

Request for Qualifications (Architect / Engineer)

State of Ohio Standard Forms and Documents

Administration of Project: Local Higher Education

Project Name	<u>Irvin Hall Interior Renovations 2016</u>	Response Deadline	<u>10/02/15</u>	<u>2:00 PM</u>	local time
Project Location	<u>Irvin Hall, 400 East Spring St.</u>	Project Number	<u>MUN-100060</u>		
City / County	<u>Oxford / Butler</u>	Project Manager	<u>John Porchowsky</u>		
Owner	<u>Miami 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>3</u>	No. of electronic copies requested (PDF)	<u>1</u>		

Submit the requested number of Statements of Qualifications (Form F110-330) directly to Elizabeth Davidson at 181 Cole Service Building, 101 South Fisher Drive, Oxford, Ohio 45056. See Section H of this RFQ for additional submittal instructions.

Submit all questions regarding this RFQ in writing to John Porchowsky at porchojp@miamioh.edu with the project number included in the subject line (no phone calls please). Questions will be answered and posted to the University's Facilities Contracting Office's website at www.pfd.miamioh.edu/fco and 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

Miami University plans to remodel its existing Irvin Hall, an academic building located at 400 East Spring Street, Oxford, Ohio. This three-story building, built in 1925 and rehabilitated in 1993, houses language studies. The construction project will be completed during the summer of 2016 while the building is partially occupied.

Work includes, without limitation:

- Replacement of corridor ceiling grid, pads, and replacement of existing lighting fixtures with LED fixtures
- Upgrading several HVAC systems throughout building
- Replacement of existing fire alarm system
- Refurbishing existing windows
- Interior finishes and A/V upgrades

B. Scope of Services

The selected A/E, as a portion of its required Scope of Services and prior to submitting its proposals, will discuss and clarify with the Owner and/or the Contracting Authority, the cost breakdown of the Architect/Engineer Agreement detailed cost components to address the Owner's project requirements. Participate in the Encouraging Growth, Diversity & Equity (EDGE) Program as required by statute and the Agreement.

As required by the Agreement, and as properly authorized, provide the following categories of services: Program Verification, Schematic Design, Design Development, Construction Document Preparation, Bid and Award Support, Conformed Documents, Construction Administration, Post-Construction, and Additional Services of all types.

Refer to the *Ohio Facilities Construction Manual* for additional information about the type and extent of services required for each. A copy of the standard Agreement can be obtained at the OFCC website at <http://ofcc.ohio.gov>.

During the construction period, provide not less than 8 hours (excluding travel time) on-site construction administration services each week, including (1) attendance at progress meetings, (2) a written field report of each site visit, (3) on-site representation comprised of the A/E and its consultant staff involved in the primary design of the project, all having relevant and appropriate types of construction administration experience.

For purposes of completing the Relevant Project Experience Matrix in Section F of the Statement of Qualifications (Form F110-330), below is a list of relevant scope of work requirements for this RFQ:

1. Architectural – Past experience on renovation projects for the State of Ohio Institutions including design, contract administration and close-out.
2. Plumbing Engineering – Previous projects performed with the Architect as lead.
3. HVAC Engineering – Previous projects performed with the Architect as lead.
4. Electrical Engineering – Previous projects performed with the Architect as lead.

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 if applicable.

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: LEED GA, LEED AP, LEED AP+, CCCA, CCM, CCS, CDT, CPE, DBIA, 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

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Project Name Irvin Hall Interior Renovations 2016 Proposer Firm _____
 Project Number MUN-100060 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 \$500,000	2	
	\$500,000 to \$1,000,000	1	
	More than \$1,000,000	0	
c. Number of licensed professionals	Less than 3 professionals	1	Max = 3
	3 to 10 professionals	2	
	More than 10 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 - 10	
c. Technical staff	Experience / ability of technical staff to create fully coordinated construction documents	0 - 5	
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	0 - 15	
b. Proposed EDGE-certified Consultant participation*	One point for every 2 percent increase in professional services over the EDGE participation goal	0 - 5	
4. Overall Team Qualifications (Maximum 10 points)			
a. Previous team collaboration	Less than 3 sample projects	1	Max = 3
	3 to 6 sample projects	2	
	More than 6 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 2 projects	0 - 3	
	2 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 2 projects	0 - 1	
	2 to 4 projects	2 - 3	
	More than 4 projects	4 - 5	
		Subtotal	

* Must be comprised of professional design services consulting firm(s) and NOT the lead firm
 ** Leadership in Energy & Environmental Design administered by the Green Building Certification Institute

Notes:

Evaluator:

Name _____

Signature _____

Date _____