



**RFQ # 22-047 Architecture & Engineering Firm**  
**for**  
**Foothill Family Apartments Rehabilitation**  
**Addendum #1**

**Changes to the RFQ:**

<b>RFQ Issued</b>	December 6, 2022
<b>Questions Due</b>	December 20, 2022, at 10:00 AM Pacific Time
<b>Proposal Due</b>	<del>January 23, 2023</del> <b>January 30, 2023</b> , at 10:00 AM Pacific Time through Housing Agency Marketplace

**4.1 Proposal Format**

**E. Examples of Previous Work** - The Design Team should provide sufficient examples of past work each similar project. The proposal can include as many Examples of Previous Work as are applicable. **Please include project type, scope of work, client name and contact information, total cost of construction and year completed.**

**4.2 Required Forms/Certifications**

The following forms must be submitted with your proposal in the following order:

~~A. Examples of Previous Work Form~~

**B. A. Profile and Certification Form/Statement of Qualifications**

The Profile and Certification Form/Statement of Qualifications Form must be completed and signed (Attachment A C).

**C. B. Addendum Acknowledgement Form (if applicable)**

All applicable *Addendum Acknowledgement Form(s)* must be submitted with the proposal (Attachment D)

**5. SELECTION PROCESS****5.1 RFQ Timeline**

The following are proposed dates relating to this selection process:

<b>December 6, 2022</b>	RFQ Issued
<b>December 20, 2022</b>	<b>Questions in writing via email, due by 10:00 AM PDT</b>
<del>January 23, 2023</del> <b>January 30, 2023</b>	<b>Responses due by 10:00 AM PDT.</b> To be submitted online at the Housing Agency Marketplace website at <a href="http://ha.economicengine.com">ha.economicengine.com</a>

**Additional Addendum Items:**

1. Profile and Certification Form attached in Attachment A. Please submit the form with your proposal.

**Responses to Questions:**

The following questions were submitted by the deadline and are answered in this addendum.

**Question #1:** Section 4.2 Item A. references a "Previous Work Form". Is there a specific form we need to complete and submit in addition to completing the requested reference information outlined in Section G?

**Answer #1:** There is no previous work form provided. Please provide examples of previous relevant work including project type, scope of work, client name and contact information, total cost of construction and year completed.

**Question #2:** Are firms required to submit a full subconsultant/engineering team in their response, including all consulting design services outlined on page 6 (i.e.: structural, mechanical, electrical, and civil engineers; fire alarm and security system design consultants; landscape architect; waterproofing consultant) or will subconsultants/engineers be selected after the architect?

**Answer #2:** It is requested that all submitters include all necessary consultants as deemed necessary to complete the work (MEP, structural, civil, waterproofing are required team members). Please provide resumes and previous examples of work for all major team members. Additional consultants will be added as needed. It is expected that the architect will subcontract with the existing fire alarm and burglar alarm company if design services are needed for changes to these systems.

**Question #3:** If a full subconsultant/engineering team is required for this proposal, please clarify what information should be provided for the team.

**Answer #3:** Please provide resumes and previous examples of work for all major team members.

**Question #4:** The following questions are intended to clarify the number of construction document sets the design team will need to create. The RFQ indicates that the 65 units occur in eleven buildings on three separate parcels. Does the Owner intend to include the renovation construction work for the 65 units and common spaces under one construction contract, or under two or more construction contracts based on the separate parcels?

**Answer #4:** The Owner intends to complete the construction for all work under one contract.

**Question #5:** In recent similar TCAC financed renovation of 140+ units on three separate but nearly adjacent parcels, one overall project building permit was required for the financing package, but each parcel required its own construction drawing set for building department plan review because each parcel had its own APN. The three separate construction drawing sets were plan checked as one project. Furthermore, the building department granted each individual building separate building permits to allow for granting certificates of occupancy as the phase renovation construction work was completed. Can the design team assume that this project will follow a similar building permit plan review process?

**Answer #5:** This is not known at this time. It is expected that the owner, architect, general contractor, and City will work together to determine the most efficient approach to plan checking and permitting.

**Question #6:** Will the General Contractor be brought onboard under a negotiated bid or open bid process?

**Answer #6:** The General Contractor will be brought in through a negotiated bid process and will participate in the scope development.

**Question #7:** Will a General Contractor be providing pre-construction services for estimating and construction consultation during the design development phase?

