

**RUTHERFORD COUNTY
NORTH CAROLINA
REQUEST FOR QUALIFICATIONS**

Addendum 1 – April 9, 2019 – Change Dates of Mandatory Site Visit and Final Questions

ISSUE DATE: **March 29, 2019**

RFQ#: 2019-CDLFEXP

TITLE: **Engineering Services – C&D Landfill Lateral Expansion Permitting and Design**

ISSUING DEPARTMENT: **Rutherford County, Solid Waste Department
Attn: James Kilgo
Director, Solid Waste
656 Laurel Hill Drive
Rutherfordton, NC 28139**

Sealed qualifications will be received until **4:00 p.m. Friday May 03, 2019** from qualified firms for
Engineering Services – C&D Landfill Lateral Expansion Permitting and Design.

A Mandatory Pre-Site Visit will be held at ** 10:00 am Wednesday April 24, 2019 **** at the Rutherford County Landfill, 656 Laurel Hill Drive, Rutherfordton, NC 28139.**

All inquiries for information concerning the Request for Qualifications shall be directed to:
**David Odom, P.E.
Odom Engineering, PLLC
169 Oak Street
Forest City, NC 28043
(828) 247-4495
davidodom@odomengineering.com**

Sealed qualifications shall be mailed, or hand delivered to Odom Engineering, PLLC, at the address shown above and the envelope shall bear the name and number of this Request for Qualifications. It is the sole responsibility of the Firm to ensure that its response reaches Odom Engineering, PLLC by the designated date and hour indicated above.

In compliance with the Request for Qualifications and to all the terms and conditions imposed herein, the undersigned offers and agrees to furnish the services and install the goods described in accordance with the attached signed response.

Firm Name: _____

Date: _____

Address: _____

Phone: _____

By: _____
(typed)

By: _____
(signed)

TABLE OF CONTENTS

PROJECT DESCRIPTION	Page 3
NON-COLLUSION AFFIDAVIT	Page 5
E-VERIFY AFFIDAVIT	Page 6
W-9 FORM	Page 7

PROJECT DESCRIPTION

Project Overview (Background)

Rutherford County is soliciting Statements of Qualifications from engineering firms to provide comprehensive planning, management and design services for its Solid Waste Management Services. The County owns and manages an active Construction and Demolition Landfill in Rutherfordton, NC, currently operating under Solid Waste Permit Numbers 8103-CDLF-2002 and 8105-MSWLF. The C&D Landfill has an estimated remaining capacity of 55,000 cubic yards. The County seeks a firm that can provide all necessary planning, design, permitting and certification for a phased lateral expansion of the existing C&D landfill.

Files can be obtained at North Carolina Department of Environmental Quality (NCDEQ), <https://deq.nc.gov/about/divisions/waste-management/waste-management-rules-data/e-documents>.

Services Requested

The scope of services for the successful firm includes, but is not limited to the following:

- Prepare Site Subtality Submittal for the C&D expansion including, but not limited to, Siting Study, Hydrological Report, Wetlands Delineation, and Facility Plan for entire site with proposed phasing.
- Prepare Detailed Engineering Design Submittal and Permit to Construct documents, including, but not limited to, Engineering Design Calculations, Engineering/Construction Drawings, Operations Plan, Closure/Post Closure Care, Financial Assurance and Monitoring Plans. Additional services including, but not limited to, Regulatory & Client meetings, Permitting Fees, and ESCP for General Construction Storm Water Permit.
- Quality assurance / quality control oversight for initial cell construction (10-year minimum capacity) including access roads and sedimentation basin. Services including, but not limited to, Bid Support and Construction Administration, CQA and Field Laboratory Testing Services during Construction, and Engineering Certification Report for Permit to Operate.

Procedural Requirements

All proposals must provide the following information for review:

Please label each section and place in your bound response in the order below.

1. **Firm Location:** Firm name, address, telephone numbers and year established
2. **Firm Experience:** Brief description of the firm's experience with similar North Carolina projects over the past five years.
3. **Project Team Qualifications and Experience:** Name and resume of Team Members for the Project; identify Project Engineer; list all outside consultants for the project;
4. **Firm Workload:** List of current projects with expected completion date and man-hour commitments relative to the capacity of the firm.
5. **Project Approach and Proposed Schedule for Scope of Services**
6. **Firm References:** A list of at least three (3) references with contact names and phone numbers. References should be from similar projects
7. **Firm Fee Schedule:** List of current fees to include published hourly rates for the firm and methodology of setting fees

The above Procedural Requirements will have the below value in the Evaluation Criteria.

