



**WAYNE STATE
UNIVERSITY**

Division of Finance and Business Operations

**Procurement & Strategic Sourcing
5700 Cass Avenue, suite 4200
Detroit, Michigan 48202
(313) 577-3734
FAX (313) 577-3747**

April 19, 2024

**Addendum #3 Clarifications To
Request for Proposal
RFP A & E Specialty
dated April 1, 2024**

This Addendum must be acknowledged on Schedule D.

Please find the following questions and clarifications with regards to the above bid opportunity.

Question 1: Can the Environmental Site Assessments and ground penetrating radar portion of Category 4 be separated out as an individual category or combined into a closer related service type like Category 6, Hazmat Testing and Air Monitoring (although there is no direct link there either other than they both fall under a broader topic of Environmental)? The Material Testing and ESAs are completely different service areas that require completely different personnel and expertise.

Answer: Vendors are to bid on pre-defined categories they are able to provide services for and note exceptions any necessary. The suggestion to separate is noted but does not apply to this RFP.

Question 2: Notwithstanding the answer to Question 1, above, will the ESA work need to "be prepared under the management of a Professional Engineer..." only, as stated in the second sentence of the first paragraph in Category 4, or may it also be prepared under the management of an Environmental Professional as defined in ASTM E1527 Standard Practice for Environmental Site Assessments?

Answer: The work needs to be prepared under the management of a qualified professional for the said service.

Question 3: Communication Plan: Are you all looking for a chart or diagram with company contact info? In our experience, we just have clients send work orders to our email and we respond within a certain amount of time to schedule a site visit, and then an provide a timeline to complete the project.

Answer: We are looking for vendors contact list who will be Universities point of contact for services, as needed on projects.

Question 4: Cost of proposal preparation: This is listed as one of the required documents for submission. Is this just meant to explain the proposal as a non-reimbursible item? Or are you all seeking a breakdown of the cost to prepare a response to an RFP?

Answer: We are looking for the proposed cost of services for each of the category vendor is bidding. As applicable please note, professional/technician rate, equipment unit cost, unit cost for testing, material etc. These rates shall be locked and apply for the services vendor is bidding on for the duration of the contact.

Question 5: Company is looking over the NIGP codes provided with the request, we are interested in pursuing the following:

- 91275 – Quality Control Testing Services for Construction
- 92550 – Geological, Geotechnical, and Hydrogeologic Services
- 92508 – Environmental Engineering Services
- 92549 – Land Surveying Services including Boundary and Right of Way

Please confirm you do not have any specialty or niche tasks which fall under the codes and/or to understand if they are being used in general terms?

Answer: The terms/language is being used in general terms, please reference list of categories with description in the RFP.

Question 6: Can you please confirm whether Pollution Liability (as shown in Schedule B) is required for specialty consultants?

Answer: Yes, it is required.

Question 7: The sample Certificate of Insurance (page 19 of the RFP) has an arrow pointing to the “Scheduled” box of the Automobile Liability. Can you please confirm whether the “Scheduled” box must be checked, or if the arrow is meant to gesture to the overall category of Automobile Liability”.

Answer: Attached is a copy of Schedule B, Insurance Requirements. Sample Certificate of Liability Insurance has “red arrows” indicating information that must be supplied by vendors, please check the appropriate box.

Question 8: Can you please confirm that in order to provide commissioning services, our team must have an individual that is both a licensed Professional Engineer (PE) and Certified Building Commissioning Professional (BCxP)? Is there any flexibility, or other certifications you would accept instead, such as Qualified Commissioning Process Provider (QCxP) or Certified Commissioning Authority?

Answer: Yes. Yes, we may consider other certifications that are equivalent. I encourage you to submit qualification of individuals that you would like us to review.

All questions concerning this project must be emailed to: Robert Kuhn, Sr. Buyer, Procurement & Strategic Sourcing at 313-577-3712 Email: RFPteam3@wayne.edu by 12:00 p.m., April 18, 2024.

Do not contact the Facilities, Planning and Management Department, or other University Units, directly as this may result in disqualification of your proposal.

