

**ADDENDUM #5****TO THE:**

Plans and specifications the Construction Documents dated September 9, 2021.

---

<b>PROJECT</b>	CMHA ADMINISTRATION OFFICE RENOVATION
<b>OWNER</b>	Columbus Metropolitan Housing Authority
<b>DATE</b>	10/11/2021
<b>ARCHITECT</b>	MOODY NOLAN, INC.

---

*This addendum contains changes to the requirements of the bidding Documents, Project Manual and Construction Drawings which have been issued to date. Such changes are to be incorporated into the Construction Documents and shall apply to the work in the same meaning and force as if they had been included in the original documents. Wherever this Addendum modifies a portion of a paragraph of the Project Manual or a portion of any Drawing, the remainder of the paragraph or Drawing shall remain in force.*

---

**SPECIFICATIONS:**

1. Revise bid due date to November 11, 2021, at 11:00 AM.
  2. Reissue revised Bid Form with revised bid date.
- 

**DRAWINGS:**

1. No drawing revisions.
- 

(END OF ADDENDUM)

**ATTACHMENTS**

Bid Form



## SECTION C — BIDDING DOCUMENTS

---

### CMHA ADMINISTRATIVE OFFICE — RENOVATION —

BID DATE & TIME  
*Thursday, November 11, 2021 @ 11:00 A.M.*

### **NOTE TO CONTRACTORS**

- 1) PLEASE READ THOROUGHLY.
- 2) BID FORMS 1 THRU 9 MUST BE SUBMITTED IN YOUR BID PACKAGE.
- 3) CONTRACTOR MUST USE CMHA BID FORMS INCLUDED IN THIS PACKAGE.
- 4) ALL FORMS MUST BE COMPLETELY FILLED, SIGNED/NOTARIZED AS NEEDED.
- 5) PLEASE SUBMIT 1 ORIGINAL AND 1 COPY.
- 6) ALL PAGES MUST BE PUT IN ORDER.
- 7) ALL PAGES MUST BE STAPLED OR BOUND OR PUT IN A 3-RING BINDER.

- Contract will be awarded to the **BEST** bidder submitting the **LOWEST** bid.
- Please refer to Section B, Part III, Page B-14, and Checklists Section B, Part IV, A, B, C & D, Page B-17 to B-21.
- **NOTE TO ALL CONTRACTORS**  
Contract award is contingent on Columbus Metropolitan Housing Authority Board of Commissioners approval.

**SECTION C — BIDDING DOCUMENTS**

**PROJECT & BIDDER INFORMATION**

ALL CONTRACTORS MUST COMPLETE AS NOTED

**PROJECT INFORMATION**

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project Scope of Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Bid Date & Time: \_\_\_\_\_  
\_\_\_\_\_

Bid Location: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b><u>BIDDER INFORMATION</u></b>	
Company Name:	_____
Address:	_____ _____
Authorized Representative's Name:	_____
Tel. #:	_____ Fax #: _____
Email:	_____
Company is (check all that apply)	<input type="checkbox"/> MBE <input type="checkbox"/> Section 3 <input type="checkbox"/> FBE

**SECTION C – BIDDING DOCUMENTS**

**BID FORM No. 1 – Addendum**

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

- All contractors must record and acknowledge receipt of all Addenda issued for this project.
- Insert copy of all Addenda after this page.

ADDENDUM TITLE	DATE OF ADDENDUM	NUMBER OF PAGES
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Authorized Representative’s Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative’s Title

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 2 – Bid Form

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

1. The undersigned, having familiarized themselves with the local conditions affecting the cost of the work, and with the Plans and Specifications (including Invitation for Bids, Instructions to Bidders, this Bid Form, the form of Bid Bond, the form of Non-Collusive Affidavit, the form of Contract, and the form of Payment and Performance Bond or Bonds, the General Conditions, the Special Conditions, the General Scope of Work, the Technical Specifications and the Drawings) and Addenda, if any thereto as prepared by the Columbus Metropolitan Housing Authority and on file in the office of the same, hereby proposes to furnish all material, equipment, and perform all labor and services required to construct and complete the work.

