Plan (SLRP), tap sampling, and educational outreach programs and replacements to comply with the updated law. The City of Sandersville reserves the right to accept or reject any and all bids and act in the best interest of the City of Sandersville.

Scope of Work

The City of Sandersville is soliciting a firm to work closely with City Staff and assist in providing implementation services related to the EPA's Lead and Copper. The City has a population of 5,654 and approximately 2,753 water services. The requirements of the City and the Lead and Copper Rule Revision are:

- Service Line Material Inventory and submission to EPD
- Service Line Verification
- Service Line Replacement Plan, including development of EPA required Standard Operating Procedures
- Tap Sampling Plan Update
- Additional Tap Sampling Program
- Point of Use Device Program
- Public Outreach, Education and Notification Program

In addition to these requirements, the successful candidate will provide the following:

- Staff training
- Public presentation of inventory results
- Web-based map and informational dashboard that can be made available to the public through the City's website

All inventory and replacement plan data shall become the property of the City of Sandersville at the completion of the project. If software is used to complete the inventory by the contractor, please include that as a lump sum line item under data management.

Project Timeline

The Service Line Inventory must be completed and submitted to the Georgia Environmental Protection Division no later than October 16, 2024. The Service Line Replacement Plan and

other compliance components will be due by the date prescribed by the U.S. EPA in the Lead and Copper Rule Improvements, expected in late 2027.

Proposal

Interested companies are required to submit their sealed proposals containing the following information:

1. **Company Introduction:** Briefly introduce your company, its history, and relevant experience in providing similar compliance assistance services.
2. **Technical Approach:** Describe your approach to completing the Lead Service Line Inventory (LSLI), including field investigation services, and Service Line Replacement Plan (SLRP) within the specified timeframe.
3. **Experience and Qualifications:** Highlight your team's expertise and qualifications in working on projects related to drinking water compliance and lead/copper mitigation.
4. **Implementation Plan:** Provide a detailed plan outlining how you will meet the requirements of the LCRR, including tap sampling, public education, customer notification, and point-of-use device distribution.
5. **Project Timeline:** Present a comprehensive timeline with clear milestones and deliverables for the entire project duration.
6. **Price Proposal and Project Budget:** Submit a detailed price proposal and budget breakdown for the entire project, including all associated costs and fees. Provide a per-service cost for field investigations. Please include a final overall price at the bottom assuming number of services are accurate in beginning of RFP. This price must include all field investigations and sub contracted work needed to complete this job for the municipality.
7. **References:** Provide at least three references from past clients or projects related to water quality compliance.

SPECIFIC CONDITIONS

CHANGES AND EXTRAS

The Owner may at any time by written order, and without notice to the sureties, make changes within the general scope of this contract. If any change causes an increase or decrease in the cost or time required for the performance of this contract, then an equitable adjustment shall be made in the contract price. Such cost may be adjusted in writing only, and must be signed by both Contractor and Owner. Likewise, any claim for extra charges by the Contractor must be agreed upon in writing by the Owner prior to beginning such work.

INDEMNIFICATION AND INSURANCE

The Contractor agrees that he shall and will indemnify, hold harmless and defend the Owner, his agents, servants and employees from and against any and all losses, damages (by judgment or settlement), charges and expenses (including reasonable attorney's fees) which they or any one or more of them may incur or sustain by reason of any claims or causes of action for personal

injury or injuries, including death, to any person or persons whatsoever (including the officers, agents, servants or employees of the Contractor or of any subcontractor) including but not limited to such claims or causes of action arising out of, or in any way connected with, or occasioned by the work performed by the Contractor or subcontractors, their respective agents, servants or employees under or pursuant to this contract.

