1. SOLICITATION NUMBER

2. TYPE OF SOLICITATION

3. DATE ISSUED

PAGE OF PAGES

4. CONTRACT NUMBER

5. REQUISITION/PURCHASE REQUEST NUMBER

6. PROJECT NUMBER

7. ISSUED BY

CODE

8. ADDRESS OFFER TO

a. NAME

b. TELEPHONE NUMBER (Include area code) (NO COLLECT CALLS)

10. THE GOVERNMENT REQUIRES PERFORMANCE OF THE WORK DESCRIBED IN THESE DOCUMENTS (Title, identifying number, date)

12a. THE CONTRACTOR MUST FURNISH ANY REQUIRED PERFORMANCE AND PAYMENT BONDS?

(If "YES," indicate within how many calendar days after award in Item 12B.)

12b. CALENDAR DAYS

13. ADDITIONAL SOLICITATION REQUIREMENTS:

STANDARD FORM 1442 (REV. 8/2014)

STANDARD FORM 1442

Prescribed by GSA-FAR (48 CFR) 52.236-1(d)

SOLICITATION, OFFER,

AND AWARD

(Construction, Alteration, or Repair)

SOLICITATION

SOLICITATION

IMPORTANT - The "offer" section on the reverse must be fully completed by offeror.

9. FOR INFORMATION

CALL:

NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder".

SEALED BID (IFB)

NEGOTIATED (RFP)

11. The Contractor shall begin performance within \_\_\_\_\_\_\_\_\_\_\_\_ calendar days and complete it within

\_\_\_\_\_\_\_\_\_\_\_\_

calendar days after receiving

award,

notice to proceed. This performance period is

mandatory

negotiable. (See \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_).

YES

NO

a.

Sealed offers in original and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_copies to perform the work required are due at the place specified in Item 8 by \_\_\_\_\_\_\_\_\_\_\_\_\_

(hour) local time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date). If this is a sealed bid solicitation, offers must be publicly opened at that time. Sealed

envelopes containing offers shall be marked to show the offeror's name and address, the solicitation number, the date and time offers are due.

b.

An offer guarantee

is,

is not required.

c.

All offers are subject to the (1) work requirements, and (2) other provisions and clauses incorporated in the solicitation in full text or by reference.

.

d.

Offers providing less than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ calendar days for Government acceptance after the date offers are due will not be

considered and will be rejected.

1

5

36C26323R0031

X

12-27-2022

568-23-2-9994-0001

568-21-706

36C263

Department of Veterans Affairs

Network 23 Contracting Office (NCO 23)

111 South 18th Plaza, Suite C38

Omaha NE 68102-2077

ND/SD IDIQ Vendor Portal

Tommy Opal

402-996-3529

Project# 568-21-706, EHRM NextGen Wi-Fi Install (Fort Meade, South Dakota)

Under the terms and conditions set forth in the ND/SD Indefinite Delivery Indefinite Quantity contracts, the VA is

requesting price proposals for the above referenced project as described in the attached Statement of Work and all

other attached documents.

All work to be completed will be at the Fort Meade VA Health Care System at 113 Comanche Rd., Fort Meade, SD 57741.

NAICS Code 238210 is applicable for this procurement with the small business size standard of $16.5M. The magnitude of

construction for this project is estimated to be between $100,000 and $250,000.

10

120

X

52.211-10

X

10

0

3:00 PM CT

01-31-2023

X

90

14. NAME AND ADDRESS OF OFFEROR

15. TELEPHONE NUMBER

16. REMITTANCE ADDRESS

CODE

FACILITY CODE

17. The offeror agrees to perform the work required at the prices specified below in strict accordance with the terms of the solicitation, if this offer is

accepted by the Government in writing within \_\_\_\_\_\_\_\_\_\_ calendar days after the date offers are due.

AMOUNTS

18. The offeror agrees to furnish any required performance and payment bonds.

19. ACKNOWLEDGMENT OF AMENDMENTS

AMENDMENT

NUMBER

DATE.

