

PROJECT STATEMENT
 STATE OF MICHIGAN
 DEPARTMENT OF MANAGEMENT AND BUDGET
 Facilities Administration
 First Floor, Stevens T. Mason Building
 P.O. Box 30026
 Lansing, Michigan 48909

FILE NUMBER 641/09317.IJH	INDEX NUMBER(S) TBD	COMPTROLLER OBJECT	APPROVAL DATE April 27, 2009
DEPARTMENT DELEG, Department of Energy, Labor & Economic Growth			
AGENCY MLBFTA, Michigan Land Bank Fast Track Authority			
ADDRESS Cadillac Place; 3028 West Grand Blvd, Suite 4-600; Detroit, Michigan 48206			
AGENCY CONTACT Kim Homan		TELEPHONE : (313) 456-3104 fax (313) 456-3330	
DEPARTMENT OF MANAGEMENT AND BUDGET PROJECT MANAGER Irene Jackson Henry, RA, NCARB		TELEPHONE : (517) 241-3133 fax (517) 373-3562	
PROJECT DESCRIPTION <p>Demolition, recycling, proper waste disposal, site protection, and site restoration for approximately 600 Michigan Land Bank Fast Track Authority parcels. The Department of Management and Budget will hold and administer <u>up to five</u> open-ended demolition contracts. The contractor will be compensated on a unit price basis, with a lump sum per structure. Three sizes of structures are anticipated (with and without basements) with unit prices for each structure size and basement status.</p> <p>Over 500 of the properties are located in Detroit and Highland Park, with additional properties in other areas. The parcels contain abandoned and derelict residential structures. All structures on a parcel will be demolished, including garages and/or outbuildings. All footings and foundations are to be removed and the site backfilled, compacted, graded, and seeded. The contractors will provide a plan for deconstruction and/or recycling of demolished material.</p> <p>Utility shutoffs will be arranged for by the State's demolition facilitator consultant and paid by the Land Bank. Permits will be obtained through the State of Michigan Department of Energy, Labor and Economic Growth and paid by the State.</p> <p>Some structures will be treated as "ordered demolitions" since their condition prohibits safe entry. Others will be tested and abated by others prior to demolition. NESHAP compliance is mandatory.</p> <p>Prospective demolition contractors must complete an attached qualifications questionnaire. This questionnaire will be reviewed by an Ad-Hoc Selection Committee and proposals will be requested from contractors with sufficient qualifications and experience at similar work.</p> <p>The State will enter into up to five contracts. Each contract will be made on the basis of a proposal for fifty (50) residential parcels. Additional residential structures will be awarded at the established unit price up to an upper limit of \$500,000. Depending on contractor performance, the contract will be amended to a new upper limit when the \$500,000 limit is reached.</p>			
SPECIAL WORKING CONDITIONS: none			
DESIRED SCHEDULE OF WORK: June 2009-September 2010			
LOCATION OF WORK AREAS: Detroit, Wayne County, Flint, Saginaw and other various locations.			

REFERENCE STANDARDS: This project will comply with all codes, standards, regulations, and workers' safety rules that are administered by federal agencies (EPA, OSHA, and DOT), state agencies (DEQ, MIOSHA, DNR, and DCH), and any other local regulations and standards that may apply.

This form is required to be a part of the professional service contract. (Authority: 1984 PA 431)

Attachment(s)

SECTION 00420 DEMOLITION CONTRACTOR QUALIFICATIONS QUESTIONNAIRE

PROFESSIONAL: DMB Facilities Administration Design and Construction Division 2 nd Floor, Stevens T. Mason Building PO Box 30026 530 West Allegan Street Lansing, Michigan 48909		WORK: Department of Labor and Economic Growth, Michigan Land Bank Fast Track Authority (MLBFTA) Demolition of MLBFTA Properties, Various Locations
QUESTIONNAIRE	SUBMITTED BY: _____	FILE NO: 641/09317.IJH

ARTICLE 1 ORGANIZATION

1.1. Name of Organization: _____

1.2. Address of Organization: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____ Website (If available): _____

Date of organization (or incorporation) _____ State of incorporation _____ (IRS) EIN _____

Title and name of Principals (President, Vice-Presidents, Secretary and Treasurer, if a corporation; partners, if a partnership)

1.3 Is your organization's principal place of business maintained in the State of Michigan? ____

If your organization maintains its principal place of business outside the State, attach a copy of the Certificate of Authority which your organization procured in accordance with MCL 450.2011.

