



STATE OF ARKANSAS

1509 West 7th Street, Room 300
Little Rock, Arkansas 72201-4222

RESPONSE PACKET ***SP-17-0091***

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification.



STATE OF ARKANSAS

OFFICE OF STATE PROCUREMENT

1509 West 7th Street, Room 300

Little Rock, Arkansas 72201-4222

RESPONSE SIGNATURE PAGE

Type or Print the following information.

| RESPONDENT'S INFORMATION | | | | | |
|--|---|--------|---|-----------|--|
| Company: | | | | | |
| Address: | | | | | |
| City: | | State: | | Zip Code: | |
| Business Designation: | <input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit | | | | |
| Minority Designation: <i>See Minority Business Policy</i> | <input type="checkbox"/> Not Applicable <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American <input type="checkbox"/> Service Disabled Veteran | | | | |
| | AR Minority Certification #: _____ | | Service Disabled Veteran Certification #: _____ | | |

| VENDOR CONTACT INFORMATION | | | |
|---|--|------------------|--|
| <i>Provide contact information to be used for bid solicitation related matters.</i> | | | |
| Contact Person: | | Title: | |
| Phone: | | Alternate Phone: | |
| Email: | | | |

| CONFIRMATION OF REDACTED COPY |
|--|
| <input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. |
| <p><i>Note: If a redacted copy of the submission documents is not provided with vendor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), shall be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i></p> |

An official authorized to bind the vendor to a resultant contract must sign below.

The signature below signifies agreement that either of the following **shall** cause the vendor's response to be disqualified:

- Additional terms or conditions submitted in their response, whether submitted intentionally or inadvertently.
- Any exception that conflicts with a Requirement of this *Bid Solicitation*.

Authorized Signature: _____ Title: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

SECTIONS 3, 4, 5 - VENDOR AGREEMENT AND COMPLIANCE

- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

VENDOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.*Type or Print the following information*

| Subcontractor's Company Name | Street Address | City, State, ZIP |
|------------------------------|----------------|------------------|
| | | |
| | | |
| | | |
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☐ **VENDOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.
- **Do not** include additional information if not pertinent to the itemized request.

| | |
|---|--|
| SP-17-0091, RFP, REGIONAL EXTREME PRECIPITATION STUDY | Maximum RAW Score Available |
| E1. PROFESSIONAL EXPERIENCE | |
| A. Provide details regarding your experience with PMP analysis. Include the number of years of experience and specific experience. | 5 Points |
| B. Provide details regarding your experience with PMP plans for statewide, regional, or similarly-sized areas of study. Include the number of years of experience and specific experience. | 5 Points |
| E2. EXAMPLES OF WORK | |
| A. Provide two (2) examples from similar PMP studies over the previous five (5) years. The sample should identify the client, the project 30%, 60%, and 90% benchmark completion points, and the following: | |
| 1. Sample 1 | |
| A. Scope of Work | 5 Points |
| B. Project Development | 5 Points |
| C. Project Implementation | 5 Points |
| D. Project Budget | 5 Points |
| 2. Sample 2 | |
| A. Scope of Work | 5 Points |
| B. Project Development | 5 Points |
| C. Project Implementation | 5 Points |
| D. Project Budget | 5 Points |
| E3. PROJECT UNDERSTANDING AND TIMEFRAME | |
| A. Provide details how each of the six (6) work elements listed below will be implemented. | |
| 1. Review of the rainfall analysis published in HMRs 51 and 52, including a critical evaluation of the storms selected for analysis in the development of published rainfall estimates, and of the procedures used to conduct storm transposition and maximization. | 5 Points |
| 2. Expansion of the existing extreme storms database. | 5 Points |
| 3. Selection of the list of storms to be used to develop the gridded regional analysis product. | 5 Points |
| 4. Analysis and separation of the historic storms by storm type (e.g. local convective, remnant tropical storm, etc.) | 5 Points |
| 5. A study of all previous work regarding definition of "Sub-regions," or regions of homogenous meteorological characteristics within the heterogeneous super region of the study. Use previous studies, additional and/or new statistical analysis to | 5 Points |

| | |
|--|----------|
| create scientifically defensible sub-regions for the study. Include discussion of transposition and maximization techniques. | |
| 6. A GIS-based tool that includes: gridded PMP estimates, multiple storm durations, adjustment factors, temporal storm distribution, and a summary report for each basin analyzed that provides controlling storm and confidence limit data. | 5 Points |
| 7. Timeframe to complete each work element as well as the project breakdown of the suggested 30%, 60%, and 90% benchmarks. | 5 Points |
| E4. PROJECT ORGANIZATION AND STAFFING | |
| A. Detail how the respondent has and will make available sufficient personnel resources to work and to maintain the necessary performance levels. Include the following: | |
| 1. Personnel assigned to the project and their roles and responsibilities. | 5 Points |
| 2. Resume for each person assigned to the project. | 5 Points |
| E5. REFERENCES | |
| A. Provide three (3) statements or letters, written and signed by professional references, on their letterhead, with whom you were previously, or are currently contracted. The statement should include the name, physical address, phone number, and email address of the referring party. Each reference should provide answers to the following: | |
| 1. Describe the scope of the project for which the vendor was contracted and when it began and was completed. | 5 Points |
| 2. Based on your experience with the vendor, explain why you would or would not use this vendor again for the same or similar projects? | 5 Points |
| 3. Based on your experience with the vendor, describe the accomplishment of project benchmarks within their timeframes and operating within the project budget requirements. | 5 Points |
| 4. Based on your experience with the vendor, describe the quality of the vendor's overall performance. | 5 Points |

OFFICIAL BID PRICE SHEET

Do not amend or alter any item(s) on the Official Bid Price Sheet.

| |
|--|
| <div><div>Bid Price Sheet</div><div>SP-17-0091, RFP, Regional Extreme Precipitation Study</div><div>Vendor Name: <div></div></div><div>Enter information only in the highlighted cells.</div></div> |
|--|

| | |
|---------------------------|---------------|
| TOTAL PROJECT COST | \$0.00 |
|---------------------------|---------------|