December 12, 2012

RE: Bid Title: Re-Roof Leon County Jail Annex
Bid No: BC-12-20-12-22
Opening Date: December 20, 2012 at 2:00 PM

ADDENDUM #1

Dear Vendor:

This letter serves as Addendum #1 for the above referenced project.

The following shall be added to the bid specifications:

1. The MWSBE and Non-Collusion forms are attached for your use.

2. Florida Statute 255.05 (1)(b) states that as of October 1, 2012 all Bonds must be recorded at the County Clerk Office prior to submission for a Notice to Proceed. Therefore the performance bond for this project shall require recording prior to submission.

Acknowledgment of this addendum is required as part of your bid submittal. Failure to acknowledge this addendum may result in rejection of your bid.

Should you have any questions, feel free to call me at (850) 606-1600.

Sincerely,

Don Tobin, CPPB
Purchasing and Contracting Administrator

DT

"People Focused. Performance Driven."
Respondent:

All respondents, including Minority Business Enterprises (MBEs) and Women Business Enterprises (WBEs), shall complete and submit this M/WBE Participation Plan with their proposal. Through submission of its bid/proposal, Respondent certifies, acknowledges and agrees that the Participation Level and the Good Faith Efforts herein designated are accurate and true; and, that the individual whose manual signature is on this submission is duly authorized on behalf of the respondent to make such certification.

For the purposes of MWBE participation on Leon County projects, the following definition applies:

“Certified Minority Business Enterprise (MBE) and Women Business Enterprise (WBE)” are firms certified by Leon County or the City of Tallahassee. Some firms with MBE or WBE certification by the State of Florida may be accepted under a reciprocal agreement but, those from other governmental organizations are not accepted by Leon County”

**SECTION 1 - ASPIRATIONAL TARGET FOR M/WBE PARTICIPATION**

The aspirational target for this project is:

<table>
<thead>
<tr>
<th>M/WBE Classification</th>
<th>Aspirational Target(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certified Minority Business Enterprises (MBE)</td>
<td>17% of the total anticipated contract value</td>
</tr>
<tr>
<td>Certified Women Business Enterprises (WBE)</td>
<td>9%  of the total anticipated contract value</td>
</tr>
</tbody>
</table>

**SECTION 2 - GOOD FAITH EFFORT**

The following list of the good faith efforts criteria complies with Leon County’s Purchasing and Minority, Women, and Small Business Enterprise Policy. This criteria is used in the determination of whether a contractor has performed and documented good faith efforts. Also, the basis for rejecting a MWBE deemed unqualified or unacceptable by the Prime Contractor shall be documented and included in the respondent’s Good Faith Effort documentation.

1. Please identify all of the following activities that your firm has done as Good Faith Effort in order to secure MWBE participation and submit documentation of such. Failure to designate those actions you have done as “Good Faith” and provide documentation of all Good Faith Efforts completed by your firm will deem your proposal as non-responsive. Please check the appropriate boxes that apply to your good faith activities:

   - a. Advertised for participation by MWBEs in non-minority and minority publications within the Market area, including a copy of the advertisement and proof of the date(s) it appeared – or by sending correspondence, no less than
ten (10) days prior to the submission deadline, to all MWBEs referred to the respondent by the MWSBE Division for the goods and services to be subcontracted and/or supplied.

☐ b. Documented that the bidding Prime Contractor provided ample time for potential MBE and/or WBE subcontractors to respond to bid opportunities, including a chart outlining the schedule/time frame used to obtain bids from MBE and WBE Vendors as applicable to the aspirational Target.

☐ c. Contacted the MWSBE Division for a listing of available MWBEs who provide the services needed for the bid or proposal.

☐ d. Contacted MBEs and/or WBEs who provide the services needed for the bid or proposal.

☐ e. Documented follow-up telephone calls with potential M/WBE subcontractors seeking participation.

☐ f. Allowed potential M/WBE Subcontractors to review bid specifications, blueprints and all other Bid/RFP related items at no charge to the M/WBEs.

☐ g. Contacted the MWSBE Division, no less than five (5) business days prior to the Bid/RFP deadline, regarding problems the with respondent is having in achieving and/or reaching the aspirational targets.

☐ h. Other documentation indicating their Good Faith Efforts to meet the aspirational targets. Please provide details below.

