

Request for Qualifications (Architect / Engineer)

State of Ohio Standard Forms and Documents

Administration of Project: Local Higher Education

Project Name	<u>Elevator Repairs and Replacements Phase 2</u>	Response Deadline	<u>10/17/2016</u>	<u>2:00 p.m.</u>	local time
Project Location	<u>OSU Main Campus</u>	Project Number	<u>OSU-160976</u>		
City / County	<u>Columbus / Franklin</u>	Project Manager	<u>Aldino Stazzone</u>		
Owner	<u>The Ohio State University</u>	Contracting Authority	<u>Local Higher Education</u>		
Delivery Method	<u>General Contracting</u>	Prevailing Wages	<u>State</u>		
No. of paper copies requested (stapled, not bound)	<u>2</u>	No. of electronic copies requested (PDF)		<u>1</u>	

Submit the requested number of Statements of Qualifications (Form F110-330) directly to Aldino Stazzone at 400 Enarson Classroom Building, 2009 Millikin Rd, Columbus, OH 43210. See Section H of this RFQ for additional submittal instructions.

Submit all questions regarding this RFQ in writing to Aldino Stazzone at stazzone.1@osu.edu with the project number included in the subject line (no phone calls please). Questions will be answered and posted to the Opportunities page on the OFCC website at <http://ofcc.ohio.gov> on a regular basis until one week before the response deadline. The name of the party submitting a question will not be included on the Q&A document.

Project Overview

A. Project Description

This project will upgrade, replace and modernize elevator systems at various campus buildings. Work shall include, but is not limited to upgrading and replacing elevator power systems, controller equipment and systems, elevator cars and machine room upgrades and bringing existing building elevators up to current ASME A.17.1 code requirements.

B. Scope of Services

The A/E shall have a qualified elevator consultant and a member of IAEC (International Association of Elevator Consultants) as part of their team. This consultant shall have specific experience with elevator construction, modernization, maintenance, model codes and standards, and expertise with local building codes, laws and regulations.

The elevator consultant shall have up to date knowledge of industry products and suppliers, the ability to design elevator systems, to specify components, to perform elevator bank traffic studies, to provide blueprint drawings for incorporation into contract bid packages, to provide maintenance audits, and to verify contract compliance.

The selected firm will provide the following scope of services:

- Preliminary Engineering services to include an assessment of existing elevator systems and prioritization of repairs with an opinion of probable costs.
- Measure of Actual Operating Performance vs. Recommended Standards
- Theoretical Traffic Analysis
- Itemized Deficiency Documentation
- Recommendations for Short- and Long-Term Modernization/Upgrading
- Modernization or Upgrading Recommendations with Cost Estimates
- Code Analysis and ADA Compliance
- Mechanical, Electrical and Structural Loads
- Specification and Contract Documents Design services
- Budget Estimates.
- Bidding and Award Support,
- Shop Drawing Review
- Site Visits, Punch List Evaluation, Final Acceptance and Close-Out
- Contractor Prequalification
- Feasibility Studies
- Evaluation of Overall Level of Maintenance
- Review of Mandated Testing Dates
- Preparation of a preliminary milestone schedules
- Interface with vertical transportation trades or disciplines to insure deliverables will be available when needed.
- Review of drawings/specifications/deliverables to assure project is on track
- Monitor schedules and review, approve/reject/negotiate change orders

Request for Qualifications (Architect / Engineer) continued

NOTE: The primary A/E shall be (1) a registered architect holding a license and certificate of authorization issued by the Ohio Architects Board pursuant to ORC Chapter 4703, (2) a landscape architect holding a license and certificate of authorization issued by the Ohio Landscape Architects Board pursuant to ORC Chapter 4703, or (3) a professional engineer or professional surveyor holding a license and certificate of authorization issued by the Ohio Engineers and Surveyors Board pursuant to ORC Chapter 4733.

G. Evaluation Criteria for Selection

- Demonstrated ability to meet Owner's programmed project vision, scope, budget, and schedule on previous projects.
- Previous experience compatible with the proposed project (e.g., type, size).
- Relevant past work of prospective firm's proposed consultants.
- Past performance of prospective firm and its proposed consultants.
- Qualifications and experience of individuals directly involved with the project.
- Proposer's previous experience (numbers of projects, sizes of projects) when working with its proposed consultants.
- Design quality and demonstrated ability of prospective firm and its proposed consultants to provide design services which represent the University's *Design Values for Campus Development* fod.osu.edu/proj_del/ref/0200_Design_Values.pdf
- Experience and capabilities of creating or using Critical Path Method (CPM) schedules and of using CPM schedules as a project management resource.
- Approach to and success of using partnering and Alternative Dispute Resolution.
- Proximity of prospective firms to the project site.
- Proposer's apparent resources and capacity to meet the needs of this project.