- A. CONTRACTOR BASE BID:** Bidder will complete the Work in accordance with the Contract Documents for the following price(s):

Total Material, for the sum	_____	Dollars.....	(\$ _____)
Total Labor, for the sum	_____	Dollars.....	(\$ _____)
Bi-Directional Antenna System Allowance	_____	Dollars.....	(\$ <u>50,000.00</u> )
Graphics and Artwork Allowance	_____	Dollars.....	(\$ <u>250,000.00</u> )
<b>TOTAL BASE BID AMOUNT</b>	_____		<b>(\$ _____)</b>
	(use words)		(figures)

**B. ALTERNATES**

**ALTERNATE NO. 1:** Repaint all storefront frames, door frames, canopies and Trellis' at building's exterior at all remaining non-East elevations. Replacement all existing spandrel panel (back-painted glazing, and metal panels) with new spandrel panels.

LUMP SUM ALT. PRICE: \_\_\_\_\_ (\$ \_\_\_\_\_)  
(use words) (figures)

**ALTERNATE NO. 2:** Paint all interior storefront frames (not previously repainted in the alternate or base-bid work). This may be a different color (one) from what was used on the building's exterior frames.

LUMP SUM ALT. PRICE: \_\_\_\_\_ (\$ \_\_\_\_\_)  
(use words) (figures)

2. In submitting the bid, the bidder understands that the Columbus Metropolitan Housing Authority reserves the right to reject any and all bids. If written notice of the acceptance of this bid is mailed or delivered to the undersigned within sixty 60 days after the opening of this bid or at any time thereafter before this bid is withdrawn, the undersigned agrees to execute and deliver a contract in the prescribed form and furnish the required bond within ten (10) days after the contract is presented to him/her signed and approved by the Contracting Officer.
3. A bid bond is submitted with this bid in accordance with the specification requirements in the sum of \_\_\_\_\_ **DOLLARS** (\$ \_\_\_\_\_)  
**AMOUNT OF BID BOND IN US DOLLARS**  
 The undersigned also agrees to execute and deliver the required Performance and Payment Bond within 10 days after an approved and executed contract by Columbus Metropolitan Housing Authority is mailed to him/her.
4. Attached hereto is an affidavit in proof that the undersigned has not entered into any collusion with any person in respect to his proposal or any other proposal or the submitting of proposals for the contract for which this proposal is submitted.
5. In reference to the Equal Opportunity and Non-Segregated Facilities present in Section B— paragraph 8 the undersigned represents that he/she \_\_\_\_\_  
**HAS / HAS NOT**  
 participated in a previous contract or subcontract subject to the Equal Opportunity Clause prescribed by Executive Orders 10925, 11114, or 11246 or the Secretary of Labor; that he/she \_\_\_\_\_ filled all required compliance reports; and that  
**HAS / HAS NOT**  
 representations indicating submission of required compliance reports, signed by proposed subcontractors, will be obtained prior to subcontract awards. (The above representation need not be submitted in connection with contracts or subcontracts, which are exempt from the clause.)

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
**NOTARY SIGNATURE AND SEAL**

**SECTION C – BIDDING DOCUMENTS**

**BID FORM No. 3 – Non-Collusive Affidavit Form**

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

DATE: \_\_\_\_\_

STATE OF: \_\_\_\_\_  
COUNTY OF: \_\_\_\_\_ } ss.

\_\_\_\_\_, being first duly sworn, deposes and says  
Name

That s/he is \_\_\_\_\_ the party making certain proposal, quote or bid, that such proposal, quote or bid is genuine and not collusive or sham; that said bidder has not colluded, conspired, connived or agreed, directly or indirectly, with any bidder or person, to putting in a sham quote or bid or to refrain from quoting or bidding, and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference, with any person, to fix the quote or bid price or affiant or any other bidder, or to fix any overhead, profit or cost element of said quote or bid price, or of that of any other bidder, or to secure advantage against the **COLUMBUS METROPOLITAN HOUSING AUTHORITY** or any person interested in the proposed contract; and that all statements in said proposal, quote or bid are true.

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
**NOTARY SIGNATURE AND SEAL**

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 4 – Bid Bond

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

- **5% OF THE BID AMOUNT MUST BE SUBMITTED BY ALL BIDDERS**
- **CONTRACTOR MUST USE THIS FORM**
- **BID BOND AMOUNT MUST BE SPELLED OUT**

**KNOW ALL MEN BY THESE PRESENTS,** that we the undersigned  
\_\_\_\_\_ as Principal, and

NAME OF PRINCIPAL

NAME OF SURETY / ADDRESS OF SURETY — STREET / CITY / STATE / ZIP

as **SURETY** are held and firmly bound unto **COLUMBUS METROPOLITAN HOUSING AUTHORITY**, hereinafter called the "*Local Authority*" in the penal

sum of \$ \_\_\_\_\_ ( \_\_\_\_\_ **DOLLARS**)

5% OF TOTAL BID

lawful money of the United States, for payment of which sum well and truly to be made, we bind ourselves our heirs, executors, administrators' successors and assigns jointly and severally, firmly by these presents.

