

ORLEANS PARISH SCHOOL BOARD
PROCUREMENT DEPARTMENT
2401 Westbend Parkway, Suite 5055, New Orleans, LA 70114
Jonathan Temple, Director of Business Partnerships | (504)304-3847

May 14, 2019

ADDENDUM NO. 1

REQUEST FOR QUALIFICATIONS NO. 19-0023

DESIGN SERVICES FOR SCHOOLS IN ORLEANS PARISH

This Addendum and Clarification item forms a part of the Contract Documents and modifies the original Request for Qualification Documents issued April 26, 2019. Acknowledge receipt of this Addendum on the Addendum Form (Attachment #3) of Addendum No. 1. Failure to do so may subject Prime Consultant to disqualification.

This addendum consist of twenty-two (22) pages:

The original Request for Qualification document is changed as

folldwsThe following documents (7 pages) shall be Added as MANDATORY FRONT-END DOCUMENTS, and shall require proper signatures:

- a. Attachment-1 Certification Regarding Debarment, Suspension, ineligibility and Voluntary Exclusion-Lower Tier Covered Transactions (Form AD-1048);
 - b. Attachment-2 Certification Regarding Lobbying;
 - c. Attachment-3 Prime Consultant's Certification;
 - d. Attachment-4 Principals of the Company;
 - e. Attachment-5 Non-Collusion Statement;
 - f. Attachment-6 Prime Consultant Guaranties and Warranties.
2. Prime Consultants shall utilize **Attachment-3 Prime Consultant's Certification** document to acknowledge all addendums.
 3. The Sign-in Sheets (6 pages) for RFQ No. 19-0023 shall be added to this addendum as Attachment-7.
 4. **Exhibit-A: OPSB | AE STANDARD FORM:** Shall be DELETED, and REPLACED as **Attachment-8: OPSB | AE STANDARD FORM (8 pages).**

END OF STATEMENTS REGARDING ADDENDUM NO.1

Mr. Jonathan Temple
Director of Business Partnerships

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-
Lower Tier Covered Transactions (Form AD-1048)**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS THAT FOLLOW)

- (1) The prospective lower tier participant certifies, by submission of this statement of qualifications, that neither it nor its Principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify any of the statements in this certification, such prospective participant shall attach an explanation to this statement of qualifications.

Organization Name_____

Name and Title
of Authorized Representative_____

Signature_____Date_____

**Instructions for Completing Certification Regarding Debarment, Suspension, Ineligibility
and Voluntary Exclusion - Lower Tier Covered Transactions
(Form AD-1048)**

NOTE: Each responsive Prime Consultant must include this certification statement with each proposal exceeding \$100,000, or any contract for audit services regardless of amount.

1. By signing and submitting this form, the prospective lower tier participant providing the certification set out on the above in accordance with these instructions.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms *covered transaction*, *debarred*, *suspended*, *ineligible*, *lower tier covered transaction*, *participant*, *person*, *primary covered transaction*, *principal*, *proposal*, and *voluntarily excluded*, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the U. S. Department of Agriculture regulations 7CFR 3017 implementing Executive Order 12 549. (Contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.)
5. The prospective lower tier participant agrees by submitting this form that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this form that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transaction" without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification that a prospective participant in a lower tier covered transaction has not been debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless the participant knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Non-procurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. If a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

CERTIFICATION REGARDING LOBBYING

**CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS
EXCEEDING \$100,000 IN FEDERAL FUNDS**

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub- awards (exceeding \$100,000 in Federal funds) at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

NAME/ADDRESS OF VENDOR_____

TITLE OF SUBMITTING OFFICIAL_____

SIGNATURE_____DATE_____

PRIME CONSULTANT'S CERTIFICATION

TO: ORLEANS PARISH SCHOOL BOARD

Procurement Department

2401 Westbend Parkway, Fifth Floor,
Orleans, Louisiana 70114

Acknowledgment of Addenda:

Addendum No. _____, dated _____

Addendum No. _____, dated _____

Addendum No. _____, dated _____

1. Having read the Request for Qualifications and the Specifications for **DESIGN SERVICES FOR SCHOOLS IN ORLEANS PARISH I**, the undersigned, authorized to represent the corporation, partnership, sole proprietorship (the Company) listed below, hereby submit to the OPSB this Statement of Qualifications for providing the service as listed above.