Interested A/E firms are required to submit the **Commitment to Participate in the EDGE Business Assistance Program** form in its Statement of Qualifications (Form F110-330) Section H. Additional Information submitted in response to the RFQ, to indicate its intent to contract with and use EDGE-certified Business Enterprise(s), as a part of the A/E's team. The Intent to Contract and Perform and / or waiver request letter and Demonstration of Good Faith Effort form(s) with complete documentation must be attached to the A/E's Technical Proposal. Both forms can be accessed via the OFCC website at <http://ofcc.ohio.gov>.

Please identify the EDGE-certified Business Enterprises, by name, which will participate in the delivery of the proposed professional services solicited in the RFQ.

H. Submittal Instructions

Firms are required to submit the current version of Statement of Qualifications (Form F110-330) available via the OFCC website at <http://ofcc.ohio.gov>.

Electronic submittals should be combined into one PDF file named with the project number listed on the RFQ and your firm's name. Use the "print" feature of Adobe Acrobat or similar software for creating a PDF rather than using a scanner. If possible, please reduce the file size of the PDF. In Acrobat, go to Advanced, then PDF Optimizer. Also, please label the CD or DVD and the sleeve with the project number and firm name.

Paper copies of the Statement of Qualifications, if requested, should be stapled only. Do not use special bindings or coverings of any type. Cover letters and transmittals are not necessary.

Facsimile copies of the Statement of Qualifications will not be accepted.

Firms are requested to identify professional registrations, memberships and credentials including but not limited to: LEED GA, LEED AP, LEED AP+, CCCA, CCM, CCS, CDT, DBIA, CPE, and any other appropriate design and construction industry credentials. Identify that information on the resume page for individual in Block 22, Section E of the F110-330 form.

Architect/Engineer Selection Rating Form

State of Ohio Standard Forms and Documents

Project Name Elevator Repairs and Replacements Proposer Firm _____
 Project Number OSU-160976 City, State, Zip _____

Selection Criteria		Value	Score
1. Primary Firm Location, Workload and Size (Maximum 10 points)			
a. Proximity of firm to project site	Less than 50 miles	5	
	50 miles to 100 miles	2	
	More than 100 miles	0	
b. Amount of fees awarded by Contracting Authority in previous 24 months	Less than \$200,000	2	
	\$200,000 to \$1,000,000	1	
	More than \$1,000,000	0	
c. Number of licensed professionals	Less than 2 professionals	1	Max = 3
	2 to 10 professionals	2	
	More than 10 than professionals	3	
2. Primary Firm Qualifications (Maximum 30 points)			
a. Project management lead	Experience / ability of project manager to manage scope / budget / schedule / quality	0 - 10	Max = 20
b. Project design lead	Experience / creativity of project designer to achieve owner's vision and requirements	0 - 5	
c. Technical staff	Experience / ability of technical staff to create fully coordinated construction documents	0 - 10	
d. Construction administration staff	Experience / ability of field representative to identify and solve issues during construction	0 - 5	
3. Key Consultant Qualifications (Maximum 20 points)			
a. Key discipline leads	Experience / ability of key consultants to perform effectively and collaboratively	1 - 15	
b. Proposed EDGE-certified Consultant participation*	One additional point for every 2 percent increase in professional services over the advertised EDGE participation goal	0 - 5	
4. Overall Team Qualifications (Maximum 10 points)			
a. Previous team collaboration	Less than 2 sample projects	1	Max = 3
	2 to 4 sample projects	2	
	More than 4 sample projects	3	
b. LEED** Registered / Certified project experience	Registered projects	1	Max = 2
	Certified projects	2	
c. BIM project experience	Training and knowledge	1	Max = 3
	Direct project experience	3	
d. Team organization	Clarity of responsibility / communication demonstrated by table of organization	0 - 2	
5. Overall Team Experience (Maximum 30 points)			
a. Previous team performance	Past performance as indicated by evaluations and letters of reference	0 - 10	
b. Experience with similar projects / delivery methods	Less than 3 projects	0 - 3	
	3 to 6 projects	4 - 6	
	More than 6 projects	7 - 10	
c. Budget and schedule management	Performance in completing projects within original construction budget and schedule	0 - 5	
d. Knowledge of Ohio Capital Improvements process	Less than 3 projects	0 - 1	
	3 to 6 projects	2 - 3	
	More than 6 projects	4 - 5	
* Must be comprised of professional design services consulting firm(s) and NOT the primary firm ** Leadership in Energy & Environmental Design administered by the Green Building Certification Institute		Subtotal	

Notes:

Evaluator:

Name _____

Signature _____

Date _____