**THE CONDITION OF THE OBLIGATION IS SUCH,** that whereas the Principal has submitted the accompanying bid, dated, \_\_\_\_\_

for \_\_\_\_\_

PROJECT NAME AND ADDRESS

**NOW, THEREFORE,** if the Principal shall not withdraw said bid within the period specified therein after the opening of the same, or, if no period specified, within sixty 60 days after the said opening, and shall within the period specified therefore, or, if no period be specified within ten 10 days after the prescribed forms are presented to him for signature, enter into a written contract with the Local Authority in accordance with the bid accepted, and give bond with good and sufficient surety or sureties, as may be required, for the faithful performance and proper fulfillment of such contract; or in the event of the withdrawal of said bid within the period specified, or the failure to enter into such contract and give such bond within the time specified, then the Principal shall forfeit this bid bond as liquidated damages, and shall pay the Local Authority the difference between the amount specified in the said bid and the amount for which the Local Authority may procure the required work or supplies or both, if the latter amount be in excess of the former, then the above obligations shall be void and of no effect, otherwise to remain in full force and virtue.



**IN WITNESS WHEREOF**, the above-bounden parties have executed this instrument under their several seals this \_\_\_\_\_ day of \_\_\_\_\_ the name and corporate seal of each corporate party being hereto affixed, and these presents duly signed by its undersigned representative pursuant to authority of its governing body.

**IN PRESENCE OF:**

<b>ATTEST</b>	<b>CORPORATE PRINCIPAL/SEAL – PRINT AND SIGN</b> SIGNATURE _____ NAME _____
<b>ATTEST</b>	<b>BUSINESS ADDRESS — STREET / CITY / STATE / ZIP</b> _____ _____ _____
<b>ATTEST</b>	<b>SURETY /SEAL—PRINT AND SIGN</b> SIGNATURE _____ NAME _____
<b>ATTEST</b>	<b>BUSINESS ADDRESS — STREET / CITY / STATE / ZIP</b> _____ _____ _____
<b>SURETY PHONE No.</b> _____	<b>SURETY FAX No.</b> _____

**POWER- OF- ATTORNEY FOR PERSON SIGNING FOR  
SURETY COMPANY MUST BE ATTACHED TO BOND  
CERTIFICATE AS TO CORPORATE SURETY**

I, \_\_\_\_\_, certify that I am the \_\_\_\_\_ of the corporation named as surety in the within bond; that \_\_\_\_\_ who signed the bond on behalf of the surety was the \_\_\_\_\_ of said corporation; that I know his/her signature, and his/her signature thereto is genuine; and that said bond was duly signed, sealed, and attested to for and on behalf of said corporation by authority of its governing body.

**(CORPORATE SEAL)**

# **MBE AND SECTION 3 CERTIFICATION FORMS**

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5 – MBE and Section 3 Participation

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

All bidders shall set forth information requested on Forms No. 5, 5A, 5B, 5C, 5D and 5E specifically itemizing:

- all minority and female business enterprises and Section 3 businesses committed to work on the project.
- a description of services or supplies for each minority and female business enterprise and Section 3 business.
- the total dollar value of the contract intended.
- estimates for new employment and training opportunities.

The above-named company recognizes and commits to the following CMHA requirements:

- 20 percent of the total dollar amount of the contract awarded to minority business enterprises.
- best efforts made to award contracts and subcontracts to Section 3 businesses.
- best efforts made to provide employment and training opportunities generated by the project to Section 3 workers.
- 25 percent or more of the total number of labor hours worked by all workers are worked by Section 3 workers.
- 5 percent or more of the total number of labor hours worked by all workers are worked by Targeted Section 3 workers.