2. This Statement of Qualifications is submitted on behalf of:

Company: _____

Address: _____

Street Number/P.O. Box

Street Name

City

State

Zip

3. In submitting this Statement of Qualifications, the Prime Consultant agrees to the terms and conditions of the Request for Qualifications, including the specifications and instructions to Prime Consultant. If this Statement of Qualifications is signed by a partner, the person hereby states that he/she has the authority to bind the partnership; if signed by a corporate officer or employee, that person hereby states that he or she has the authority to bind the corporation. (Copy of corporate resolution attached).

Signature of Company Representative

Representative's Title

Date

PRINCIPALS OF THE COMPANY

PRESIDENT: _____

VICE-PRESIDENT: _____

SECRETARY: _____

TREASURER: _____

VENDOR: _____

SIGNATURE: _____

NAME: _____
(PRINT OR TYPE)

ADDRESS: _____

CITY, STATE, and ZIP: _____

AREA CODE & PHONE: _____

AREA CODE & FAX: _____

E-MAIL: _____

EMPLOYER'S REGISTRATION NUMBER UNDER SOCIAL SECURITY
LIST THE PROPOSER'S FEDERAL TAX IDENTIFICATION NUMBER _____

Vendor is: (check one) _____Sole Proprietorship;_____Partnership;_____Corporation
(If corporation, in what state incorporated)_____; or
____ Joint venture. Identify parties:

NON-COLLUSION STATEMENT

State of
Louisiana
Parish of
Orleans

_____,
States that he/she is _____ (a partner of the firm, officer of
the corporation, or individual making the foregoing statement of qualifications [SOQ]); that said
SOQ is genuine and not collusive or sham; that said Prime Consultant has not colluded,
conspired, connived or agreed, directly or indirectly, with any participants or person to put in a
sham SOQ or to refrain from submitting, collusion, or communication or conference, with any
person, to fix the bid price or affiant or any other consultant, or to fix any overhead, profit or cost
element, or that of any other consultant, or to secure any advantage against any person interested in
the SOQ, and that all statements contained in the said SOQ are true.

(Signature)

PRIME CONSULTANT'S GUARANTIES AND WARRANTIES

- A. Prime Consultant warrants that it is willing and able to comply with the State of Louisiana laws with respect to foreign (non-state of Louisiana) corporations/entities.
- B. Prime Consultant warrants that it will obtain an errors and omissions insurance policy providing a prudent amount of coverage for the willful or negligent acts, or omissions of any officers, employees or agents thereof.
- C. Prime Consultant warrants that it will not delegate or subcontract its responsibilities under an agreement without the prior written permission of OPSB.
- D. Prime Consultant warrants that all information provided by it in connection with this statement of qualifications is true and accurate.
The Prime Consultant certifies it can and will provide and make available, as a minimum, all services set forth in Sections I - IV required.

Signature of Official: _____

Name (typed): _____

Title: _____

Firm: _____

Date: _____

Orleans Parish School Board
 Mandatory Pre-Proposal Conference
 Design Services for Schools in Orleans Parish
 RFQ no. 19-0023
 Monday, May 13, 2019, 10:00 A.M.

COMPANY NAME	EMAIL	CONTACT	PHONE	FAX
N-Y Associates, Inc.	estivers@n-y-associates.com	Cherie Estivers	(504) 885-0500	504-885-0595
VERGES ROME ARCHITECTS	helen@vergesrome.com	Helen L. Verges	504-488-7739	504-488-7743
Coleman Partners Architects	isaflott@cparch.com	Joe SAFLOTH	387-4414	225-214-5365
Waggoner + Ball LLC	mac@wbae.com	MTC BALL	504-524-5308	504-524-5518
"	paul@wbae.com	PAUL GAMMAGN		
Grace Herbert Architects	rmoses@graceherbert.com	Rebecca MOSES	504-532-2050	504-532-3750
N-Y ASSOCIATES	mbuisson@n-y-associates.com	MIKE BUSSON	(504) 885-0500	(504) 885-0595
VERGES ROME ARCHITECTS	steph@vergesrome.com	Stephanie Calamar	504-488-7739	504-488-7743
DUPREUX & MERIC	ARCHITECTS@RUMERARCH.COM	TOMMY MERIC	504 324-4814	504 371-5139
ALBERT ARCHITECTURE	teraword@albert-architecture.com	Tia word	504-390-7000	
Meyer Engineers & Architects	TDUPRE@meyer-e-1.com	Terry Dupre	504-885-9892	
JOHN C. WILLIAMS ARCHITECTS	JCWILLIAMS@JULIAMS-ARCHITECTS.COM	JOHN WILLIAMS MARK HECK	504-566-0888	504-566-0897

