

Qualification Statement SI Display Cases

George Gustav Heye Center - New York, NY Display Cases SI Solicitation #. SOL09AA0030

Issue Date: April 1, 2009 Due Date: May 1, 2009 3:00pm

Mailing address: OFFICE OF CONTRACTING SMITHSONIAN INSTITUTION Attn: Bill Powell PO BOX 37012, CC350, MRC1200 WASHINGTON DC 20013-7012 Location address (fedex or UPS): OFFICE OF CONTRACTING SMITHSONIAN INSTITUTION Attn: Bill Powell 2011 CRYSTAL DRIVE - SUITE 350 ARLINGTON VA 22202

Additional information must only be obtained by contacting: Bill Powell 202-633-7286

Completing the Qualification Statement

The Smithsonian Institution is interested in selecting the most qualified companies for the attached referenced project. The information you provide in the Qualification Statement (Statement) will be the basis for the evaluation of your company. The prequalification of case manufacturing companies is a highly competitive process. To assure your Statement is given full consideration, you must do the following:

• Completing the Qualification Statement.

- Read this package carefully to make sure you understand what is required.
- Complete the entire Statement.
- Provide your information on the attached forms or in the same format.
- Do not leave any portion of the form blank, indicate N/A if not applicable.
- The Evaluation Process. Notice Prequalification is a competitive process. The Smithsonian Institutionis interested in selecting the <u>most</u> qualified entities utilizing the information provided in Parts III and IV of the Qualification Statement. Meeting the minimum requirements established in the Qualification Statement will <u>not</u> guarantee prequalification. Only those entities that provide superior Experience/Performance and Capabilities can achieve the maximum number of points, it is those Entities that can attain "Most Qualified" status and become Prequalified. Your Statement will be evaluated by a committee appointed by the contracting officer. Include with your submission:
 - Minimum requirements as established in the evaluation criteria. If you do not meet the minimum requirements, your entity may not be considered for prequalification.
 - Comparable criteria identified in the Statement including: size, cost, type of construction. Projects listed must meet <u>all</u> portions of the established criteria to be considered as comparable.
 - Comparable Experience is more desirable than Non-Comparable Experience. Any additional Comparable Experience submitted that exceeds the minimum requirements for Comparable Experience will be counted towards the Non-Comparable Experience points.
 - Current references (name, telephone number and address) for your comparable projects as listed in your submission. If the evaluation team is unable to contact the references listed to verify experience and performance, that project may not be considered.
 - Information and example projects that best illustrate your company's capability, experience and performance to design and construct the referenced project. Photographs of comparable projects are desirable but not required.
- This Qualification Statement: consists of four (4) Parts:
 - Part I General Information
 - Part II Entity's Background
 - Part III Experience/Performance
 - Part IV Capabilities

All questions regarding this Statement should be directed to the individual(s) indicated on the cover page. Do <u>not</u> contact anyone else in the Smithsonian Institution regarding this effort since they are not likely to be familiar with the criteria, evaluation and selection of prequalified entities.

A debriefing is an opportunity for you to understand how the Smithsonian Institution assessed the strengths and weaknesses of your submission. Request for a debriefing must be in writing no later than three (3) calendar days after receiving notice of your status regarding the prequalification.