Thank you

*Robert Kuhn
Sr. Buyer, Purchasing
313-577-3712*

CC: Ekta Kamalia, Project Manager, Valerie Kreher

Attachments:

Schedule B - INSURANCE REQUIREMENTS

_____, at its sole expense, shall cause to be issued and maintained in full effect for the term of this agreement, insurance as set forth hereunder:

General Contractors/Construction Managers		
Projects < \$5,000,000	Workers' Compensation with Employers' Liability & Alternate Employers Endorsement	Statutory Limits & EL \$1,000,000
	Commercial General Liability	\$1,000,000 per occurrence & \$2,000,000 aggregate
	Contractors' Pollution Liability with E&O	\$5,000,000 per claim
	Professional Liability	\$2,000,000 per claim & \$4,000,000 aggregate *
	Auto Liability with Pollution & Legal Liability	\$1,000,000
	Excess Liability (umbrella)	\$2,000,000
	University Added as Additional Insured on CGL & Auto	* If we require them to have higher PL limits and we PAY for them, then the limits need to be part of an endorsement that says they're for the University

General WSU Requirements, When Not in Conflict with the Above

<u>Type of Insurance</u>	<u>Minimum Requirement</u>
1. Comprehensive General Liability	\$1,000,000 per occurrence or \$2,000,000 Aggregate
2. Comprehensive Automobile Liability (CSL)	\$1,000,000 Combined Single Limit
3. Workers' Compensation (Employers' Liability)	Statutory-Michigan \$ 100,000

Maximum Acceptable Deductibles

<u>Type of Insurance</u>	<u>Deductible</u>
Comprehensive General Liability	\$ 100,000
Comprehensive Automobile Liability	0
Workers' Compensation	0

Coverage

1. All liability policies must be written on an occurrence form of coverage.
2. Commercial General Liability (CGL) includes, but is not limited to: consumption or use of products, existence of equipment or machines on location, and contractual obligations to customers.
3. The Board of Governors of Wayne State University shall be named as an additional insured for CGL and Auto Liability, but only with respect to accidents arising out of said contract.

4. The additional insured provision shall contain a cross liability clause as follows: "The insurance afforded applies separately to each insured against whose claim is made or suit is brought, except with respects to the limits of the company's liability."
5. The insurance company for each line of insurance coverage will be reviewed and checked per the A.M. Best's Key Rating Guide. **A rating of not less than "A-" is required**

Certificates of Insurance

1. Certificates of Insurance naming Wayne State University / Office of Enterprise Risk Management & Insurance Programs (ERM) as the certificate holder and stating the minimum required coverage must be forwarded to the Office of Risk Management to be verified and authenticated with the agent and/or insurance company.
2. Certificates shall contain a statement from the insurer that, for this contract, the care, and custody or control exclusion is waived.
3. Certificates shall be issued on a ACORD form or one containing the equivalent wording, and require giving WSU a thirty (30) day written notice of cancellation or material change prior to the normal expiration of coverage.
4. Revised certificates must be forwarded to the Office of ERM thirty (30) days prior to the expiration of any insurance coverage listed on the original certificate, as follows:

Wayne State University
Office of Enterprise Risk Management & Insurance Programs (ERM)
5700 Cass Avenue, Suite 4622 AAB
Detroit, MI 48202

Specific Requirements- Individual contracts may require coverage in addition to the minimum general requirement such as, business interruption, higher limits and or blanket fidelity insurance.

Exception to the insurance requirements is to be approved, in writing, by the Office of Enterprise Risk Management & Insurance Programs (ERM). Exceptions are determined by the type and nature of the contract and the individual contractor



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No., Ext):	FAX (A/C, No.):
	E-MAIL:	
	ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Y	WSU Requires This			EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ \$2,000,000 PRODUCTS - COMPIOP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		Y	WSU Requires This			COMBINED SINGLE LIMIT (Ea accident) \$ \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WSU Requires This			<input type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER State of Michigan E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Board of Governors of Wayne State University shall be named as an additional insured, but only with respect to accidents arising out of said contract

CERTIFICATE HOLDER

CANCELLATION

Wayne State University Enterprise Risk Management & Insurance Programs 5700 Cass Avenue, Suite 4622 AAB Detroit, MI 48202	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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