The above-named company certifies and commits to the following:

Total Base Bid Amount Entered on Bid Form No. 2	\$
Total Contract Value of Committed MBEs	\$
<b>MBE Participation Percentage</b>	<b>%</b>
Total Contract Value of Committed Section 3 Businesses	\$
<b>Section 3 Business Participation Percentage</b>	<b>%</b>
Total Estimated New Employment and Training Opportunities Entered on Bid Form No. 5D	
Total Number of Section 3 Workers Committed to Hire	

**BID FORM No. 5 – MBE and Section 3 Business Participation cont'd**

If no minority business enterprises and/or Section 3 businesses are included in this bid package, state “no participation” on this form. Complete Bid Form No. 5B explaining why minority business enterprises and/or Section 3 businesses (contractors and suppliers) are not being engaged.

If the percentages of the total contract values of committed minority business enterprises and/or Section 3 businesses reported on this form are less than the required CMHA goals, complete Bid Form No. 5B and 5C indicating why greater participation is not possible or feasible.

Bidders must show Good Faith Efforts demonstrating outreach to minority business enterprises and Section 3 businesses (contractors and suppliers) on Bid Form No. 5C and as indicated in the Good Faith Efforts detailed in the bid package requirements.

Bidders should include information about the participation of female business enterprises although these businesses are not considered in the CMHA numerical participation goal.

Bidders must ensure that all minority business enterprises and Section 3 businesses (contractors and suppliers) engaged on this project are certified by one of the CMHA approved certifying agencies. Bidders shall submit proof of certification. A business included in this bid package that is not certified will result in the CMHA not considering the business as part of the total minority business enterprise or Section 3 business participation requirements.

Bidders must document the total estimate of new employment and/or training opportunities identified by **all contractors (all contractors regardless of MBE or Section 3 status) included in the bid response** on Bid Form No. 5D.

Bidders must have **all contractors (all contractors regardless of MBE or Section 3 status) included in the bid response** complete Bid Form No. 5E communicating estimates for new employment and/or training opportunities arising as a result of the project’s scope of work.

The undersigned will:

- enter into a legal agreement with the minority business enterprises and/or Section 3 businesses (contractors and suppliers) included in the bid package conditioned upon execution of a contract with CMHA.
- demonstrate binding commitments with the minority business enterprises and/or Section 3 businesses (contractors and suppliers) included in the bid package within fourteen (14) working days after receiving an approved contract from CMHA.
- ensure and provide proof of certification of the minority business enterprises and/or Section 3 businesses (contractors and suppliers) included in this bid package.
- provide first consideration for new employment and training opportunities included in the bid package and any that are generated post contract award to Section 3 residents according to the project’s priority order.
- contact CMHA if changes are required prior to review and approval.

**THE UNDERSIGNED HEREBY CERTIFIES THAT THE TERMS OF THIS COMMITMENT HAVE BEEN READ AND IS AUTHORIZED TO BIND THE BIDDER TO THE COMMITMENTS HEREIN SET FORTH.**

Authorized Representative’s Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative’s Title

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5A – MBE and Section 3 Subcontractor/Supplier Utilization Commitment

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

Company Name		\$ _____
Address		_____ % of Bid
Contact Person	Telephone Number	MBE _____
		FBE _____
Scope of Work		Sec3 _____

Company Name		\$ _____
Address		_____ % of Bid
Contact Person	Telephone Number	MBE _____
		FBE _____
Scope of Work		Sec3 _____

Company Name		\$ _____
Address		_____ % of Bid
Contact Person	Telephone Number	MBE _____
		FBE _____
Scope of Work		Sec3 _____

**BID FORM No. 5A – MBE and Section 3 Subcontractor/Supplier Utilization Commitment cont'd**

---

Company Name \_\_\_\_\_ \$ \_\_\_\_\_

---

Address \_\_\_\_\_ % of Bid

---

Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_ MBE \_\_\_\_\_

---

FBE \_\_\_\_\_

---

Scope of Work \_\_\_\_\_ Sec3 \_\_\_\_\_

---

---

Company Name \_\_\_\_\_ \$ \_\_\_\_\_

---

Address \_\_\_\_\_ % of Bid

---

Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_ MBE \_\_\_\_\_

---

FBE \_\_\_\_\_

---

Scope of Work \_\_\_\_\_ Sec3 \_\_\_\_\_

---

---

Company Name \_\_\_\_\_ \$ \_\_\_\_\_

---

Address \_\_\_\_\_ % of Bid

---

Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_ MBE \_\_\_\_\_

---

FBE \_\_\_\_\_

---

Scope of Work \_\_\_\_\_ Sec3 \_\_\_\_\_

---

---

Company Name \_\_\_\_\_ \$ \_\_\_\_\_

---

Address \_\_\_\_\_ % of Bid

---

Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_ MBE \_\_\_\_\_

---

FBE \_\_\_\_\_

---

Scope of Work \_\_\_\_\_ Sec3 \_\_\_\_\_

---

**BID FORM No. 5A – MBE and Section 3 Subcontractor/Supplier Utilization Commitment cont'd**

Company Name	\$ _____
Address	_____ % of Bid
Contact Person	MBE _____
Telephone Number	FBE _____
Scope of Work	Sec3 _____

