

**BARRY GLASSMAN**  
HARFORD COUNTY EXECUTIVE

**BILLY BONIFACE**  
DIRECTOR OF ADMINISTRATION



**KAREN D. MYERS**  
DIRECTOR OF PROCUREMENT

**REQUEST FOR PROPOSAL**

**JOPPATOWNE WWTP ULTRAVIOLET DISINFECTION SYSTEM  
RFP NO. 16-060**

**ADDENDUM NO. 5**

October 29, 2015

Ladies and Gentlemen:

The purpose of this addendum is to provide clarification (s) to all prospective bidders.

**Attached is the Updated CCL form for the Project The Project also requires a 5% Bid Bond, be provided with the proposal submission in order to be compliant with the SAAP Grant Requirements.**

Should you have additional questions regarding this project, please do not hesitate to contact me at [djguthrie@harfordcountymd.gov](mailto:djguthrie@harfordcountymd.gov).

Sincerely,

Daniel J. Guthrie, CPPB  
Chief

cc: Dave Pergrin, DPW/W&S

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220 South Main Street, Bel Air, Maryland 21014

THIS DOCUMENT IS AVAILABLE IN ALTERNATIVE FORMAT UPON REQUEST

**I. Contract Cost Limit (CCL) Form**

We propose to perform the Design/Build Services outlined in the Request for Proposal dated \_\_\_\_\_, 2015.

<b>Reimbursable Costs</b>		1
Reimbursable costs	\$ _____	
<u>Design/Build Entity's Contingency</u>	<u>\$ _____</u>	2
<b>Subtotal - Reimbursable Costs</b>	<b>\$ _____ -</b>	
<b>Fixed Costs</b>		
Architecture/Engineering/Survey Fee and Expenses		3
Fee through Schematic Design	\$ _____	
Fee through 65% Design	\$ _____	
Fee through 100% Design	\$ _____	
Contract Administration Fee	\$ _____	
General Contractor Fee (OH & P)		4
Fee through Schematic Design	\$ _____	
Fee through 65% Design	\$ _____	
Fee through 100% Design	\$ _____	
Permit Approvals	\$ _____	
As-Built Drawings, Testing, Training	\$ _____	
Construction Phase Fee	\$ _____	
<b>Subtotal - Fixed Costs</b>	<b>\$ _____ -</b>	
<b>CONTRACT COST LIMIT (CCL)</b>	<b>\$ _____ -</b>	5
<b>= Reimbursable + Fixed Fee Costs (Not to Exceed)</b>		

**Keyed Notes:**

1. Reimbursable Costs include materials, supplies, equipment, subcontracts and labor at the project site and for personnel working directly on the Project, part-time or full-time, whether at the site or not. General conditions type expenses are included such as: direct expenses; legal (project related excluding any legal costs related to claims against the owner), insurance and accounting (project related), payment and performance bonds, taxes including gross receipts tax, permits, utility availability, relocation and usage costs, "on-site construction" supervision, quality control, safety, training, engineering/layout, fire protection, cleanup, field office equipment and operation, but not including expenses incurred prior to the effective date of this agreement.

2. Design/Builder's Contingency is to be used during construction at the discretion of the Design/Builder in accordance with the contract terms. Expenditures from the Design/Builder's Contingency must be approved in advance by the Owner's Representative, whose approval will not be unreasonably withheld. Remaining contingency at the conclusion of the project is subject to shared savings per the contract terms. Additional expenses shall be borne by the Design/Builder.
3. Architecture/Engineering/Survey fee and expenses are fixed for each phase and is the maximum amount payable absent a change.
4. General Contractor's Fee includes Contractor's profit on Reimbursable Costs, General and Administrative expenses and labor overhead excluding costs for personnel working directly on the Project. This fee is fixed for each phase and is the maximum amount payable absent a change.
5. The CCL is the maximum amount payable to Design/Builder and is a cap on Design/Builder's compensation, which is the sum of Reimbursable Costs and Fixed Costs payable to complete the Project absent a Change. The Guaranteed Maximum Price (GMP) established at 65% design cannot exceed the CCL.

**II. Additional services**

Hourly rates for additional services shall be based upon actual time spent and shall be as authorized by Owner only. Billing rates shall be fully loaded including salary, benefits, and overhead.

<u>Classification of Personnel</u>	<u>Hourly Billing Rate</u>
Principal Architect/Engineer	\$ _____
Project Manager	\$ _____
Project Architect	\$ _____
Project Engineer	\$ _____
Senior Architect	\$ _____
Senior Engineer	\$ _____
Architect	\$ _____
Engineer	\$ _____
Senior Drafter	\$ _____
Drafter/CADD Operator	\$ _____
Clerical Staff	\$ _____

All Proposers must be in good standing with Harford County, Maryland. Proposers must meet any outstanding taxes, fees or accounts with Harford County, MD.

**PROPOSAL SUBMITTED BY:**

\_\_\_\_\_  
ENTITY NAME  
(Must be entity name as registered with Maryland  
State Department of Assessments & Taxation)

\_\_\_\_\_  
Authorized Representative/Title  
(Signature)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Authorized Representative/Title  
(Print/Type)

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Date