PART I - GENERAL INFORMATION

A. GENERAL

- 1. The qualification statement will be evaluated using Parts III and IV to determine entities to be placed on the prequalified list for this project.
- 2. Entities that are placed on the prequalified list will be requested to submit a Management Plan and Cost Proposal that will be project specific and include the following:
 - Narrative description of the case shop drawing, manufacturing, shipping and installation process
 - Approach for cost control, value engineering, life cycle, constructibility, etc.
 - Installation Organization chart for on-site staff with resumes and duties/responsibilities.
 - Project Management approach to reporting relationships between units/personnel with resumes.
 - Summary schedule for the project using a CPM format showing shop drawing, submittals, procurements, shipping installation etc.
 - Safety program, showing your Experience Modification Ratio (EMR) for past three years of the installation side the entity and key elements of your proposed site specific program.
 - Purchasing: Identify all self-performed and subcontracted work. Describe your approach to procurement of subcontracts.
- 3. The Smithsonian Institution will use information obtained from the Management Plan and Cost Proposal in determining best value.
- 4. Entity's may be required to present an Oral Presentation of their Management Plan/Cost Proposal.
- 5. The Smithsonian Institution intends to issue a Fixed Price contract for fabrication and installation of the display cases as described in the Project Description.
- 6. Final execution of the contract will be subject to approval of funding.
- 7. Entities not selected for the pre-qualified list will be notified within sixty (60) days from the due date of this request.
- 8. Submit one (1) original and three (3) copies of the statement in separate 3-ring binders. <u>The</u> <u>Statement should be indexed into sections and tabbed as indicated in each requirement of this</u> <u>package as follows:</u>
 - Tab No. 1 Entity's Background
 - Tab No. 2 Judgments, Claims, and Lawsuits
 - Tab No. 3 Suspension or Debarment
 - Tab No. 4 Certification and Affirmation
 - Tab No. 5 Comparable Experience/Performance
 - Tab No. 6 Non-Comparable (Other) Experience/Performance
 - Tab No. 7 Organizational Statement
 - Tab No. 8 Safety, EMR (Experience Modification Ratio)
 - Tab No. 9. Backlog
 - Tab No. 10 Audited Financial Statements
 - Tab No. 11 Bonding Information
 - Tab No. 12 Banking Reference
- 9. Statements will not be maintained or returned. Entities will not be reimbursed for any expense(s) incurred in developing their Statement.

PART I - GENERAL INFORMATION (continued)

B. PROJECT DESCRIPTION

- 1. **Project Description**: The fabrication, delivery and installation of museum-quality metal and glass exhibit cases for a permanent exhibit at the George Gustav Heye Center a historic building in New York, NY. The exhibit, entitled "Infinity of Nations", will contain almost 700 objects from the museum's collection and will occupy an exhibit space of approximately 6,500 square feet within the museum. The anticipated completion date for casework installation is August 2010. The project will include a prototype phase of shop drawings, partial fabrication and testing prior to the manufacturing of final display cases. Other project elements include in-case lighting and security.
- 2. All areas described are approximate; specific areas will be denoted within the solicitation documents.
- 3. Estimated cost range is between <u>\$1,900,000</u> and <u>\$2,300,000</u>.

C. MINIMUM ENTITY PERFORMANCE REQUIREMENTS

- 1. Five (5) years experience as a Museum Case building entity.
- Completion or ongoing of a minimum of four (4) comparable projects within the past five (5) years, one of which must be completed. For this project, comparable projects are defined as museum cases manufactured and installed for an accredited museum with value of greater than \$1,000,000.00. The comparable projects must include complex systems including lighting, security and anchoring methods and must meet current environmental and museum conservation standards.
- 3. Projects constructed for the direct use of the entity(s) submitting the Statement will not be considered as a comparable project.

PART I - GENERAL INFORMATION (continued)

D. EVALUATION PROCEDURES

A <u>fully</u> completed Qualification Statement Package (Parts III and IV) will be considered the entity's Experience/Performance and Capabilities and will be evaluated solely to determine if the entity is to be prequalified.

The Evaluation Team (ET) will evaluate entities submitting qualification statements to ensure that the entity's experience and resources are adequate to provide a high level of excellence in the execution of the project. Each member will individually evaluate each Qualification Statement. The results will be recorded on a matrix using the points earned for each area; these points will determine the final overall ranking of the submissions. Only those entities demonstrating that they satisfy the stated minimum requirements and show a performance history of having the experience and capacity to successfully accomplish the proposed project will be prequalified. Experience as a "team" earns higher points than experience by individual members of the team only. Entities only meeting the minimum requirements will not receive the maximum points allowed.

Once an entity has been prequalified, the parties that comprise that entity can not be changed without the written approval of the contracting officer.

E. METHOD AND DATE OF SUBMITTAL

The completed Qualification Statement containing no more than a maximum of 50 pages <u>should</u> be delivered via one of the many services provided by the Smithsonian Institution or hand delivered to:

Mailing address:	Location address (FedEx, UPS, or hand delivery):
OFFICE OF CONTRACTING	OFFICE OF CONTRACTING
SMITHSONIAN INSTITUTION	SMITHSONIAN INSTITUTION
Attn: Bill Powell	Attn: Bill Powell
PO BOX 37012, CC350, MRC1200	2011 CRYSTAL DRIVE - SUITE 350
Washington DC 20013-7012	Arlington VA 22202

Statements must be received at the above address no later than May 1, 2009 3:00PM.