COMPANY NAME	E-MAIL	CONTACT	PHONE	FAX
HOLLY & SMITH ARCHITECTS	k.m.s@hollyandsmith.com	KEVIN J. SMITH	504-585-1315	504-585-1316
GOULD EVANS	julie.chavart@goldenevans.com	Julie Chavart	504-481-6401	N/A
MARK I. BARNETT ARCHITECTS LLC	MARK@MIBARCH.COM	MARK I. BARNETT	504-330-8782	N/A
CONCORDIA, LLC	ghill@concordia.com	Graham Hill	504-569-1818	N/A
NANO LLC	SUSAN@nanollc.com	Susan VanWingen	504-480-3272	N/A
MATHE BRIERRE ARCHITECTS	amorton@mathesbriere.com	Angela Morton	504-586-7303	504-582-1305
TRACOLIN REE ARCHITECTS	aprice@tracolincor.com	Allison Price	504-523-3272	N/A
MSH ARCHITECTS, LLC	Studio@MSHArchitects.com shloh@MSHArchitects.com	Shloh Mates	985-848-0303	N/A
STUDIO KIRO	cynthia@studiokiro.com	CYNTHIA DUBBERLEY	504-450-1497	N/A
Biltek Knevel Architects	kays@bilknevel.com	Kay St. Laurent	504-524-4637	N/A
Williams Architects	MHeck@williamsarchitects.com	Mark Heck	504-546-0886	N/A

Orleans Parish School Board
Mandatory Pre-Proposal Conference
Design Services for Schools in Orleans Parish

RFQ no. 19-0023

Monday, May 13, 2019, 10:00 A.M.

COMPANY NAME	EMAIL	CONTACT	PHONE	FAX
Linfield, Hunter & Jones Benjamin Chabot	Bahadur K@hlinius.com		504.466.7962	
Mary Alexander BATTLE, LLC BROOKS MDP	Alexander.e-perez.com	Mary Alexander	504-584-5100	504-584-5140
Salas O'Brien	tom.lard@salasobrien.com	Tom Lard	225 614 4280	
Salas O'Brien	hina.lagarde@salasobrien.com	Tina Lagarde	504-312-0975	
Marrero Couillon Assoc.	jglyn@mca-llc.com	Jennifer Glyn	985-867-7410	
HERNANDEZ CONSULTING	terawford@hernandezconsulting.com	Tacee Crawford	504 310-7000	

Orleans Parish School Board
Mandatory Pre-Proposal Conference
Design Services for Schools in Orleans Parish

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Monday, May 13, 2019, 10:00 A.M.

COMPANY NAME	EMAIL	CONTACT	PHONE	FAX
SCN2 Architects	morton@schanz.net	Matt Morton	504-301-3722	504-301-3724
Pascal Architects	Alton@pascalarchitects.com	Alton Davis	504-343-3605	
GRACE ARCHITECTS	DOR@GRACEARCHITECTS.COM	DAMON JOB	504-522-2050	
REL ARCHITECTURE	hmn@relarchitects.com	Holly Mackles	985-787-4440	
REL CONSULTANTS	hmn@relarchitects.com	Holly Mackles	985-787-4440	
Julien Engineering	Kevin@julien-engineering.com	Kevin Julien	504.366.3454	
Sizeler Thompson Brown Architects	bfauchoux@sizeler.com	Kevin Brian Fauchoux	504.366.3454 (504)	
MODUS INC. ARCHITECTS	bryan@bisarchitects.com	Bryan Stewart	504 527 5339	
VOLUME ZERO LLC	VAN@VOLUMEZERO.COM	VAN TRAN	504-864-9909	504-864-9983

Orleans Parish School Board
Mandatory Pre-Proposal Conference
Design Services for Schools in Orleans Parish
RFQ no. 19-0023
Monday, May 13, 2019, 10:00 A.M.

COMPANY NAME	EMAIL	CONTACT	PHONE	FAX
WDC+	lapagand@wdgnoh.com	Lisa Pagano	504-754-5280	
Billichknevel Arch.	info@billichknevel.com	Lisi	504-524-4634	504-524-5128
LACHIN Architects, APC	daniel@lachinarch.com	Daniel Lachin	504-835-8013	504-835-8034
SCARROU MAZINEZ ARCHITECTS	rand@scarroumazinez.com	Randy Mazinez	504 896 2000	—
ECM CONSULTANTS, INC.	cmanshac@ecmconsultants.com	CMish Manshac	504 885 4080	504 885 1439
TRAPPOVIN. PEEK-KRUTH	peekr@trapplinpeek.com	PHUA PEEK	504 523.2772	504.523.3081
VOLUME ZERO, LLC	MICHAEL@VOLUMEZERO.COM	MICHAEL CAJSKI	504 - 864 - 9909	504 - 864 - 9983

Monday, May 13, 2019, 10:00 A.M.