1.4. Provide the name, address, telephone number and birthdate of all present or former executive employee, officer, director, shareholder (owning twenty percent (20%) or more of the outstanding shares), partner, or owner of your organization or of any such related or affiliated entity

If your organization, any business entity related to or affiliated with your organization, or any present or former executive employee, officer, director, shareholder (owning twenty percent (20%) or more of the outstanding shares), partner, or owner of your organization or of any such related or affiliated entity has ever been convicted of a felony, or has felony charges pending, in any state within the last three (3) years from the date of Bid opening, furnish with this Bidder's Questionnaire all material facts relating to any such felony conviction or such pending felony charges. If any such individuals have been convicted of a felony, the Bidder's proposal will not be considered.

1.5 Provide a copy of your firm's Certificate of Awardability . Bidders must comply with the State's equal opportunity employment laws. Bid packages for projects with a base bid of \$100,000 or more must include a Certificate of Awardability from the Michigan Department of Civil Rights (DCR). This certificate is available from:

Michigan Department of Civil Rights
 Contract Compliance Team
 Cadillac Place
 3054 W. Grand Boulevard, Suite 3-600
 Detroit, MI 48202,
 Tel (313) 456-3811

Fax: (313) 456-3826

Due to recent processing improvements by the Department of Management & Budget (DMB) and the Department of Civil Rights (DCR) concerning Certificates of Awardability, consideration may be given to bids received while final certification is still pending. In order to qualify for such consideration a bidder who does not possess a Certificate of Awardability valid through the bid opening date must do each of the following:

Notify MDCR in writing, by sending a facsimile (fax) to 313-456-3826 at least 3 business days prior to the bid opening date, that the bidder has submitted a bid contingent upon a pending Certificate of Awardability. Notice shall indicate the contract bid upon, the scheduled bid opening date, the name and phone number(s) of a contact person able to speak for the bidder on the subject of awardability, and the date on which the bidder's application for Certificate of Awardability was initially filed.

Ensure that all information required on the application for Certificate of Awardability was provided to MDCR.

ARTICLE 2 SPECIALTY CONTRACTOR LICENSES

2.1 Does your organization hold valid licenses covering specialty classifications of Work that your organization itself intends to perform and for which a specific specialty license is required by any Political Subdivision with jurisdiction over the Work _____?

2.2 If so, attach a list with all licenses by number and classification; state the name of the organization holding the license, the renewal date of each license, whether each license is active, and attach a copy of each license.

ARTICLE 3 EXPERIENCE

3.1. What is the general character of the work performed by your organization? _____

How many years of experience in construction work similar in character and scope to the Work under the Bidding Documents has your organization had: (a) as a General Contractor? _____;

(b) as a Subcontractor? _____.

3.2. Attach a list of all public contracts or subcontracts under public contracts that your organization has performed within the last five (5) years which are similar in character and scope to the Work under the Bidding Documents (using the forms in the "References Attachment" provided with this Questionnaire). If the contract or subcontract referenced is not substantially completed, furnish the percent complete for that contract or subcontract.

3.3. Within the last five (5) years, has your organization failed to complete a contract or subcontract awarded to it? _____

If so, attach a list for each contract or subcontract, state when, where and why.

Within the last five (5) years, has any officer or partner of your organization been an officer or partner of another organization that failed to complete a contract or subcontract? _____.

If so, for each contract or subcontract, state the name of each officer or partner and the name of the organization and owner(s), and the reasons why the contract or subcontract was not completed.

ARTICLE 4 ADDITIONAL QUALIFICATIONS

4.1. Will you subcontract any part of the Work covered by the intended Subagreement? _____ .

If so, which parts of the Work covered by the intended Subagreement do you intend to subcontract to a lower tier Subcontractor?