Identify your submission by including the following information on the outside of your package.

Entity's Name: Qualification No.: SOL09AA0030 Location: George Gustav Heye Center - New York, NY Project: Display Cases Due Date: May 1, 2009 3:00PM

PART II - ENTITY'S BACKGROUND (Submit under Tab 1.)

A.	Entity Name:					
	Street Address:					
	City/State/Zip:					
В.	Identification of two (2) contact people within the entity:					
	Name Title Phone Number Email Address					
C.	Entity making this submittal:					
	Parent Company Subsidiary Division Branch Office Other					
D.	Type of Entity:					
	Corporation Partnership Sole Proprietorship Joint Venture					
	Other					
E.	Year Entity was established:					
F.	Name, address, and telephone number of parent company (enter N/A if not applicable).					
G.	All former company names (enter N/A if not applicable).					
H.	Is your entity recognized as a Minority Business Enterprise (MBE), Women Owned Business (WBE), or Small Business Enterprise (SBE)?					
	SBE: no, yes; MBE: no, yes; WBE: no, yes;					

PART II - ENTITY'S BACKGROUND (continued)

- I. Of your total subcontracting volume, what is the actual average percentage awarded to: MBE: ____%; WBE: ____%; SBE: ____% over the last five (5) years?
- J. Joint Venture: If this Qualification Statement is being presented by a Joint Venture, please indicate the participation of each Joint Venture. If not a Joint Venture, indicate Not Applicable (N/A).

NAME OF JOINT	TYPE OF	PERCENTAGE OF	PERCENTAGE
VENTURE	PARTICIPATION	FINANCIAL	OPERATIONAL
PARTNER		PARTICIPATION	PARTICIPATION

K. Judgments, Claims, and Lawsuits

Are there any judgments, claims, and/or lawsuits pending or outstanding against or involving entity or partners comprising your entity? No ____, Yes ____. If "Yes," submit details of all judgments or claims against either parent office or division/branch that will be responsible for the accomplishment of this project on a separate sheet under Tab 2.

L. Key Personnel: List officers, Partners and/or Owners

NAME	POSITION OR TITLE IN THE FIRM	NUMBER OF YEARS WITH THE FIRM	YEARS OF EXPERIENCE

M. Is your entity or partners comprising your entity under suspension or debarment by any Federal, state or local agency or been terminated on any past projects?

No ____, Yes ____. If "Yes," submit details on a separate sheet and submit under Tab 3.

PART II - ENTITY'S BACKGROUND (continued)

N. Affirmation: I ______, hereby certify that I am the authorized representative of the entity submitting this Qualification Statement, and that the following statements are true to the best of my knowledge, information, and belief:

I affirm that neither the entity, nor any officer, controlling shareholder, partner, or principal, nor any other person substantially involved in the contracting activities of the entity has in the past five (5) years:

- (1) Been convicted under state or Federal statutes of a criminal offense incident to obtaining or attempting to obtain or performing a public or private contract.
- (2) Been convicted under state or Federal statutes of fraud, embezzlement, theft, forgery, falsification or destruction of records, or receiving stolen property.
- (3) Been found civil liable under state or Federal antitrust or other statutes for acts or omissions in connection with submission of bids or proposals for or performance of a public or private contract.
- (4) Been criminally convicted of any violation of a state or Federal antitrust statute.
- (5) Been convicted under the provisions of Title 18 of the United States Code for violation of the Racketeer Influence and Corrupt Organization Act, 18 USC, Section 1961 et seq. or the Mail Fraud Act, 18 USC, Section 1341 et seq., for acts arising out of the submission of Bids or Proposals for a public or private contract.
- (6) Been criminally convicted of conspiracy to commit any act or omission that would constitute grounds for conviction or liability under any statute described in paragraphs (10), (2), (4), or (5) above; or
- (7) Admitted in writing or under oath, during the course of an official investigation, or other proceeding, acts or omissions that would constitute grounds for conviction of liability under any statute described above.
- (8) I certify that I have read and understand the instructions for completing the Qualification Statement and if I am unable to make the above Affirmation, I will provide an explanation as to why not on a separate sheet and submit under Tab 4.

