

**TOWN OF HILTON HEAD ISLAND**  
**REQUEST FOR QUALIFICATIONS – STRUCTURAL ENGINEERING SERVICES**  
**(RFQ 2016-0008)**

The Town of Hilton Head Island (Town) is soliciting responses from qualified firms licensed in South Carolina to provide Structural Engineering services for the Town. The Town will award a contract to the most qualified respondent to perform these services on an as required basis for an initial period of three years with the option to extend the contract two additional years.

Sealed responses are due no later than 2:00 PM on April 26, 2016. One hard copy of your response along with a CD containing a digital version (PDF format) shall be hand carried or delivered by traceable means to the following address:

Town of Hilton Head Island  
Attn: Jennifer Lyle, Assistant Town Engineer  
Structural Engineering Services RFQ 2016-0008  
1 Town Center Court  
Hilton Head Island, SC 29928

**ADDITIONAL INFORMATION**

Anticipated services and tasks may include, but are not limited to, the following:

- Forensic Engineering Studies
- Structural Design
- Condition Assessment
- Evaluations and Reports
- Structural Rehabilitation
- Failure Investigation
- Specialized Testing
- Construction Engineering and Observation
- Structural Inspections of Bridges or Traffic Signal Mast Arms
- Design Recommendations and Technical Specifications
- All work must be certified by a Professional Engineer registered in South Carolina.
- The selected firm shall submit deliverables to the Town in both hardcopy (signed, sealed, dated) and digital format. The digital format of all documents shall be prepared with software compatible with the Town (Microsoft Office, AutoCAD).

**SUBMISSION QUALIFICATIONS**

All responses shall be mailed or hand delivered in sealed envelopes, identified as “Structural Engineering Services RFQ 2016-0008” to Jennifer Lyle, Assistant Town Engineer, on or before the due date indicated above. Responses received after this time or date shall not be considered. The Town of Hilton Head Island, by way of this RFQ, does not commit itself to award a contract or pay any costs incurred in the preparation of your response. The Town further reserves the right to accept or reject any or all responses received, to negotiate with all qualified firms, and to cancel

the entire RFQ solicitation.

The responses and all information submitted shall be treated as privy information. Names of responding firms shall be released to the public on the due date.

For information concerning this request for qualifications, please contact Jennifer Lyle at (843) 341-4779 or at [JenniferL@hiltonheadislandsc.gov](mailto:JenniferL@hiltonheadislandsc.gov).

## RESPONSE FORMAT

Complete the following questionnaire providing responses that are self-explanatory and designed in a manner to provide the Town with a straightforward presentation of the firm's capabilities and qualifications. **The format shall address and explain in detail the proposal response to each requirement of the RFQ.** The firm is encouraged to submit, for the Town's review, any additional information pertinent to the contract.

## MINIMUM REQUIREMENTS FOR RESPONSES

**Reponses must address and meet the following minimum qualifications.** Reponses not meeting these requirements shall not be considered responsive to this RFQ and shall not be considered for award.

- Qualifications, abilities and experience of personnel to be assigned to this contract:
  - Provide an organizational chart for the work on this contract with a name and role for each project team member;
  - A resume for each team member to be assigned to this contract;
  - Hourly billing rates for each team member to be assigned to this contract;
  - The office location for each team member to be assigned to this contract.
- Summary of technical capabilities related to the bulleted tasks and services above;
- Identify any unique qualifications, tools, equipment, software, or methodologies to be employed under this contract.
- Identify any other key individuals and technical support personnel who will work on Town projects (provide resume for same)
- Nature, Comparability, Quantity and Quality of Experience on previously completed, similar projects / contracts within the last five years. Similar projects would consist of the bulleted services listed above as anticipated services, preferably related to infrastructure work, as a sub or prime contractor, in coastal areas similar to Hilton Head Island (HHI).
  - State the total number of similar projects and for each provide whether your firm was the prime or a sub contractor;
  - Dollar amount of the contract;
  - Date of the contract completion, the type(s) and quantity of work;
  - Client reference (name, telephone number and e-mail address), location of the contract work (highlight HHI work)
- Base of primary operations (address) and number of years at this location
- Local Experience (HHI / Beaufort County) – list all similar projects performed on HHI or in Beaufort county (project name, year, location)

- Any additional related information deemed pertinent.

### EVALUATION FACTORS

All qualified responses shall be reviewed and evaluated by a selection committee of Town Staff. The response shall be evaluated using the following criteria:

- |           |  |
|-----------|--|
| 40 Points | Nature/Comparability/Quality of previously completed contracts / projects of similar scope |
| 50 Points | Qualifications/abilities/experience of personnel   |
| 10 Points | Project team location and local experience (in HHI or Beaufort County)                     |

### AWARD OF A CONTRACT

The selection committee will rank all firms utilizing the aforementioned criteria. The Town will conduct interviews with those firms determined to be susceptible for award. At the conclusion of these oral interviews, the selection committee will forward a recommendation to the Town Manger requesting authorization to enter into negotiations with the most qualified respondent(s). The selected firm(s) will be given written notification of being selected by the Town.