**Answer #7:** Yes, a General Contractor be providing pre-construction services for estimating and construction consultation during the design development phase

**Question #8:** The RFQ scope of work directs the architect to prepare a proposal based on the Base Scope, Scope B, and Scope C conditions shown in the Unit Interior Inspection Summary matrix for Sites A, B, and C indicated on the aerial site plan photo attached to the Property Assessment report. In the Unit Interior Inspection Summary matrix, there are column headings “Base Scope A, Alternate Scope B, and Alternate Scope C.” Furthermore, the matrix Legend indicates that “1” represents Base Scope, “2” represents Scope B, and “0” represents Scope C. Directly below the column heading “Base Scope” is “0s” which according to the Legend indicates Scope C. Below the “Scope B column heading is “1s” which according to the Legend indicates Base Scope. Below the “Scope C column heading is “2s” which according to the Legend indicates Scope C.

Please clarify the meaning of the numbers “0s”, “1s”, and “2s” occurring directly below the column headings “Base Scope, Scope B, and Scope C.”

**Answer #8:** In the Unit Interior Inspection Summary Matrix, 0= Missing, 1=Needs Immediate Replacement, 2= has approximately 1-4 years useful life left, 3 = 5-10 years of useful life, and 4 = new. Items coded as 0 or 1 are included in the “Base Scope”. Items coded as 2 are included in Scope C.

See the corrected legend below for pages 18, 19 and 20 of the report.

LEGEND	Building Number	BASE SCOPE	SCOPE B	SCOPE C
0 REPLACE - BASE SCOPE	Unit Number			
1 REPLACE - BASE SCOPE	# Bedrooms			
2 REPLACE - BASE SCOPE C	# Bathrooms			
	Level			
	HC Accessible			

**Question #9:** Please clarify under which of the scope categories (Base, Scope B, or Scope C) the various unit interior conditions identified in the matrix are intended to be a part of.

**Answer #9:** See the corrected legend and answer provided in Question 8.

**Question #10:** The Property Assessment report states that 65 units were inspected with various conditions or elements identified in the matrix receiving a grade from 1 to 4, with “1” being poor condition and “4” being good or very good condition. Most unit conditions were graded “3”, with a much smaller number graded “2” which appears to be tallied in the “Scope C” column. Is the intent of the unit interior work scope to repair or replace the conditions or elements identified in the matrix regardless of the grading indicated in the matrix?

**Answer #10:** The extent of the unit interior work will be determined based on the Property Assessment and grading. Some units have been identified as more needing more critical attention than others. The full scope will be determined with the A/E team.

**Question #11:** Please provide the specific location of the unit apartment numbers identified in the matrix with the Site A, B, or C shown in the aerial site plan photo.

**Answer #11:**

Site A	Site B	Site C
101-106	301-309	701-706
201-206	401-409	801-804
	501-508	901-903
	601-607	1001-1004
		1101-1104

**Question #12:** Will all the apartments be available for site observations by the selected design team to confirm the existing conditions described in the property assessment report?

**Answer #12:** Once the contract for A/E services is awarded the apartments will be available to the awarded team.

**Question #13:** The creation of additional accessible parking spaces will likely require making some parking spaces diagonally striped access aisle adjacent to new accessible parking spaces resulting in an overall reduction in the number of onsite parking spaces. A reduction of onsite parking spaces may require Planning approvals. Is there currently sufficient onsite parking to accommodate residents, visitors, and staff needs?

**Answer #13:** There is currently sufficient onsite parking to meet residents', visitors', and staff needs.

**Question #14:** The RFQ describes the project as Type V-B (non-rated) construction, but the property assessment report describes the project as Type V-A (1 hour rated) construction. Please clarify the existing project construction type.

**Answer #14:** The construction is Type V-A (1 hour rated) construction.

**Question #15:** The property assessment report describes existing trellises as being in poor condition, relative to other exterior building elements. Is the Owner open to removing and not replacing existing ornamental trellis, which may result in a slightly different building style and more contemporary design aesthetic?

**Answer #15:** The owner is open to options including replacing and removing the ornamental trellises.

**Question #16:** The following questions seek clarification of the Accessibility portion of the property assessment report. Do the construction documents of the original construction identify any Fair Housing safe harbors to demonstrate the original architects design compliance with the Fair Housing Act?

**Answer #16:** The original drawings do not indicate any Fair Housing safe harbors.

**Question #17:** Seven units were reported by Ownership to be “mobility accessible”. What are the physical features of the seven listed apartments identified units as mobility accessible, e.g., toilet and bathtub grab bars, accessible kitchen cabinets and countertops, door clear opening widths, etc.?

**Answer #17:** The property does not appear to have any fully compliant ADA/mobility compliant units. There are 7 unit that have been reported to be Mobility Accessible: Units 102, 201, 303, 401, 602, 702, and 901. The architect should evaluate compliance with the Fair Housing Act and the Americans with Disabilities Act, and identify any needed upgrades.

**Question #18:** The property assessment report identifies Unit 201 as “mobility compliant”, however the Unit 201 photos seem to show an apartment entry door with a round, non-levered doorknob and a bathroom wall mounted sink with an uninsulated drainpipe. Does the report preparer have further information about potentially non-compliant conditions in the units identified as mobility accessible?