Company Name	\$ _____
Address	_____ % of Bid
Contact Person	MBE _____
Telephone Number	FBE _____
Scope of Work	Sec3 _____

*Use additional sheets as necessary to document all minority business enterprises and Section 3 businesses committed and included in the bid response.*

Total Contract Value of Committed MBEs	\$ _____
<b>MBE Participation Percentage</b>	_____ %

Total Contract Value of Committed Section 3 Businesses	\$ _____
<b>Section 3 Business Participation Percentage</b>	_____ %

Bidders shall submit certification for all minority business enterprises and Section 3 businesses committed and included on this form.

**I certify and affirm to the best of my knowledge that the information contained here within is true and accurate.**

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5B – MBE and Section 3 Business Commitment Statement

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

Efforts were made to reach minority business enterprises and Section 3 businesses (contractors and suppliers). The above-named company is unable to meet CMHA’s required business participation goals prior to the time of this bid response submittal.

The above-named company certifies and commits to the following participation percentages

Total Base Bid Amount Entered on Bid Form No. 2     \$

Total Contract Value of Committed MBEs     \$

**MBE Participation Percentage**      %

Total Contract Value of Committed Section 3 Businesses     \$

**Section 3 Business Participation Percentage**      %

The above-named company is unable to meet CMHA’s minority business enterprise and/or Section 3 business participation requirements for this project due to the following reason(s):

\_\_\_\_\_ No MBE and/or Section 3 contractor(s) are/were available for work included in the RFP.

\_\_\_\_\_ No MBE and/or Section 3 supplier(s) have supplies needed for work included in the RFP.

\_\_\_\_\_ The MBE and/or Section 3 business contractor(s) and/or supplier(s) contacted quoted price(s) beyond acceptable. Documentation provided.

\_\_\_\_\_ Other: \_\_\_\_\_

**I certify and affirm to the best of my knowledge that the information contained here within is true and accurate.**

Authorized Representative’s Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative’s Title



## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5C – MBE and Section 3 Business Outreach Good Faith Efforts

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

Bidders are required to list all certified minority business enterprises and Section 3 businesses contacted demonstrating Good Faith Efforts to engage such businesses.

MBE\_\_\_\_\_ Section 3\_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

MBE\_\_\_\_\_ Section 3\_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

**BID FORM No. 5C – MBE and Section 3 Business Outreach Good Faith Efforts cont'd**

MBE \_\_\_\_\_ Section 3 \_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

MBE \_\_\_\_\_ Section 3 \_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

MBE \_\_\_\_\_ Section 3 \_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

**BID FORM No. 5C – MBE and Section 3 Business Outreach Good Faith Efforts cont'd**

MBE \_\_\_\_\_ Section 3 \_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

MBE \_\_\_\_\_ Section 3 \_\_\_\_\_

Subcontractor/Supplier Name and Address	Contact Name and Telephone Number
Contact Date(s)	Type of Work/Materials
Reason(s) for Not Accepting	Price Quoted

*Use additional sheets as necessary to document all minority business enterprises and Section 3 businesses contacted for inclusion the bid response.*

CMHA reserves the right to contact each contractor or supplier included on this form for verification.

**I certify and affirm to the best of my knowledge that the information contained here within is true and accurate.**

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

## **CONTRACTOR MBE GOOD FAITH EFFORT ATTACHMENTS**

**CONTRACTOR TO ATTACH ALL DOCUMENTS  
SUBMITTED TO SUPPORT THEIR MBE  
“GOOD FAITH EFFORT”  
AFTER PAGE THIS PAGE**

### **NOTE**

- 1) REFER TO PROPOSED “GOOD FAITH EFFORT”  
EXAMPLES.**
- 2) PLEASE TITLE ALL DOCUMENTS SUBMITTED AS  
NEEDED FOR CLARIFICATION.**