4.2 Attach your deconstruction and recycling plan for any usable materials or component that result from the demolitions. List the material you will recycle and for each material provide a thorough recycling plan, including how you will separate, handle, store and manage the material.

4.3. Attach a list of construction equipment and machinery your organization intends to use in the execution of the Work.

4.4. Does your organization rent or lease equipment or facilities from other affiliate organizations? _____.

If so, state the name of the affiliate organization(s):

4.5. Bank line of credit available? \$_____.

4.6. Will your organization be the only named Principal for the Performance Bond and Payment Bond? _____

If not, please identify the organization who will be named as Principal or Co-Principal on Section 00610 Performance Bond and Section 00620 Payment Bond: _____.

Also, state how such organization relates to the Bidder _____

ARTICLE 5 REFERENCES (additional references to be made in an attachment)

5.1. Trade references (Minimum of three (3)):

5.2. Bank references:

5.3. Insurance:

These statements, submittals, checklist and attachments will be taken into consideration when awarding the contract(s) for demolition.

The undersigned Contractor _____ certifies that all statements and answers made to the interrogatories in this Section 00420 Questionnaire are current, accurate and complete as of the date stated below. (Note: Attachments shall be fastened at the end of this Section).

Signed by: _____ Name _____ Title _____

on this _____ day of _____, 20_____.

PROFESSIONAL: Facilities Administration, Design and Construction Division
 2nd Floor, Stevens T. Mason Building
 PO Box 30026
 530 West Allegan Street
 Lansing, Michigan 48909

WORK Department of Energy, Labor and Economic Growth,
 Michigan Land Bank Fast Track Authority (MLBFTA)
 Demolition of MLBFTA Properties, Various Locations

QUALIFICATIONS CHECKLIST

SUBMITTED BY: _____

FILE NO: 641/09317.IJH

TOPIC	YES	NO	Number of Years Experience	Number of Projects	Highest Single Project Cost	Average Project Cost
LICENSURE						
Do you have a residential builder license or a house-wrecker maintenance and alteration contractor's license? Attach a copy.						
Do you have an asbestos license? Attach a copy.						
EXPERIENCE						
Identify the number of successful residential demolitions your firm has performed in Wayne and Oakland counties within the past two (2) years. Provide references and contact information.						
Has your company performed Ordered Demolitions?						
Has your company handled and transported Class II Landfill material?						
Is your company familiar with, aware of, and has applied the requirements of the National Emission Standards for hazardous Air Pollutants (NESHAP)?						
Does your company have experience with excavation and backfill?						
Does your company have experience with commercial demolitions?						

TOPIC	YES	NO	Number of Years Experience	Number of Projects	Highest Single Project Cost	Average Project Cost
PERSONNEL AND SAFETY						
Is your staff experienced in NESHAP activities?						
Are your personnel experienced and trained in the proper use of safety equipment?						
Are your personnel knowledgeable of current EPA and OSHA Safety (29CFR 1910)?						
Do you have a Health and Safety Plan?						
Provide a detailed list of all safety violations that have been issued to your firm during the past 24 months. Please be sure to include all noncompliance notices in any way related to safety issues, all stop work orders in any way related to safety issues, and all MIOSHA citations and complaints. Please provide copies, if available.						
Have you ever been terminated from a State of Michigan contract? If yes, attach explanation.						
Do you have any pending litigation?						
Do you have a current Certificate of Awardability?						

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REFERENCES ATTACHMENT	SUBMITTED BY: _____	FILE NO: 641/09317.IJH

REFERENCE # _____

Public Owner: _____
 Project/Contract Name: _____
 Location of Project/Contract: _____
 Contract Price: _____
 Project/Contract Started: _____ Completed: _____
 Owner's Representative (Name and Telephone):

 Demolition Contractor's Representative Name and Telephone:

 Scope of Project/Contract: _____

REFERENCE # _____

Public Owner: _____
 Project/Contract Name: _____
 Location of Project/Contract: _____
 Contract Price: _____
 Project/Contract Started: _____ Completed: _____
 Owner's Representative (Name and Telephone):

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 Project/Contract Started: _____ Completed: _____
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 Demolition Contractor's Representative Name and Telephone:

 Scope of Project/Contract: _____