

SUMMARY INFORMATION FORM

THIS PAGE MUST BE SIGNED AND RETURNED WITH BIDDER'S RESPONSE

RFQ #: RFQ SU-020819	RFP Title: Design Services for Rehabilitation of Academic Building Restrooms – Phase 1 and Phase 2	RFP Release Date: 02/08/2019 Electronic copies of this RFP are available at: https://www.purchase.edu/offices/purchasing/procurement-opportunities/
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Key Events

Questions/Requests for clarification period	Feb 12 – Feb 27, 2019 COB
Response to questions/requests for clarifications issued	Mar 01, 2019
Pre-Bid Meeting (Non-Mandatory)	Feb 20, 2019 at 10:00 AM
Proposal Due Date and Time	Mar 11, 2019 at 1:00 PM
Interviews of Short-Listed Firms	Mar 20 – Mar 22, 2019
Anticipated Notification of Award	Apr 08, 2019
Anticipated Contract Start Date	May 01, 2019
Anticipated Term Length of Contract	17 months

SUNY reserves the right, in its sole discretion, to modify the above schedule. Notification will be made in a timely manner to

<https://www.purchase.edu/offices/purchasing/procurement-opportunities/>

Contact Information

Primary Contact (Submit to): F. Edward Herran Director Procurement & Accts Payable SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: (914) 251-6070 Fax: (914) 251-6075 Email: Edward.Herran@purchase.edu	Technical Contact: Larry Manganello Sr Project Manager Capital Facilities Planning SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: (914) 251-4477 Fax: (914) 251-6063 Email: Lawrence.Manganello@purchase.edu	Technical Contact: Sean Connolly Associate Director Capital Facilities Planning SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: (914) 251-5916 Fax: (914) 251-6063 Email: Sean.Connolly@purchase.edu	MWBE Contact: Lula Curanovic MWBE Coordinator Purchasing & Accts Payable Ofc SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: (914) 251-6070 Fax: (914) 251-6075 Email: Lula.Curanovic@purchase.edu
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Restricted Period

In accordance with the requirements of New York State Finance Law Sections 139j and 139k ("Lobbying Law"), the restricted period for this procurement is now in effect. Therefore, all communications regarding this procurement must be handled through the State University of New York's designated contacts only.

Bidder Information

Legal Business Name of Firm Bidding:	Firm's Federal Tax Identification Number:	
D/B/A – Doing Business As (if applicable):	NYS Vendor ID Number (See Exhibit B, Section 16):	
Street Address:	City/State:	Zip Code:
If applicable, place an "x" in the appropriate box: <i>(check all that apply)</i> <input type="checkbox"/> Small Business (if checked, provide # of employees ____) <input type="checkbox"/> Minority Owned Business (NYS Certified)		
<input type="checkbox"/> Disabled Veteran Owned Business <input type="checkbox"/> Women Owned Business (NYS Certified)		
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> We are unable to bid at this time because:		
Bidders Signature:	Title:	
Printed Name:	Date:	

THIS PAGE MUST BE SIGNED AND RETURNED WITH BIDDER'S RESPONSE

By signing this form, bidder acknowledges (a) that the RFP instructions are understood; (b) that the bidder is committed to servicing SUNY's needs in the required time period; and (c) that all information required by this RFP has been included in bidder's proposal.

New York State Finance Law §139-l Certification

Bidder - and each person signing on behalf of any Bidder - certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that the Bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy, at a minimum, meets the requirements of New York State Labor Law §201-g.

If the bidder cannot make the foregoing certification, such bidder shall so state and shall furnish with the bid proposal a signed statement that sets forth in detail the reasons that the bidder cannot make the certification.

Certification:

Contractor: _____

By (signature): _____

Name (printed): _____

Title: _____

Date: _____

Solicitation Reference: _____

Solicitation Description/Title: _____

Check only if Contractor cannot make the foregoing certification and has enclosed/attached a statement on company letterhead, signed by an authorized representative, that sets forth in detail the reasons that Contractor cannot make the certification.

Background:

N.Y. State Finance Law §139-l

Pursuant to N.Y. State Finance Law §139-l, every bid made on or after January 1, 2019 to the State of any public department or agency thereof, where competitive bidding is required by statute, rule or regulation, for work or services performed or to be performed or goods sold or to be sold, and where otherwise required by such public department or agency, shall contain a certification that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of N.Y. State Labor Law §201-g.

N.Y. State Labor Law §201-g provides requirements for such policy and training and directs the Department of Labor, in consultation with the Division of Human Rights, to create and publish a model sexual harassment prevention guidance document, sexual harassment prevent policy and sexual harassment training program that employers may utilize to meet the requirements of N.Y. State Labor Law §201-g. The model sexual harassment prevention policy, model sexual harassment training materials, and further guidance for employers, can be found online at the following URL:

<https://www.ny.gov/combating-sexual-harassment-workplace/employers>.