1. 5%
2. 15%
3. 30%
4. 10 %
5. 20%
6. 15%
7. 5%

Selection Process

The proposals received by the submittal deadline will be evaluated by a selection committee comprised of representatives of Rutherford County.

The committee will review and identify the firm or firms that are most qualified and responsive to the services requested. Interviews may be conducted should the committee require further assessment. The successful vendor will be notified once an award/contract has been approved by the County of Rutherford Board of Commissioners.

Additional Instructions

After the Request for Qualifications issue date, all communications shall be in writing. No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to David Odom at davidodom@odomengineering.com . **All written questions shall be received by Odom Engineering, PLLC no later than ** 10:00 am Monday April 29, 2019 **. NO EXCEPTIONS.**

**** PLEASE NOTE DATE CHANGE ****

Firms should submit one (1) original and five (5) copies of their response. The Engineer's Statement of Qualifications shall be limited to no more than 40 pages, including Cover Page. The original should also include the following documents: Non-Collusion Affidavit, E-Verify Affidavit, and W-9 Form.

The County reserves the right to reject any and/or all responses. The County reserves the right to delete any portion of this project following the bid process.

NON-COLLUSION AFFIDAVIT

State of North Carolina
County of Rutherford

I _____, being first duly sworn, deposes and says that:

He/She is the _____ of _____, the proposer that has submitted the attached proposal;

He/She is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such proposal;

Such proposal is genuine and is not a collusive or sham proposal;

Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, Employees or parties of interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Proposer, firm or person to submit a collusive or sham proposal in connections with the contract for which the attached proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached proposal or of any other Proposer or to fix overhead, profit or cost element of the proposal price of any other Proposer or to secure through collusion, conspiracy, connivance or unlawful agreement any advantage against the County of Rutherford or any person interested in the proposed contract; and

The price or prices quoted in the attached proposal are fair, proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Signature and Title

State of North Carolina
County of _____
Subscribed and sworn before me,
This ____ day of _____, _____

Notary Public
My commission expires _____

AFFIDAVIT OF COMPLIANCE WITH N.C. E-VERIFY STATUTES

STATE OF NORTH CAROLINA COUNTY OF RUTHERFORD

I, _____ (hereinafter the "Affiant"), being duly authorized by and on behalf of _____ (hereinafter "Contractor") after first being duly sworn hereby swears or affirms as follows:

1. Contractor understands that E-Verify is the federal E-Verify program operated by the United States Department of Homeland Security and other federal agencies, or any successor or equivalent program used to verify the work authorization of newly hired employees pursuant to federal law in accordance with Article 2 of Chapter 64 of the North Carolina General Statutes; and
2. Contractor understands that an "Employer", as defined in NCGS§64-25(4), is required by law to use E-Verify to verify the work authorization of its employees through E-Verify in accordance with NCGS§64-26(a). The term "Employer" does not include State agencies, counties, municipalities, or other governmental bodies.
3. Contractor is a person, business entity, or other organization that transacts business in this State and that employs 25 or more employees in the state of North Carolina. (mark Yes or No)
 - a. YES _____
 - b. NO _____
4. Contractor will ensure compliance with E-Verify to the extent applicable and will ensure compliance by any subcontractors subsequently hired by Contractor to perform work under Contractor's contract with Rutherford County.

This ____ day of _____, 201__.

Signature of Affiant

Print or Type Name: _____

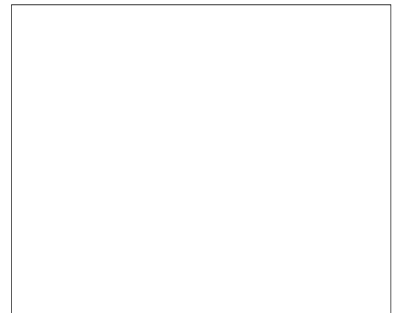
State of _____

County of _____

Signed and sworn to (or affirmed) before me, this the ____ day of _____, 201__.

My Commission Expires:

Notary Public



(Affix Official/Notarial Seal)

**Request for Taxpayer
Identification Number and Certification**

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	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 of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see Instructions) ▶ _____	(Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
____ - ____ - _____	
or	
Employer identification number	
____ - _____	

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 for Part II, later.

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. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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)
- 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)

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*, later.