20a. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER

20b. SIGNATURE

20c. OFFER DATE

21. ITEMS ACCEPTED:

22. AMOUNT

23. ACCOUNTING AND APPROPRIATION DATA

24. SUBMIT INVOICES TO ADDRESS SHOWN IN

ITEM

25. OTHER THAN FULL AND OPEN COMPETITION PURSUANT TO

10 U.S.C. 2304(c)(

)

41 U.S.C. 3304(a) (

)

26. ADMINISTERED BY

27. PAYMENT WILL BE MADE BY

PHONE:

FAX:

28. NEGOTIATED AGREEMENT

29. AWARD

Your

Contractor agrees

offer on this solicitation is hereby accepted as to the items listed. This

to furnish and deliver all items or perform all work requirements identified

award consummates the contract, which consists of (a) the Government

on this form and any continuation sheets for the consideration stated in

solicitation and your offer, and (b) this contract award. No further cont-

this contract. The rights and obligations of the parties to this contract

ractual document is necessary.

shall be governed by (a) this contract award, (b) the solicitation, and (c)

the clauses, representations, certifications, and specifications incorporated

by reference in or attached to this contract.

30a. NAME AND TITLE OF CONTRACTOR OR PERSON AUTHORIZED

31a. NAME OF CONTRACTING OFFICER

TO SIGN

30b. SIGNATURE

30c. DATE

31b. UNITED STATES OF AMERICA

31c. AWARD DATE

BY

**OFFER**

**AWARD**

**STANDARD FORM 1442 (REV. 8/2014) BACK**

(Include ZIP Code)

(Include area code)

(Include only if different than Item 14.)

(Insert any number equal to or greater than

the minimum requirement stated in Item 13d. Failure to insert any number means the offeror accepts the minimum in Item 13d.)

(The offeror acknowledges receipt of amendments to the solicitation -- give number and date of each)

(Type or print)

(4 copies unless otherwise specified)

(Type or print)

(Type or print)

(Contractor is required to sign this

document and return \_\_\_\_\_\_\_ copies to issuing office.)

(Contractor is not required to sign this document.)

**(Must be fully completed by offeror)**

**(To be completed by Government)**

**CONTRACTING OFFICER WILL COMPLETE ITEM 28 OR 29 AS APPLICABLE**

568-363/50173-9994-854200-3223 23EHRMW18

Obligation Number:

36C263

Department of Veterans Affairs

Network 23 Contracting Office (NCO 23)

111 South 18th Plaza, Suite C38

Omaha NE 68102-2077

Department of Veterans Affairs

FMS-VA-2(101)

Financial Services Center

PO Box 149971

Austin TX 78714-9971

Daniel P. Kinney

VA-VHA-RPOC-2023-0013

## PRICE/COST SCHEDULE

### ITEM INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ITEM NUMBER | DESCRIPTION OF SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
| 0001 |  | 1.00 | JB | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | PN: 568-21-706, EHRM NextGen WiFi Installation - Construction Services per the attached Statement of Work  Contract Period: Base POP Begin:  POP End:  PRINCIPAL NAICS CODE: 238210 - Electrical Contractors and Other Wiring Installation Contractors PRODUCT/SERVICE CODE: Z1DA - Maintenance of Hospitals and Infirmaries | | | |  |
|  |  |  |  | **GRAND TOTAL** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**INSTRUCTIONS TO OFFERORS**

*If a firm is not submitting a proposal, they are requested to submit a "No Bid" response via email to the Contract Specialist at* [*tommy.opal@va.gov*](mailto:tommy.opal@va.gov) *within five (5) days from receipt of the request for proposal.*

1. **WORKING HOURS:** Working hours will be 8:00 AM to 4:30 PM unless otherwise stated in the SOW/drawings/specifications or pre-arranged with the local VA Engineering Office/Contracting Officer’s Representative.
2. **BONDS:**
   1. **Bid Guarantee:** 20% as indicated in FAR Provision 52.228-1.