Attachment-7



OPSB | AE STANDARD FORM

1a. Official Name of Firm

2. Project Name and Numbers:

1b. Official mailing address

1c. Official street address

**Prime
Architectural & Engineering
Services**

3a. Principal to contact (must be same person certifying item 3b).

Name:
LA Registration No.:
Telephone No.:

Fax No.:

E-Mail:

3b. I certify that I am duly authorized to represent the applicant applying for this project. I further certify that the foregoing information is accurate and complete to the best of my knowledge.

Signature: _____ Date: _____

4a. Firm's LA registration number and date granted
(Attach a copy of registration certification)

4b. Current occupational license number

5. Personnel by discipline (list each person only once, by primary function).

Administrative		Ecologists		Interior Designers		Structural Engineers
Architects (Licensed)		Electrical Engineers		Landscape Architects		
Architects (Intern or Student)		Engineer-In-Training		Land Surveyor		
Civil Engineers		Environmental Engineers		Mechanical Engineers		
Construction Inspectors		Estimators		Professional Land Surveyors		
Draftsmen/CADD Operators		Geologists		Sanitary Engineers		
Designer/Technician		Geotechnical Engineers		Specification Writers		Total Personnel

6. Indicate the area(s) of responsibility for this project.

7. List Sub-consultants/Associates to be utilized on this project.				
Name and Address	Specific Responsibilities and scope of work on this project	Approximate % of work this project	Indicate if DBE	Worked with Prime before (yes or no)
1.				
2.				
3.				
4.				
5.				
6.				
7.				

8. Project organization chart. Identify the key personnel and their responsibilities for this project. Include Consultants/Associates as appropriate.

<p>9. Brief resume of key personnel. These must be employed by the Prime of Consultant/Associate and work at the official address listed in item 1c.</p>	
<p>a. Name and title</p>	<p>a. Name and title</p>
<p>b. Position or assignment for this project</p>	<p>b. Position or assignment for this project</p>
<p>c. Years professional experience</p> <p style="text-align: center;">With this firm With other firms</p>	<p>c. Years professional experience</p> <p style="text-align: center;">With this firm With other firms</p>
<p>d. Active registration: State/discipline/license number or applicable certifications for inspectors</p>	<p>d. Active registration: State/discipline/license number or applicable certifications for inspectors</p>
<p>e. Specific experience and qualifications relevant to this project</p>	<p>e. Specific experience and qualifications relevant to this project</p>

10. List five largest current projects under contract or under contract negotiations that are being (or will be) performed at the official address listed in Item 1c.

a. Project Type or Name Project Description Name of Architect Responsible or in Charge Client Contact Person and Phone Number	b. Nature of firm's responsibility	c. Actual (A), or Estimated (E) fee	d. Current status or percent complete	e. Actual (a) or estimated (e) completion date
1.				
2.				
3.				
4.				
5.				

11. List all projects your firm has performed at the official address listed in Item 1c within the past 10 years that are similar or comparable to the proposed project				
a. Project Type or Name Project Description Name of Architect Responsible or in Charge Client Contact Person and Phone Number	b. Nature of firm's responsibility	c. Actual (A) or estimated (E) fee	d. Current status or percent complete	e. Actual (A) or estimated (E) completion date
1.				
2.				
3.				
4.				
5.				
6.				

12. List all OPSB projects which have been awarded to applicant as a prime during the past three (3) years.

a. Project Type or Name Project Description Name of Person Responsible or in Charge Client Contact Person and Phone Number	b. Nature of firm's responsibility	c. Actual (A) or estimated (E) fee	d. Current status or percent complete	e. Actual (a) or estimated (e) completion date

13. Use this space to best illustrate qualifications of this firm to perform this project, or any additional information or description of resources supporting your firm's qualifications. All information with specific reference to the various items specified in the Request For Qualifications Evaluation Criteria (Section "D") and the stated scope of work should be included. A maximum of three (3) additional sheets may be utilized to answer this question. All other attachments not specifically requested or embellishments shall be excluded.