**Answer #18:** See question 17 answer.

**Question #19:** Unit 602 was reported by property management to be a mobility impaired unit. What is meant by “mobility impaired”?

**Answer #19:** See question 17 answer.

**Question #20:** Are there any units that were designed and built as adaptable units, which would be required of ground floor units and units on an accessible route in a building with an elevator?

**Answer #20:** No, there are not any units that were designed and built as adaptable units, which would be required of ground floor units and units on an accessible route in a building with an elevator.

**Question #21:** Is there a more in-depth accessibility assessment report available or should the design team include an accessibility assessment in their proposal.

**Answer #21:** The design team should include an accessibility assessment as part of their proposal.

**Question #22:** Are electronic CAD drawing files available of the project?

**Answer #22:** No, there are not electronic CAD drawing files available of the project.

**Question #23:** Is there a current Survey or current ALTA Survey available for the project?

**Answer #23:** A survey should be completed by the selected A/E team.

**Question #24:** Will all the necessary Sub-consultant Engineers and designer be under the Architect's Contract?

**Answer #24:** All major engineers (Structural, MEP, Civil/Survey, Waterproofing, Fire safety) will be under the A/E contract.

**Question #25:** Is a General Contractor already selected and will the construction bid be negotiated with them, or will the project be sent out to bid to multiple General Contractors after CD's are complete?

**Answer #25:** The General Contractor will be brought in through a negotiated bid process and participate in the scope development. Selection of the General Contractor is expected to follow shortly after selection of the A/E team.

**Question #26:** Can you tell me if there is a preliminary estimate, cost or budget for the project?

**Answer #26:** The preliminary estimate of the cost of construction ranges from \$7-10M depending on the extent of the work.

ATTACHMENT A  
Profile and Certification Form



## PROFILE AND CERTIFICATION FORM (Page 1 of 3)

- (1) Prime \_\_\_\_ Sub-contractor \_\_\_\_ (This form must be completed by and for each).
- (2) Name of Firm: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_
- (3) Street Address, City, State, Zip: \_\_\_\_\_
- (4) Primary Contact for this Project: \_\_\_\_\_ Email Address: \_\_\_\_\_
- (5) Identify Principals/Partners in Firm (Attach **professional resumes** for each):

NAME	TITLE	% OF OWNERSHIP

- (6) Identify the individual(s) that will act as project manager and any other supervisory personnel that will work on project; please attach **professional resumes** for each. (Do not duplicate any resumes required above):

NAME	TITLE

- (7) Bidder Diversity Statement: You must circle all of the following that apply to the ownership of this firm and enter where provided the correct percentage (%) of ownership of each:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Caucasian American (Male) _____% | <input type="checkbox"/> Public-Held Corporation _____% | <input type="checkbox"/> Government Agency _____% | <input type="checkbox"/> Non-Profit Organization _____% |
|---|---|---|---|

Resident- (RBE), Minority- (MBE), or Woman-Owned (WBE) Business Enterprise (Qualifies by virtue of 51% or more ownership and active management by one or more of the following:

- |   |   |   |   |  |   |   |
|---|---|---|---|--|---|---|
| <input type="checkbox"/> Resident-Owned* _____%   | <input type="checkbox"/> African American _____%        | <input type="checkbox"/> **Native American _____% | <input type="checkbox"/> Hispanic American _____% | <input type="checkbox"/> Asian/Pacific American _____% | <input type="checkbox"/> Hasidic Jew _____% | <input type="checkbox"/> Asian/Indian American _____% |
| <input type="checkbox"/> Woman-Owned (MBE) _____% | <input type="checkbox"/> Woman-Owned (Caucasian) _____% | <input type="checkbox"/> Disabled Veteran _____%  | <input type="checkbox"/> Small Business _____%    | <input type="checkbox"/> Other (Specify): _____%       |   |   |

If applicable, WMBE Certification Number: \_\_\_\_\_

Certified by (Agency): \_\_\_\_\_

- (8) Federal Tax ID No.: \_\_\_\_\_
- (9) Business Name as Listed on the California Secretary of State Website: \_\_\_\_\_
- (10) California Secretary of State Entity Number: \_\_\_\_\_
- (11) [APPROPRIATE JURISDICTION] Business License No.: \_\_\_\_\_
- (12) State of \_\_\_\_\_ License Type and No.: \_\_\_\_\_

\* The undersigned party submitting this bid hereby certifies that the firm can meet and comply with OHI's "Section 3 Requirements" attached hereto. (**See 'Section 3 Requirements Form and Action Plan'**)