Name (Printed)

Date

Signature

Title

Entity Name

PART III – EXPERIENCE/PERFORMANCE – (Scoring – Maximum 65 Points)

COMPARABLE EXPERIENCE (Scoring – maximum 45 points) - List a minimum of four (4) comparable Museum case projects (as defined in Part I General Information, Section C) completed or in progress during the past five (5) years. Attach more sheets as needed, using this format. Submit under Tab 5. Do not include more than ten (10) projects.

Firm's office or branch that manage	ged this project:	
Project Name:	City	State Zip
Project Size (SF):	Contract Completion Date	
Contract Type: GMP, D/B	_, Fixed Price, Other, If Othe	r, Describe
Orig. Contract Amount: \$	Final Contract Amount: \$_	% Change:*
	Actual Contract Duration time or Value increased by more th	
Has this project received any awa	ards (Design, Quality, Safety or other	: Yes No
If yes, explain:		
can not be contacted, this project	onsibility to assure that the telephone may not count as a comparable.) ct Manager:	
Telephone:	Email Address:	
Project Description:		

PART III – EXPERIENCE/PERFORMANCE – (continued)

Non-Comparable Experience (Scoring - maximum 20 points) - Submit examples of non-comparable projects that best demonstrates your experience in Case Construction, listing a minimum of 2 and a maximum of 10 projects. Attach more sheets as needed, using this format. Submit under Tab 6. Firm's office or branch that managed this project: Project Name: _____ City _____ State ____ Zip _____ Project Size (SF): Contract Completion Date Contract Type: GMP ____, D/B ____, Fixed Price ____, Other ____, If Other, Describe_____ Orig. Contract Amount: \$_____ Final Contract Amount: \$_____ % Change: ____* Orig. Contract Duration ______ Actual Contract Duration ______ % Change: ____* * If either Contract Completion time or Value increased by more than 5% attach an explanation. Has this project received any awards (Design, Quality, Safety or other): Yes _____ No _____ If yes, explain: _____ <u>Client Reference for Construction:</u> (it is your responsibility to assure that the telephone number is correct. If your reference can not be contacted, this project may not count as a comparable.) Owner's Representative or Project Manager: Telephone: _____ Email Address: _____ Project Description : _____

PART IV - CAPABILITIES (Scoring - maximum 35 points)

A. Organization (Scoring - maximum 25 points): (Include in your submittal under Tab 7)

Primary Evaluation Criteria - Attach a statement describing:

- Your company, with an organization chart. The statement and organization chart must clearly identify specific organizational elements and/or member companies that will be participating in the project.
- Location of units
- Reporting relationships and functions to be performed by each unit
- Successful past working relationships
- Key executive who will have overall responsibility
- Key management personnel to be assigned to the project
- Resumes of key personnel (w/ specific comparable project experience)
- Professional staffing levels
- Describe expertise, capability, structure, and resources to adequately handle shop drawings, prototypes, fabrication, assembly, installation and testing
- Describe company resources that would be available for the project.
- Describe logistic support for shipping and expediting delivery of cases. Special consideration should be given to delivery to an historic building with restrictive circulation and clearances.
- Describe capability to expedite on-site staging, assembly and installation.
- Provide an employment profile for the company showing: total employees, total permanent employees, and total professionals in each major category. <u>Brief</u> resumes of these individuals shall be attached.
- •

B. Safety (Scoring - maximum 10 points):

Information shall be furnished on your insurance carrier's letterhead. (Submit under Tab 8) Provide your firm's Experience Modification Ratio (EMR) _____. If your EMR is above 1.0, provide a written explanation.

If your firm is a joint venture and has no prior safety record, than the EMR of the majority partner shall be provided.

C. Backlog (Pass/Fail): Submit the information using the format shown below under Tab 9.

Provide a statement of total entity backlog, currently and for the past two years. Include only those contracts for which the entity has responsibilities and liabilities.