Note: An electronic copy of the Bid Guarantee will be accepted.

* 1. **Performance and Payment Bonds:** Performance and payment bonds in the amount of 100% of the awarded contract shall be required. Commencement of construction is contingent upon approval of required bonds.

Note: An electronic copy of the Payment and Performance Bonds will be accepted.

1. **WAGE DETERMINATION:** The Construction Wage Rate Requirement statute is applicable to this requirement. A Wage Determination is provided as an attachment to this solicitation.
2. **SITE VISIT:** An organized Site Visit has been scheduled forTuesday 01/10/2023 at 1:00 pm MT. Participants will meet in the Building 89 Conference room at the Fort Meade VA Medical Center located at 113 Comanche Road Fort Meade, SD 57741. Offerors are strongly encouraged to visit the VA installation to fully appraise themselves with the physical layout and the character and conditions under which the service is to be performed.
3. **SOLICITATION RFI/QUESTIONS/CLARIFICATIONS:** Questions must be submitted to the ND/SD IDIQ Vendor Portal. Questions will be accepted up to 01/19/2023 at 12:00 pm MT. All answers will be published using the vendor portal.
4. **BASIS OF AWARD:** Price only. An award will be made to the lowest price offeror that is determined reasonable among those determined to be responsive and responsible in response to this solicitation.
5. **SITE SUPERVISION:**  The Contractor shall provide supervision in accordance with contract clause 52.236-6, Superintendence by the Contractor.
6. **PROPOSAL FORMAT:** Proposals submitted in response to this solicitation shall be submitted via the ND/SD IDIQ eCMS Vendor portal and formatted as follows:
   1. Completed Standard Form 1442
   2. Completed Price Schedule Sheet
   3. Completed Price Schedule Breakdown Sheet (attached). This is for informational purposes only.
   4. An electronic copy of the Bid Guarantee.
   5. Safety or Environmental Violations:All Bidders/Offerors shall submit the following information pertaining to their past safety and environmental record. The information shall contain, at a minimum, a certification that the bidder/offeror has no more that three serious, or one repeat or one willful OSHA or any EPA violation(s) in the past three years.
   6. Experience Modification Rate (EMR):All Bidders/Offeror’s shall submit information regarding their current EMR equal to or less than 1.0. This information shall be obtained from the offeror's insurance company and be furnished on the insurance carrier's letterhead. Self-insured contractors or other contractors that cannot provide their EMR rating on insurance letterhead must obtain a rating from the National Council on Compensation Insurance, Inc. (NCCI) by completing/submitting form ERM-6 and providing the rating on letterhead from NCCI. Note: Self-insured contractors or other contractors that cannot provide EMR rating on insurance letterhead from the states or territories of CA, DE, MI, NJ, ND, OH, PA, WA, WY, and PR shall obtain their EMR rating from their state-run worker's compensation insurance rating bureau.
   7. Limitations of Subcontracting Certificate: Complete and return the attached Limitations of Subcontracting Certificate per VAAR Clause 852.219-75
   8. Self-Performance Worksheet: Complete and return the attached Self-Performance Worksheet demonstrating that the proposal meets requirements of VAAR Clause 852.219-75.
7. **CLAUSES:** All applicable Clauses of the base IDIQ contract for each offeror are incorporated into this solicitation in full force and effect.
8. **ATTACHMENTS:**

See attached document: SOW

See attached document: Specifications

See attached document: Drawings

See attached document: Limitations of Subcontracting Certification

See attached document: Price Schedule Breakdown

See attached document: Self-Performance Worksheet

See attached document: Appendix A\_Access Point - Conduit Installation Checklist

See attached document: Installation of New Access Points

See attached document: PCRA ICRA Risk Assessment NextGen FtM

See attached document: Wage Determination