**PROPOSED  
“GOOD FAITH EFFORT” EXAMPLES &  
POSSIBLE ATTACHMENTS**

---

**MBE “Good Faith Effort” Examples**

1. Contractor made effort to contact MBE firms, Bid Form #5C.  
(All MBEs listed were verified)
  
2. Contractor advertised for MBE in local, and minority newspaper.  
(Ads attached)
  
3. Contractor contacted/used MBE placement and recruiting offices.  
(Documentation attached)
  
4. Contractor requested in writing for MBE firm(s) for quotes on  
different portions of work.  
(Documentation attached)
  
5. Contractor discusses portions of work with MBE contacted.  
(Documentation attached)
  
6. Contractor accepted/negotiated in good faith with MBE quote.  
(Documentation attached)

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5D – Section 3 Workforce Commitment Statement

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

Bidders are required to document the project’s total estimates for new employment and training opportunities identified by all contractors. Section 3 workers should have first preference for openings.

The above-named company certifies and commits to the following Section 3 workforce participation percentage:

**Total Estimated New Employment and Training Opportunities  
Calculated from Submitted Bid Forms No. 5E**

Work Classifications	Estimated New Positions

**Total Number of Section 3 Residents Committed to Hire**

**Section 3 Workforce Participation Percentage**

Bidders must include a completed Bid Form No. 5E from all contractors included in this bid response communicating estimates for new employment and/or training opportunities arising as a result of the project’s scope of work.

**I certify and affirm to the best of my knowledge that the information contained here within is true and accurate.**

Signature	Date
Print Name	Title

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 5E – Section 3 Workforce Commitment Statement for Contractors

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

All contractors included in the bid response recognize and commit to the following Section 3 workforce requirements:

- **best efforts made to provide employment and training opportunities generated by the project to Section 3 workers.**
- **25 percent or more of the total number of labor hours worked by all workers are worked by Section 3 workers.**
- **5 percent or more of the total number of labor hours worked by all workers are worked by Targeted Section 3 workers.**

This form should be completed by all contractors included in the bid response to communicate estimates for new employment and/or training opportunities arising as a result of the project’s scope of work.

- Provide the complete list of work classifications/job titles required for the scope of work.
- Of the work classifications/job titles required for the scope of work, provide the number of workers currently employed to fulfill the scope. *How many workers currently employed to handle this scope of work will work on this project?*
- Of the work classifications/job titles needed for the scope of work, provide the number of individuals that must be hired to fulfill the scope. *How many individuals will need to be hired to handle this scope of work?*

If no number is provided under the ‘# Must Hire’ column, the contractor is communicating that the company has a full team to complete the scope of work and will not need to hire new workers. Should this information change during the duration of the project, the contractor is required to communicate changes to the general contractor and provide hiring preference to Section 3 workers.

Work Classification/Job Title	# Required for the Scope	# Currently Employed	# Must Hire

*Use additional sheets as necessary to document all work classifications/job titles needed to fulfill the scope of work.*

**BID FORM No. 5E – Section 3 Workforce Commitment Statement for Contractors cont’d**

The above-named company certifies and commits to the following Section 3 workforce participation percentage:

Total Estimated New Employment and Training Opportunities	
Total Number of Section 3 Residents Committed to Hire	
Section 3 Workforce Participation Percentage	%

NOTE: To confirm the project’s compliance performance against Section 3 goals, all workers working on the project will be asked to provide information to determine status as a Section 3 worker and a Targeted Section 3 worker.

**I certify and affirm to the best of my knowledge that the information contained here within is true and accurate.**

Signature	Date
Print Name	Title



## SECTION C – BIDDING DOCUMENTS

### CMHA Section 3 Clause

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

All CMHA Section 3 covered contracts shall include the following clause to comply with Section 3 requirements.