<b>PROFILE AND CERTIFICATION FORM (Page 2 of 3)</b>
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(13) Vendor Diversity Outreach Requirements: OHI requires vendors/contractors/proposers undertake good faith efforts to ensure that Minority Business Enterprises and Woman Business Enterprises are provided opportunities to contract with OHI for the delivery of goods and services. The undersigned, as an authorized representative of the business identified herein, hereby declares that the following statements are, to the best of his/her/its knowledge, true and correct with respect to the efforts made in a "good-faith" attempt to comply with OHI's outreach requirements and that said business will provide to OHI evidence of the efforts described herein within three working days of such request.

a.) **Written Notice**

- Not less than \_\_\_\_\_ days prior to the submission of the bids/proposals, we provided written notice of our interest in bidding and requested assistance from organizations that provide assistance in the recruitment and placement of MBE/WBE and other business enterprises. **[NOTE: You may be requested to submit a list of organizations that provided such assistance.]**
- We **did not** provide such written notice.

b.) **Advertisement**

- Not less than \_\_\_\_\_ days prior to the submission of the bids/proposals, the undersigned party advertised for bids/proposals from interested MBE/WBE businesses in more than one daily or weekly newspaper, trade association publications, minority or trade oriented publications, trade journals, internet, social media and/or other media. **[Proof of advertisement must be attached.]**
- The undersigned party **did not** advertise for bids from MBE/WBE businesses.

c.) **Participation**

- The undersigned party directly solicited MBE/WBE businesses that have agreed to participate in this contract if awarded.
- The undersigned party **did not** obtain participation by MBE/WBE businesses.

(14) Insurance Certification: The undersigned party submitting this bid hereby certifies that the firm can meet and comply with OHI's "Insurance Requirements" attached hereto. **(See 'OHI Insurance Requirements' attached)** Copies of insurance certificates may be submitted with the proposal or the information completed below. The insurance policies must name OHI as an additional insured and maintained throughout the term of the contract. The firm(s) must provide OHI with Certificates of Insurance for the preceding coverage. The insurance policies must provide a 30-day notice of cancellation and be primary to any other insurance carried by OHI

Worker's Compensation Insurance Carrier: \_\_\_\_\_

Policy No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

General Liability Insurance Carrier: \_\_\_\_\_

Policy No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Professional Liability Insurance Carrier: \_\_\_\_\_

Policy No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

(15) Debarred Statement: Has this firm, or any principal(s) ever been debarred from providing any services by the Federal Government, any state government, the State of \_\_\_\_\_, or any local government agency within or without the State of \_\_\_\_\_? Yes  No

If "Yes," please attach a full detailed explanation, including dates, circumstances and current status.

**PROFILE AND CERTIFICATION FORM (Page 3 of 3)**

(16) Disclosure Statement: Does this firm or any principals thereof have any current, past personal or professional relationship with any Commissioner or Officer of OHI? Yes  No

If "Yes," please attach a full detailed explanation, including dates, circumstances and current status.

(17) Non-Collusive Affidavit: The undersigned party submitting this bid hereby certifies that such bid is genuine and not collusive and that said bidder entity has not colluded, conspired, connived or agreed, directly or indirectly, with any bidder or person, to put in a sham bid or to refrain from bidding, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the bid price of affiant or of any other bidder, to fix overhead, profit or cost element of said bid price, or that of any other bidder or to secure any advantage against OHI or any person interested in the proposed contract; and that all statements in said bid are true.

(18) Indemnification Certification: The undersigned party submitting this bid hereby certifies that the firm expressly agrees to indemnify, defend, hold harmless and indemnify OHI, and its respective commissioners, members, officers, agents and employees of and from all claims, loss, damage, injury, actions, causes of action and liability of every kind, nature and description directly or indirectly arising out of or connected with the performance of this Contract and any of Contractor's operations or activities related thereto, excluding the willful misconduct or the gross negligence of the person or entity seeking to be defended, indemnified or held harmless.

(19) Section 3 and Labor Compliance: The undersigned party submitting this bid hereby certifies that the firm can meet and comply with OHI's "Section 3 Requirements" and Labor Compliance standards including submission of certified payrolls and paying employees the required prevailing wages.

(20) Labor Code Certification: The undersigned party submitting this bid hereby certifies that party submitting this bid hereby is aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for worker's compensation or to undertake self-insurance in accordance with the provisions of that Code, and will comply with such provisions before commencing the performance of the work of this Agreement".

(21) Verification Statement: The undersigned party hereby states that by completing and submitting this form he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and agrees that if OHI discovers that any information entered herein is false, that shall entitle OHI to not consider nor make award or to cancel any award with the undersigned party.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Company



**FP # 22-047 Architecture & Engineering Firm**  
**for**  
**Foothill Family Apartments Rehabilitation**  
**Addendum #1**

Proposer hereby acknowledges this addendum:

Name of Firm: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Acknowledgment of this Addendum MUST be included with your proposal.**