The Town reserves the right to enter into contract negotiations with more than one respondent and enact multiple contracts if deemed in the best interest of the Town. Therefore, this work may be awarded in whole or in part at the sole discretion of the Town. The Town will negotiate and execute a contract with the selected firm(s) prior to beginning actual services. Should contract negotiations fail, the Town will negotiate with one of the other highly ranked firms. The contract will comply with applicable laws and standard provisions and in general contain the following terms:

- Detailed scope of services;
- Hourly Rates and Fee schedule, itemized by tasks;
- Job Order procedures;
- Not-to-exceed contract amount.

The Town and firm(s) may mutually agree to amend the contract to include additional services, which may be required as a result of unforeseen circumstances. The selected firm(s) will not have exclusive rights to provide services for the Town.

### GOVERNING LAW

The firm must comply with the laws of the State of South Carolina and the ordinances of the Town of Hilton Head Island, a municipal corporation organized and existing under the laws of the State of South Carolina.

### AFFIRMATIVE ACTION

The firm shall take affirmative action in complying with all state and federal requirements concerning fair employment, and the treatment of all employees, without regard to, or discrimination by reason of race, color, religion, sex, national origin, or physical handicap.

### INSURANCE

The firm shall maintain, throughout the performance of the contract and its obligations, a policy of Worker's Compensation insurance with such limits as may be required by law. It shall also maintain a policy or policies for both general liability and professional liability (errors and omissions) insurance. The general liability policy shall insure against liability for injury and death of persons, and damage and destruction of property. Such general liability insurance shall meet or exceed minimum limits as required by Town, County, State and Federal standards. Professional liability coverage shall be at a level set by the Town.

### BUSINESS LICENSE

The Consultant is required to possess a current Town of Hilton Head Island Business License. Each prime contractor shall file with the license inspector a list of subcontractors furnishing labor or materials under this contract.

### INDEMNIFICATION

The Town, its directors, agents, and employees shall be held harmless from liability from any claims, damages, and actions of any nature arising from the completion of the project, provided that such liability is not attributable to negligence of the part of the town.

### FEES, SCHEDULES, AND PROFESSIONAL CONTACT

Upon selection of the most qualified firm, negotiations to develop a contract based on scope and fee shall begin.

## **INSTRUCTIONS**

### **INSTRUCTIONS FOR COMPLETION OF THE RFQ QUESTIONNAIRE FORM ARE AS FOLLOWS:**

**Please read the enclosed Questionnaire carefully. “The firm” referred to in this questionnaire is the business entity offering qualifications for the referenced project for the Town. DO NOT leave any questions unanswered, nor OMIT any required signatures. If any questions are left unanswered or any required signatures are omitted, the Questionnaire will be returned to you for completion of those items. All questions must be answered. If there is truly a question that does not apply, please enter "Not Applicable" or "N/A".**

**In the event additional space is required to complete an answer, you may supplement with additional pages that shall be securely attached to this questionnaire. If information is provided on other typed or preprinted sheets, they must include all the requested information, be properly referenced, and securely attached to this questionnaire. Said supplements or attachments shall be considered a part of this Affidavit and its oath.**

**TOWN OF HILTON HEAD ISLAND**  
**REQUEST FOR QUALIFICATIONS FOR**

***UNSPECIFIED STRUCTURAL ENGINEERING SERVICES***

NOTE: In order for the response to be considered, it is necessary for an authorized individual of the firm, and on behalf of the firm, to furnish the information requested below.

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

Submitted To: Town of Hilton Head Island. ATTN: Engineering Division, One Town Center Court, Hilton Head Island, SC 29928.

Submitted By:

\_\_\_\_\_  
(Complete Firm Name: Must be the same as the name that will appear on Proposals)

\_\_\_\_\_  
(Complete Street Address and Suite Number, if applicable)

\_\_\_\_\_  
(P. O. Box Number, if applicable) (Zip Code for P. O. Box Number)

\_\_\_\_\_  
(City) (County) (State) (Zip Code for Street Address)

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Fax Number: (\_\_\_\_\_) \_\_\_\_\_

Federal Employer Identification Number: \_\_\_\_\_

## QUESTIONNAIRE

1. How is the firm presently organized? (I.e. Corporation, Company, Partnership, Sole Proprietorship, etc.)

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2. Date of Organization: \_\_\_\_\_

3. Organized under the Laws of which State? \_\_\_\_\_

4. Date Commenced Business: \_\_\_\_\_

5. If the firm is a corporation, is it registered with the Secretary of State, to do business in South Carolina? \_\_\_\_\_ If yes, give date of Certificate of Existence or Authority.

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6. If the firm is a corporation not organized under the laws of South Carolina, provide the complete name and address of its Registered Agent in South Carolina.