- A. The work to be performed under this contract is subject to the requirements of Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3). The purpose of Section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by Section 3, shall, to the greatest extent feasible, be directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.
- B. The parties to this contract agree to comply with HUD's regulations in 24 CFR Part 75, which implement Section 3. As evidenced by their execution of this contract, the parties to this contract certify that they are under no contractual or other impediment that would prevent them from complying with the Part 75 regulations.
- C. The contractor agrees to send to each labor organization or representative of workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this Section 3 clause and will post copies of the notice in conspicuous places at the work site where both employees and applicants for training and employment positions can see the notice. The notice shall describe the Section 3 preference and where residents may obtain more information.
- D. The contractor agrees to include this Section 3 clause in every subcontract subject to compliance with regulations in 24 CFR Part 75, and agrees to take appropriate action, as provided in an applicable provision of the subcontract or in this Section 3 clause, upon a finding that the subcontractor is in violation of the regulations in 24 CFR Part 75. The contractor will not subcontract with any subcontractor where the contractor has notice or knowledge that the subcontractor has been found in violation of the regulations in 24 CFR Part 75.
- E. The contractor will certify that any vacant employment positions, including training positions, that are filled (1) after the contractor is selected but before the contract is executed, and (2) with persons other than those to whom the regulations of 24 CFR Part 75 require employment opportunities to be directed, were not filled to circumvent the contractor's obligations.
- F. Noncompliance with HUD's regulations in 24 CFR Part 75 may result in sanctions, termination of this contract for default, and debarment or suspension from future HUD assisted contracts.

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 6 – Bidder’s Qualifications

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

**NOTE: USE ADDITIONAL SHEETS IF NEEDED**

The Bidder is required to complete Bid Form No. 7: Bidder Qualifications Questionnaire (6 pages) and attach his/her reference on Form No. 7A of what work of a character similar and compatible to that included in the proposed contract he/she has done, to give references and such other detailed information as will enable the Columbus Metropolitan Housing Authority to judge his/her responsibility, experience, skill, and financial standing.

A. Names of Principal Shareholder/s or Parent Company and percentage of ownership:

	%
	%
	%
	%

B. Check One:

- Corporation
- Joint Venture
- Limited Liability
- Partnership
- Individual
- Date Established \_\_\_\_\_

- C. Has any principal shareholder or owner (30% ownership or more) been involved, as owner, employee, or agent, **in any other business** entity engaged in the construction industry within the past 5 years?  Yes  No

If so, provide the following information:

1. Name of each such business entity \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Description of involvement (*e.g., title and duties*) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Dates of involvement \_\_\_\_\_  
\_\_\_\_\_

- D. Has your organization ever operated under another name?  Yes  No

1. If so, what name? \_\_\_\_\_
2. Describe the relationship to the present firm: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 2. BIDDER'S BACKGROUND INFORMATION

- A. Number of years in business \_\_\_\_\_
- B. Number of employees at present \_\_\_\_\_
- C. Geographical area served \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- D. **Safety Record** — Has your organization been inspected by OSHA within the past 2 years?  Yes  No

1. If so, provide the following information for **EACH INSPECTION** on a separate sheet:
  - A. Project inspected
  - B. Dates of inspection
  - C. Citations issued (number of specifics)
  - D. Penalties paid (not proposed)

2. Attach copies of your OSHA 200 Annual Summary of injuries and illness logs for the preceding 3 years.
3. Has any employee or agent of your organization died or been seriously injured (i.e., requiring in patient hospitalization) due to a workplace accident in the last 2 years?  
 Yes     No

If yes provide details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. To put your safety record in perspective, what was the total amount of employee workdays (*not including office / non-field construction employees*) last year?  
 Number of construction employees \_\_\_\_\_  
 Total number of hours of construction employees \_\_\_\_\_

- E. Has your organization or its agents defaulted on any construction project within the last 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- F. Has your organization or its agents had a construction contract terminated, or been asked to leave a construction project, within the last 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- G. Has your organization or its agents been issued a Stop-Work-Order on any project within the past 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- H. Are you now, or have you been in the past, a party to any litigation or arbitration proceedings arising out of your performance of a construction contract?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- I. Has your organization been assessed any liquidated damages arising from any construction activities in the past 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- J. Has your organization been found not responsive?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- K. Has your organization been cited for any violation of any state or federal prevailing wage requirements in the past 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- L. Has your organization or any of its employees, agents, or affiliates, ever been disbarred or declared ineligible for any government contracts?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- M. Has your organization or any of its employees, agents or affiliates ever been cited and/or issued any violations by any regulatory agency with respect to your construction activities within the last 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- N. Is your organization, or any of its employees, agents, or affiliates currently under investigation or audit, or involved in any proceedings, involving a regulatory agency with respect to your construction activities?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

- O. Have any mechanics' liens or bond claims been filed by you, or your subcontractors, suppliers, employees, or materialmen, on any projects on which you have worked in the last 2 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

