



WESTERN WATER (WW), is seeking quotes from qualified subcontractors and suppliers, including DBE and/or San Francisco (Local) Small & Micro LBE certified firms, for the construction of:

SEP Scope III – New Headworks Construction

Engineer's Estimate: **\$42,000,000**

Bid Date & Time: **October 14th at 2:00 P.M.**

Project Location: **San Francisco, CA**

Contracting opportunities for qualified subcontractors and suppliers on this project may include, but not be limited to, the following types of work: **Building Information Modeling (BIM), Mechanical Anchor Testing, Steel Decking, Metal Fabrication, Misc. Metals, Metal Pan Stairs, Aluminum Railings, Wire Rope Decorative Metal Railings, Stop Plates, FRP Fabrications (Weirs, Grating, etc.), FRP Handrail and Guardrail, Penetration Firestopping, Painting & Coating, Automatic Samplers, High-Pressure Washers, Plumbing, Process Integration, Pipe Fabrication, PF&V, Hydraulic Actuators, Flowmeters, Bubblers, Switches, Analyzers, Davit Cranes, Submersible Sump Pumps, Submersible Centrifugal Pumps, Aluminum Covers, Water and Wastewater Equipment.**

Information regarding bonding, insurance, lines of credit, and any technical assistance or information related to the plans or specifications and requirements for the work will be made available to all interested firms. Plans and specs are available to view at our office and access to digital copies will be provided upon request.

For more information or to provide quotes, please contact:

Western Water, 707 Aviation Blvd, Santa Rosa, CA

Ken Leef, Project Procurement Manager

bids@westernwater.com, Phone: (707) 540-9640, Fax: (707) 540-9641

Subcontractors will be required to comply with all subcontract insurance requirements, which include providing a waiver of subrogation endorsement to their worker's compensation insurance.

The City has a surety bond program, which assists LBE contractors in obtaining bonding and financing for contracts awarded by the San Francisco Public Utilities Commission. For further information contact: Jennifer Elmore at (415) 217-6578.

The SFPUC has adopted a Project Labor Agreement (PLA) which will apply to this Project. All contractors must sign a letter of assent, binding the contractor to the terms of the PLA.

Interested subs and suppliers should complete and submit the attached solicitation form no later than 24 hours prior to bid.

WW is an AA/EEO/Veterans/Disabled Employer – CA License No. 188068

707 Aviation Boulevard
Santa Rosa, CA 95403
License #188068 Est. 1959

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westernwater.com



SUB/SUPPLIER BID SOLICITATION

Prior to the below bid time this form must be filled out and returned via fax, (707) 540-9641, or emailed to bids@westernwater.com.

Project Description: **SEP Scope III – New Headworks Construction**

Bid Date: **10/14/19**

Bid Time: **2:00 PM**

SRF Funded (AIS Required): Yes No

Sub/Supplier Providing Quote: _____

Description of work or supply: _____

Contact Name: _____ Email: _____

Phone: _____ Fax: _____

Any DBE or LBE Certifications: _____

Subcontractor's or Supplier's bid shall be per the Owner's contract documents. Selected subcontractors and suppliers will need to sign Western Water's (WW) standard relevant contract agreement, which can be obtained at www.westernwater.com/bids.

Subcontractors **may be required to furnish a 100% faithful performance and labor bond**, in a form and from a surety acceptable to WW. WW will pay up to 1.5% of the bond premium.

Is Subcontractor bondable? Yes No

Does Subcontractor have available bonding capacity for this job? Yes No

What is Subcontractor's bond rate? _____

Western Water is signatory with the Northern California District Council of Laborers. Subcontractor shall, to the extent permissible under applicable laws, comply with all the provisions of the Laborers' collective bargaining agreements as if it were a party to said agreements.

Will Subcontractor use laborers on this project? Yes No

If yes, will Subcontractor use union laborers? Yes No

Provide Contractors License #: _____

Provide Public Works Contractor Registration #: _____

Provide Workers Compensation EMR: Current _____ Past Year _____ Past 2nd Year _____