___________________________________________________________________

___________________________________________________________________

___________________________________________________________________

___________________________________________________________________

2. Prime contractors will negotiate in good faith with interested MWSBE’s, not rejecting a MWSBE as unqualified or unacceptable without sound business reasons based on a through investigation of their capabilities. **The basis for rejecting any MWBE deemed unqualified or unacceptable by the Prime Contractor shall be included in the Good Faith Effort documentation.** The Prime Contractor shall not impose unrealistic conditions of performance on MWSBE’s seeking subcontracting opportunities.

3. Leon County reserves the right to request supporting documentation as evidence of good faith efforts indicated above at any time. Failure to provide supporting documentation when requested shall deem your bid/proposal as non-responsive.

**PARTICIPATION PLAN FORM continued on following pages.**
SECTION 3 - RESPONDENT’S PROPOSED MWBE PARTICIPATION

Respondent shall complete the following Table identifying each certified MWBE firm they intend to use on this project. Attach additional sheets as necessary.

<table>
<thead>
<tr>
<th>MBE and WBE Intended Utilization</th>
<th>Firm's Name (Requires Leon County or City of Tallahassee MWBE certification)</th>
<th>Firm's Location Address (Must be in Leon, Gadsden, Jefferson or Wakulla Counties, FL to be certified)</th>
<th>Firm's Telephone Number</th>
<th>Ethnic Group$^2$ (B, A, H, N, F)</th>
<th>Total Dollar Amount of MWBE Participation</th>
<th>Type of Service to Provide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minority and Women Business Enterprise(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Bid Amount $</td>
<td>Total MWBE Participation $</td>
<td>MBE Participation %</td>
<td>WBE Participation %</td>
<td>(MBE or WBE Participation $ Total Bid $)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

$^1$ Certification – Attach and submit a copy of each MBE and WBE certification with the proposal.

$^2$Ethnic Group – Use following abbreviations- for MBE’s: African American (B); Asian American (A); Hispanic American (H); and Native American (N). WBEs include Non-Minority Female (F) owned firms.
SECTION 4 - NON-MWBE SUBCONTRACTORS

Respondent shall complete the following Table identifying non-MBE’s or WBE’s subcontractors it anticipates utilizing on the project.

<table>
<thead>
<tr>
<th>Non-MBE and WBE Intended Utilization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firm's Name</td>
</tr>
<tr>
<td>a.</td>
</tr>
<tr>
<td>b.</td>
</tr>
<tr>
<td>c.</td>
</tr>
<tr>
<td>d.</td>
</tr>
<tr>
<td>e.</td>
</tr>
<tr>
<td>f.</td>
</tr>
<tr>
<td>g.</td>
</tr>
<tr>
<td>h.</td>
</tr>
<tr>
<td>i.</td>
</tr>
</tbody>
</table>
NON-COLLUSION AFFIDAVIT

The undersigned being first duly sworn as provided by law, deposes and says:

1. This Affidavit is made with the knowledge and intent that it is to be filed with the Board of County Commissioners, Leon County, Florida and that it will be relied upon by said County, in any consideration which may give to and any action it may take with respect to this Proposal.

2. The undersigned is authorized to make this Affidavit on behalf of,

______________________________________________________________
(Name of Corporation, Partnership, Individual, etc.)

a ________________________________ , formed under the laws of ________________

______________________________________________________________
(Type of Business) (State or Province)

of which he is ____________________________________________.

(Sole Owner, partner, president, etc.)

3. Neither the undersigned nor any other person, firm or corporation named in above Paragraph 2, nor anyone else to the knowledge of the undersigned, have themselves solicited or employed anyone else to solicit favorable action for this Proposal by the County, also that no head of any department or employee therein, or any officer of Leon County, Florida is directly interested therein.

4. This Proposal is genuine and not collusive or a sham; the person, firm or corporation named above in Paragraph 2 has not colluded, conspired, connived or agreed directly or indirectly with any bidder or person, firm or corporation, to put in a sham Proposal, or that such other person, firm or corporation, shall refrain from bidding, and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference with any person, firm or corporation, to fix the prices of said proposal or proposals of any other bidder; and all statements contained in the proposal or proposals described above are true; and further, neither the undersigned, nor the person, firm or corporation named above in Paragraph 3, has directly or indirectly submitted said proposal or the contents thereof, or divulged information or data relative thereto, to any association or to any member or agent thereof.

______________________________________________________________

AFFIANT’S NAME ____________ AFFIANT’S TITLE

TAKEN, SWORN AND SUBSCRIBED TO BEFORE ME this _______ Day of ______________ 20___.

Personally Known __________________________ Or Produced Identification __________________________

Type of Identification __________________________

______________________________________________________________

Notary Public

______________________________________________________________

(Print, Type or Stamp Commissioned Name of Notary Public)