### 3. FINANCIAL INFORMATION

- A. Identify the Surety Company that will provide your payment and performance bond/s:

Surety Name	
Surety Address	
Surety Phone No.	Surety Fax No.
Contact Person	Bonding Limits \$

- B. Source of Letter of Credit *(if applicable)*:

Credit Limits: \_\_\_\_\_

- C. Have any claims been made against your bonding company, as obligator on a bond issued on your behalf, in the past 3 years?  Yes  No

*If yes, provide details on separate sheet of paper and attach to this section.*

D. List bank reference/s, stating the name/s of the bank officer, address, and telephone number:

BANK NAME	REFERENCE	TELEPHONE No.
1.		
2.		
3.		
4.		
5.		

E. List any outstanding liens (*include project name, date, and reason*): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

F. Is your company any of the following?

1. Minority Business Enterprise (MBE)     Yes     No

2. Female Business Enterprise (FBE)     Yes     No

**4. IMPORTANT NOTICE**

The foregoing information must be truthfully, completely, and fully provided. Failure to do so may result, at the owner's discretion, in declaring the bidder's bid non-responsive and therefore not considered. Any falsification, misrepresentation, or untrue response to any of the foregoing shall also be, at the discretion of the owner, cause for the immediate termination of any contract entered into between the owner and the bidder.

If any additional space is necessary to completely answer any of the foregoing, provide all relevant details on a separate, attached sheet. Describe the circumstances, referencing the project, provide the names of involved persons and agencies, and state the results of the incidents in questions. Additional information of facts may be required by the Owner prior to the award of any contract.

This statement, along with any attached sheets, is to be signed by an officer of the bidder organization and notarized. Execution of this form constitutes a representation of the truth and accuracy of all of the statements and answers made in conjunction herewith.

State of \_\_\_\_\_

County of \_\_\_\_\_

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
**NOTARY SIGNATURE AND SEAL**

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 7 – Previous Similar Project References

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

#### SIMILAR/COMPATIBLE CONSTRUCTION PROJECTS COMPLETED IN THE LAST 5 YEARS

SIMILAR/COMPATIBLE PROJECT NAME / LOCATION	CONTACT PERSON NAME & TEL. #	CONTRACT AMOUNT	PROJECT DATES	
			START	COMPLETION
1.				
2.				
3.				
4.				

**NOTE: USE ADDITIONAL SHEETS IF NEEDED**

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title



## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 8 – Financial Statement / Contractor Forms

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

The bidder is to provide the most recent audited financial statement, audited if available including contractors latest balance sheet and income statement (*see “Instructions and Information for Bidders”*).

- Submit with this form, the following:
  - 1) Certificate of Insurance
  - 2) Bureau of Workers’ Compensation Certificate
  - 3) Contractor License in project

Bidders are to indicate if items listed below are enclosed.

1. Financial Statement:  Yes    No
2. Financial Statement will be submitted if the bidder is the lowest bid.  Yes

If #2 is selected:

Submit Financial Statement within three (3) working days after the Bid Opening if you are the lowest bidder.

Authorized Representative’s Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative’s Title

## SECTION C – BIDDING DOCUMENTS

### BID FORM No. 9 – Certification for Drug Free Workplace

Project Name	CMHA Administrative Office
Scope of Work	Renovation
Bid Date & Time	Thursday, November 11, 2021 @ 11:00 a.m. – Virtual Bid Opening (via Zoom)
Company Name	

#### Program/Activity Receiving Federal Contract Funding

1. Acting on behalf of the above-named Contractor as its Authorized Official, I make the following certifications and agreements to the Columbus Metropolitan Housing Authority (CMHA) regarding the sites listed below:

I certify that the above-named Contractor will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Contractor's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees --

- (1) The dangers of drug abuse in the workplace;
- (2) The Contractor's policy of maintaining a drug-free workplace
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the contract be given a copy of the statement required by paragraph a.

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the contract, the employee will --

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every contract officer or other designee on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected contract;

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

f. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

**2. Sites for Work Performance.** The Contractor shall list (on separate pages) the site(s) for the performance of work done in connection with the CMHA funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Contractor name and address and the program/activity receiving contract funding.)

Check here <sup>1</sup> if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** CMHA will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

Authorized Representative's Signature	Date
Print/Type — Authorized Representative Name	Print/Type — Authorized Representative's Title

# **END OF BIDDING DOCUMENTS**

(This sheet should be included as your last page in your bid package)