Pursuant to N.Y. State Finance Law §139-l, any bid by a corporate bidder containing the certification required above shall be deemed to have been authorized by the board of directors of such bidder, and such authorization shall be deemed to include the signing and submission of such bid and the inclusion therein of such statement as the act and deed of the bidder.

If the bidder cannot make the required certification, such bidder shall so state and shall furnish with the bid a signed statement that sets forth in detail the reasons that the bidder cannot make the certification. After review and consideration of such statement, SUNY may reject the bid or may decide that there are sufficient reasons to accept the bid without such certification.

Human Rights Law EO 177 Certification

The New York State Human Rights Law, Article 15 of the Executive Law, prohibits discrimination and harassment based on age, race, creed, color, national origin, sex, pregnancy or pregnancy-related conditions, sexual orientation, gender identity, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military status or predisposing genetic characteristics.

The Human Rights Law may also require reasonable accommodation for persons with disabilities and pregnancy-related conditions. A reasonable accommodation is an adjustment to a job or work environment that enables a person with a disability to perform the essential functions of a job in a reasonable manner. The Human Rights Law may also require reasonable accommodation in employment on the basis of Sabbath observance or religious practices.

Generally, the Human Rights Law applies to:

- all employers of four or more people, employment agencies, labor organizations and apprenticeship training programs in all instances of discrimination or harassment;
- employers with fewer than four employees in all cases involving sexual harassment; and,
- any employer of domestic workers in cases involving sexual harassment or harassment based on gender, race, religion or national origin.

In accordance with Executive Order No. 177, the Bidder hereby certifies that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law. 3

Executive Order No. 177 and this certification do not affect institutional policies or practices that are protected by existing law, including but not limited to the First Amendment of the United States Constitution, Article 1, Section 3 of the New York State Constitution, and Section 296(11) of the New York State Human Rights Law.

Contractor: _____

By (signature): _____

Printed Name: _____

Title: _____

Date: _____

The Certification is to be submitted prior to contract award by all successful bidders on all Covered contracts and contract renewals.

FORM A

Summary: Policy and Procedure of the State University of New York Relating to State Finance Law §§139-j and 139-k

State Finance Law §§139-j and 139-k, enacted by Ch. 1 L. 2005, as amended by Ch. 596 L. 2005, effective January 1, 2006, regulate lobbying on government procurement, including procurements by State University to obtain commodities and services and to undertake real estate transactions.

Generally, the law restricts communications between a potential vendor or a person acting on behalf of the vendor, including its lobbyist, to communications with the officers and employees of the procuring agency designated in each solicitation to receive such communications. Further, the law prohibits a communication (a "Contact") which a reasonable person would infer as an attempt to unduly influence the award, denial or amendment of a contract. These restrictions apply to each contract in excess of \$15,000 during the "restricted period" (the time commencing with the earliest written notice of the proposed procurement and ending with the later of approval of the final contract by the agency, or, if applicable, the State Comptroller). The agency must record all Contacts, and, generally, must deny an award of contract to a vendor involved in a knowing and willful Contact. Each agency must develop guidelines and procedures regarding Contacts and procedures for the reporting and investigation of Contacts. The agency's procurement record must demonstrate compliance with these new requirements.

Accordingly, neither a potential vendor nor a person acting on behalf of the vendor should contact any individual at State University other than the person designated in this solicitation as State University's Designated Contact, nor attempt to unduly influence award of the contract. State University will make a record of all Contacts, and such records of Contact will become part of the procurement record for this solicitation. A determination that a vendor or a person acting on behalf of the vendor has made intentionally a Contact or provided inaccurate or incomplete information as to its past compliance with State Finance Law §§139-j and 139-k is likely to result in denial of the award of contract under this solicitation. Additional sanctions may apply.

A complete copy of the State University of New York Procurement Lobbying Policy and Procedure is available for review at www.suny.edu/sunyppl/.

FORM B
Affirmation with respect to State Finance Law §§139-j and 139-k

A complete copy of the State University of New York Procurement Lobbying Policy and Procedure is available for review at www.suny.edu/sunypp/.

Procurement Description/ID No.

Offerer **AFFIRMS** that it has reviewed and understands the Policy and Procedure of the State University of New York, relating to State Finance Law §§139-j and 139-k, and agrees to comply with State University's procedure relating to Contacts with respect to this procurement.

Name of Offerer:
Address:
Person Submitting Form:
Name:
Title:

FORM C

Disclosure and Certification with respect to State Finance Law §§139-j and 139-k

Procurement Description/ID No. _____

1. Has a Governmental Entity, as defined in State Finance Law §139-j(1)(a), made a determination of non-responsibility with respect to the Offerer within the previous four years where such finding was due to a violation of State Finance Law §139-j or the intentional provision of false or incomplete information with respect to previous determinations of non-responsibility?