		А	В	A LESS B
	# OF ACTIVE	TOTAL ORIGINAL	TOTAL VALUE	BALANCE TO
	CONTRACTS	VALUE OF ACTIVE	COMPLETED FOR	COMPLETE (\$)
		CONTRACTS	ACTIVE CONTRACTS	[i.e. BACKLOG]
CURRENTLY				
ONE YEAR				
AGO				
TWO YEARS				
AGO				

D. Financial Capability (Pass/Fail): Inclusion of audited and/or interim financial statement; total bonding capability; written bank references; and determination that your design/build entity possesses sufficient resources to successfully complete this project.

Provide your Dun and Bradstreet Number (DUNS #): _____

PART IV - CAPABILITIES (continued)

Attach your most recent financial statements including the Balance Sheet, Statement of Income, Statement of Cash Flows, and notes to the financial statements. These statements must be AUDITED by an independent, licensed CPA or CPA firm for the offeror's previous two (2) fiscal years. Financial statements must be for the entity making the submittal, not the parent company, unless a guarantee of the subsidiary's obligations is provided. **Provide the audited financial statements under Tab 10**. Failure to submit audited financial statements may result in the disqualification of your submittal because a determination of financial responsibility can NOT be made without this information. In addition, if the firm's last fiscal year-end precedes the date of this submittal by more than six (6) months, complete the following "Contractor's Interim Financial Data" form for the company's most recent completed quarterly fiscal period. If the entity's most recent fiscal year-end fell within the last six months; completion of this form is not required.

Offeror's Interim Financial Data For the month period ending,				
ASSETS	LIABILITIES & NET	LIABILITIES & NET WORTH		
Current Assets	Current Liabiliti	es		
CASH	NOTES PAYABLE			
ACCOUNTS RECEIVABLE	ACCOUNTS PAYABLE			
CONTRACTS (COMPLETED)	ACCRUED EXPENSES			
CONTRACTS (IN PROGRESS)	BILLINGS IN EXCESS OF COST			
OTHER RECEIVABLES	DEFERRED TAXES			
LESS: RESERVE FOR UNCOL.	OTHER CURRENT LIABILITIES			
NOTES RECEIVABLE	TOTAL CURRENT LIABILITIES			
COSTS IN EXCESS OF BILLING				
INVENTORIES				
MARKETABLE SECURITIES	Long Term Liabilities			
	NOTES PAYABLE			
OTHER CURRENT ASSETS	DEFERRED TAXES			
	OTHER L/T LIABILITIES			
TOTAL CURRENT ASSETS	TOTAL L/T LIABILITIES			
Fixed Assets		Net Worth		
LAND	CAPITAL STOCK			
BUILDINGS	ADDITIONAL PAID-IN			
EQUIPMENT	RETAINED EARNINGS			
FURNITURE & FIXTURES	TREASURY STOCK			
LESS: ACCUM. DEPREC.	OTHER ADJUSTMENTS			
OTHER FIXED ASSETS	TOTAL NET WORTH			
TOTAL FIXED ASSETS				
	TOTAL LIAB+ NET WORTH			
Other Assets				
LIFE INSURANCE (CASH VALUE)	EARNED REVENUES+INCOME			
LONG TERM INVESTMENTS	COST OF REVENUES EARNED			
OTHER ASSETS	GROSS INCOME			
TOTAL FIXED ASSETS	GENERAL & ADMIN, EXPENSE			
TOTAL ASSETS				

PART IV – CAPABILITIES (continued)

- E. Bonding (Pass/Fail): Please attach a letter from one or more bonding companies giving your <u>bonding</u> <u>capacity with them</u> and the amount of <u>bonding outstanding</u>, and stating how long they have been providing bonds to your entity. Submit the bonding company's letter under Tab 11.
- F. Banking (Pass/Fail): Please attach a letter from a bank stating the following:
 - How long has the entity been with your bank.
 - Average balance (in general terms).
 - Extent of credit available and terms of availability.
 - The bank's rating of the entity as a customer.
 - Name and telephone number and/or email address of person(s) at bank who can be contacted by SI evaluators.
 - Submit the bank reference under Tab 12.