Without limiting his liability under this contract, the Contractor shall procure and maintain at his own expense during the life of this contract insurance of the types and in the minimum amounts stated below:

1. Workmen's Compensation Insurance in full compliance with the Workmen's Compensation laws of the State of Georgia.
2. Comprehensive General Liability

Bodily injury, including death	\$1,000,000 per person \$1,000,000 each occurrence
Property Damage	\$1,000,000 each occurrence \$2,000,000 aggregate
3. Comprehensive Automobile Liability

Bodily injury, including death	\$1,000,000 per person \$1,000,000 each occurrence
Property Damage	\$1,000,000 each occurrence

Said insurance shall be written by a company or companies licensed to do business in the State of Georgia and satisfactory to the Owner. Before commencing any work hereunder, certificates evidencing the maintenance of such insurance shall be furnished to the Owner and shall contain the following statement:

Insurance evidenced by this certificate will not be canceled or altered except 10 days after receipt by the City of Sandersville, Georgia of written notice thereof.

Contractors shall not subcontract the performance of any part of the work without requiring the subcontractor to procure and maintain insurance in the forms and amounts approved by the Owner, and likewise said subcontractors shall pay wages specified by the Georgia Department of Labor.

Insurance and Documentation

Interested companies are required to submit the following documents along with proposals:

1. **W-9 Form** – Please complete attached form, check appropriate box, fill in Social Security Number or Employer Identification Number, Sign and Date.
2. **Notarized E-Verify Contractor Affidavit** – Please complete attached form. (To enroll in E-Verify, you may visit the website www.uscis.gov/everify.)
3. **Notarized SAVE Affidavit** – Please complete attached form.

4. **Occupational Tax Certificate**
5. **General Public Liability and Property Damage Insurance Certificate** with a limit of liability of not less than \$1,000,000.
6. **Worker’s Compensation Proof of Insurance** – For more than three employees

Submission Details:

Please submit your sealed proposals in physical format to the address below no later than **May 14, 2024 by 3:00pm**. The proposal envelope shall be clearly labeled “**Lead & Copper Rule Compliance Assistance Proposal**”.

City of Sandersville
 Attn: Travis Fort, Purchasing Agent
 Lead & Copper Rule Compliance Assistance Proposal
 P.O. Box 71
 141 W. Haynes Street
 Sandersville, GA 31082

Other Information:

Disadvantaged Business Enterprises (DBE), including Minority and Women Owned Businesses (MBE and WBE), are encouraged to submit a proposal.

Example Bid Proposal

EPD Lead and Copper Inventory					
1005	1	LS	Contracted Services - Field Investigation	\$	\$
1010	1	LS	Inventory completion and submission to EPD	\$	\$
1015		EA	Price Per service including all appurtenances associated with completing the inventory	\$	\$
1020	1	LS	Contingency	\$	\$
Total Construction					\$

Scoring Criteria

1. Price Competitiveness _____ 1-5
2. Completeness of RFP _____ 1-5
3. Ability to provide services for this job _____ 1-5
4. Staff and subs capable of completing job _____ 1-5

_____ Total Score

Questions:

Questions will be answered until **4:30pm on Tuesday, May 7, 2024** by addendum posted on our website www.sandersvillega.org under the City Online, Bid Opportunities tabs. Questions must be directed in writing to:

City of Sandersville
Attn: Travis Fort, Purchasing Agent
P.O. Box 71
141 W. Haynes Street
Sandersville, GA 31082
tfort@sandersvillega.org

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of the City of Sandersville has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project

City of Sandersville

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 20__ in _____(city), _____(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 20__.

NOTARY PUBLIC

My Commission Expires:

O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a(n) _____
[*type of public benefit*], as referenced in O.C.G.A. § 50-36-1, from the City of
Sandersville, the undersigned applicant verifies one of the following with respect to my
application for a public benefit:

- 1) _____ I am a United States citizen.
- 2) _____ I am a legal permanent resident of the United States.
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and
Nationality Act with an alien number issued by the Department of
Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other
federal immigration agency is: _____.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older
and has provided at least one secure and verifiable document, as required by O.C.G.A.
§ 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:
_____.

In making the above representation under oath, I understand that any person who
knowingly and willfully makes a false, fictitious, or fraudulent statement or
representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and
face criminal penalties as allowed by such criminal statute.

Executed in _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
___ DAY OF _____, 20___

NOTARY PUBLIC
My Commission Expires:

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____
 C Corporation
 S Corporation
 Partnership
 Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type
See Specific Instructions on page 2.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number												
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.