No ___
Yes ___

If yes, provide the following details:
Governmental Entity which made the finding:
Date of finding:
Basis of finding:

2. Has a Governmental Entity terminated or withheld a procurement contract with the Offer because of violations of State Finance Law §139-j or the intentional provision of false or incomplete information with respect to previous determinations of non-responsibility?

No ___
Yes ___

If yes, identify the following:
Governmental Entity which terminated the contract:
Date of contract termination or withholding:
Identify the related procurement contract:

Offerer **CERTIFIES** that all information provided by Offerer with respect to its compliance with State Finance Law §§139-j and 139-k is complete, true and accurate.

Name of Offerer:

Address:

Signature of Person Submitting Form: _____

Name:
Title:
Date:

Minority and Women Owned Business Enterprises

<u>Firm Name</u>	MBE or WBE	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	MBE or WBE	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	MBE or WBE	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	MBE or WBE	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	MBE or WBE	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			

Certification: I hereby certify that the information provided on this form is true, accurate and complete. I understand that the information provided is to be used to comply with the reporting requirements of Article 15-A of the Executive Law.

Signature (Officer of the Company): _____ Date: _____
 Name: _____
 Title: _____

For internal use only.

MWBE Program Coordinator Approval: _____ Date: _____



Service Disabled Veteran Owned Business Enterprises

<u>Firm Name</u>	<u>Type</u> SDVOB	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	<u>Type</u> SDVOB	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	<u>Type</u> SDVOB	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	<u>Type</u> SDVOB	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			
<u>Firm Name</u>	<u>Type</u> SDVOB	<u>Discipline</u>	Has your firm held contracts with this firm in the past? Y or N
Brief summary of services to be provided with justification of estimated participation:			

Certification: I hereby certify that the information provided on this form is true, accurate and complete. I understand that the information provided is to be used to comply with the reporting requirements of Article 17-B of the Executive Law.

Signature (Officer of the Company): _____
Name: _____
Title: _____

Date: _____

For internal use only.

Program Coordinator Approval: _____

Date: _____

Instructions for completing form 7555-15:

1. Fill in all requested information including your firm name, SUNY Project No., Project Title, Campus, date and the Minority and Women Owned Business Enterprise goals as specified in the Project Advertisement.
2. In the Consultant/Subconsultant fields, enter both your firm as prime and any proposed subconsultant firms. Firms located out of New York State should have the appropriate approvals in place to practice in NYS. If a firm, including your firm provides service in multiple disciplines, list them for each area of expertise. Discipline areas may be modified as appropriate. Add additional pages if necessary.
3. Enter the Federal ID number for your firm and any subconsultant firms.
4. Enter "M" or "W" if your firm or any proposed subconsultant firms are certified by NY State as a Minority or Woman-Owned Business Enterprise. Identify if a firm is a Service Disabled Veteran Owned Business Enterprise.
5. **With the submittal of qualifications:** Enter the estimated **percentage** of the work scope for your firm and any identified subconsultants. **Do not enter dollar values. Do not enter "TBD"**. The sum of the individual percentages should add up to 100%.
6. Enter the name of the Partner in Charge and/or Key Staff member from your firm and subconsultants firms. Also include the individual's license number if providing professional services.
7. Complete page 2 with the name of each certified MBE or WBE subconsultant identified on page 1 of the Subconsultant staffing list, note whether the firm is an MBE or WBE and their discipline. Provide a brief summary of the services to be provided by the certified MBE or WBE with justification to support the estimated participation.
8. Complete page 3 with the name of each certified Service Disabled Veteran Owned Business Enterprise subconsultant identified on page 1 of the Subconsultant staffing list. Provide a brief summary of the services to be provided by the certified MBE or WBE with justification to support the estimated participation.
9. The certification must be signed and dated by an individual from your firm who is authorized to sign on behalf of your company.
10. Retain a copy for your files and as a reference for proposing any future changes. Any proposed changes to an approved Subconsultant Staffing list must be reviewed with the Project Coordinator and approved by SUNY.
11. **If your firm is selected, at the time the cost proposal is submitted an updated Subconsultant Staffing List with Dollar Values is required.**

**MINORITY AND WOMEN’S BUSINESS - EQUAL EMPLOYMENT
OPPORTUNITY PROGRAM POLICY STATEMENT**

Policy Statement

The _____ commits to carrying out the intent of the New York State
(Name of Campus, Consultant, Contractor)
Executive Law, Article 15-A which assures the meaningful participation of minority and
women’s business enterprises in contracting and the meaningful participation of minorities and
women in the workforce on activities financed by public funds.

Minority Business Officer

_____ is designated as the Minority Business Enterprise Officer
(Name of Designated Officer)
responsible for administering the Minority and Women’s Business-Equal Employment
Opportunity (M/WBE-EEO) program.

Phone _____

Email _____

M/WBE Contract Goals

_____ % Minority Business Enterprise Participation

_____ % Women’s Business Enterprise Participation

EEO Contract Goals

10% Minority Labor Force Participation

10% Female Labor Force Participation

(Authorized Representative)

Title: _____

Date: _____