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7. Is the firm licensed with South Carolina State Board of Registration for Professional Engineers and Surveyors? \_\_\_\_\_ License Number: \_\_\_\_\_

8. How many years has the firm been in business under the present name? \_\_\_\_\_

9. What is the location of the base of operations? \_\_\_\_\_

10. How many years has the firm been at this location? \_\_\_\_\_

11. How many years has the firm had Structural Engineering related services? \_\_\_\_\_

12. List the present officers of the firm and their titles:

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**13.** Indicate below the Structural Engineering experience of key individuals and technical support presently employed by the firm who will work on Town projects. Please attach resumes and an organizational chart.

<b>Individual's Name</b>	<b>License or Cert.</b>	<b>Present Position</b>	<b>Years Employed By The Firm</b>	<b>Years of Experience</b>	<b>In What Capacity</b>

**14.** Provide a summary of technical capabilities related to the anticipated services and tasks bulleted in the RFQ (add space if necessary):

- Forensic Engineering Studies
- Structural Design
- Condition Assessment
- Evaluations and Reports
- Structural Rehabilitation
- Failure Investigation
- Specialized Testing
- Construction Engineering and Observation
- Design Recommendations and Technical Specifications
- All work must be certified by a Professional Engineer registered in South Carolina.
- The selected firm shall submit deliverables to the Town in both hardcopy (signed, sealed, dated) and digital format. The digital format of all documents shall be prepared with software compatible with the Town (Microsoft Office, AutoCAD).

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15. List recently completed, similar projects/contracts preferably relating to Structural work in coastal areas, particularly Hilton Head Island and Beaufort County (add space if necessary):

Contract Amount	Project Name and Type of Work	Date Completed	Reference Name, Address, & Phone Number
1.)			
2.)			
3.)			
4.)			
5.)			
6.)			
7.)			
8.)			
9.)			
10.)			

**16. Identify any unique qualifications, abilities, tools, equipment, software, or methodologies used by the firm.**

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**17. The individuals listed below are authorized to approve, sign and/or execute on the firm's behalf, the following documents:**

Document Code Nos.:            1 - Organization's Statement of Experience and Equipment.

   2 - Proposals and Contracts

   3 - Change Order(s)/Supplemental Agreement(s)

NAME	TITLE	DOCUMENT CODE NO.

If any changes are made to this list after the preparation date of this Questionnaire, it SHALL be the sole responsibility of the Firm to submit an original certified document advising of such changes to the office to which this Questionnaire was submitted.

**18.** Has the firm, its parent or subsidiary ever been suspended, disqualified, or debarred by any Municipality, State or the Federal Government? \_\_\_\_\_ If yes, provide complete details, including when, where and why.

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**19.** Has any owner, stockholder, officer, partner, or employee(s) of the firm been suspended, disqualified, or debarred from doing business by South Carolina, any other State or the Federal Government? \_\_\_\_\_ If yes, provide complete details, including when, where and why.

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**20.** Have you or any of the individuals or entities referred to above, in the past six years, been indicted, pled guilty, pled *nolo contendere*, or been convicted of embezzlement, theft, forgery, bribery, receiving stolen property, or any other offense indicating a lack of business integrity, or business honesty which seriously and directly affects the question of present responsibility as a contractor in any jurisdiction in the United States? \_\_\_\_\_ If yes, give complete details.

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**21.** Has the firm, its subsidiaries, affiliates or parent companies ever defaulted on a contract with any Local, State or Federal Government? \_\_\_\_\_ If yes, give complete details.

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**22.** List the firm's subsidiaries, affiliates and parent companies.

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**23.** Is the firm herein offering the proposal, including owners, corporate officers or stockholders, either collectively or individually, currently suspended, disqualified or debarred from doing business with and Local, State or with the Federal Government? If so, list the agency and circumstance.

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AFFIDAVIT

\_\_\_\_\_ BEING DULY SWORN DEPOSES AND SAYS THAT HE/SHE IS AUTHORIZED TO EXECUTE THIS AFFIDAVIT FOR AND ON BEHALF OF THE APPLICANT FIRM, AND THE ANSWERS TO THE FOREGOING QUESTIONS AND ALL STATEMENTS HEREIN CONTAINED ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE.

Sworn and subscribed to before  
me on this \_\_\_\_\_ day of

\_\_\_\_\_  
(Name of Applicant Firm)

\_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
(Authorized Signature)

\_\_\_\_\_  
(Notary Public)  
(Not an Officer of the firm)

\_\_\_\_\_  
(Print or Type Name)

\_\_\_\_\_  
(Title)

AFFIX  
CORPORATE  
SEAL  
HERE

NOTICE: THE TOWN MUST BE NOTIFIED OF ANY SIGNIFICANT CHANGE IN THE INFORMATION FURNISHED IN THIS QUESTIONNAIRE WITHIN FIFTEEN (15) DAYS OF THE OCCURRENCE OF SUCH CHANGE.