
Specifications

**Department of Department
of City Development**

Request for Service Pricing #57346

**Temporary placement and payroll
services for a Plan Examiner**

I. INSTRUCTIONS TO BIDDERS

A. **BID FORM:** Submit hourly bill rate for the work as indicated and specified herein, complete in every respect. Bid will be awarded to the lowest responsible and responsive bidder, per the specifications herein.

Bids will not be accepted in any form except on the bid form herein. The contractor must recognize and abide by the right of the Owner (City of Milwaukee) to accept or reject any or all bids in the best interests of the City.

B. **HOURLY BILL RATE:** Each bidder shall provide on the bid proposal a per hour bill rate for the temporary Plan Examiner, that shall include a \$26.00 an hour wage rate, benefits, insurance, overhead, profit, etc.

C. **EXCLUSIVITY OF WORK:** The approximate number of hours for the placement of the temporary Plan Examiner is 600 hours. That said, there is no guarantee of work or amount of work and no exclusivity for work. Actual hours worked under this contract would include, but not be limited to, bidder's hourly rate, amount budgeted by DCD for this purpose, and the Development Center's needs. The intent of this contract is to provide placement of, and payroll services of, a Plan Examiner on an as-needed basis. Work will be on an as required basis and scheduling and volume of work may vary. The contractor will be responsible for and ensure compliance of work rules of DCD.

The City reserves the right based on availability and need to acquire services outside this Contract to best meet the need of the City.

D. **WORK SCHEDULE:** The workweek shall be comprised of no more than 40 hours per week, not to exceed eight hours per day. The work days will be agreed upon in advance and the work schedule will conform to the Development Center schedule, beginning at 8:00 a.m. and end a 4:45 p.m. DCD may at its option adjust this time to accommodate the individual demands of the Development Center.

E. **CONTRACT BREAKDOWN:** The hourly bill rate with this bid will be used as a basis for payment of the hours of work completed. There will be no exceptions to the hourly bill rate.

The hourly bill rate submitted shall be firm for the duration of the contract with the exception of changes to FICA and/or FUTA taxes directed by federal law. Any changes in the hourly bill rate due to FICA and/or FUTA taxes must be made in writing to DCD procurement services section at least 30 days in advance of the federal law effective date of the tax rate change. It is the responsibility of the Contractor to pay all salaries due and assume all responsibility for FICA/Medicare, federal and state unemployment, and all federal, state and local taxes. Contractor must comply with national and federal labor laws.

F. **CONTRACT EXTENSION:** This Contract will be for six months with the option to extend for an additional six months, upon mutual consent of the parties subject to the following conditions: satisfactory completion of work performed; needs of the Development Center; and available funding.

G. **EXAMINE DOCUMENTS:** Before submitting a bid, bidders should carefully examine the

contract manual; fully inform themselves as to all existing conditions and limitations, including those of labor; and shall include in the bid proposal a sum sufficient to cover the cost of all items contemplated by the contract documents.

II. GENERAL REQUIREMENTS

A. INSURANCE

1. Before commencing work the Contractor/Vendor shall furnish the Department of City Development (DCD), for review and approval, evidence of the following insurance coverage:

Coverage	Amounts
Workers' Compensation	Statutory Limit
Comprehensive General Liability	BI (Bodily Injury) \$500,000 per occurrence \$1,000,000 aggregate PD (Property Damage) \$500,000 per occurrence
Automobile Liability	BI \$500,000 per person \$1,000,000 per occurrence PD \$500,000 per occurrence

2. The Contractor/vendor shall provide the DCD with Certificates of Insurance evidencing the above referenced coverage. The insurance carrier must be licensed to do business in the State of Wisconsin. The City of Milwaukee shall be named as an additional insured with respect to liability coverage, except for the Professional Liability (if required). The Department of City Development shall be given thirty (30) days notice in advance of cancellation, non renewal, or material change in any insurance coverage. Failure to provide the insurance required shall permit the DCD terminate a Contract.

3. In addition, a notarized Affidavit of No Interest form must be completed and signed by the insurance agent who issued the Certificate of Insurance and submitted with the Certificate of Insurance, deposing that no officer, official or employee of the Department of City Development has any interest, directly or indirectly, or is receiving any premium, commission, fee or other thing of value on account of the sale or furnishing of said insurance certificate.

4. The contractor shall not permit the coverage to lapse and shall furnish evidence of coverage to the DCD.

5. The certificate holder shall be noted as:

Department of City Development
809 N. Broadway, Attn: Purchasing/Contract Services
Milwaukee, WI 53202

B. LIVING WAGE APPLIES: In recognition of Chapter 310-13 of the Milwaukee Code of Ordinances, the living wage rate is required for this Contract. By executing the work on this

Contract, the Contractor certifies that it knows of the provisions of this section, intends to comply with them and agrees to pay all workers employed by the Contractor in the performance of this contract, whether on a full time or part time basis, a base wage of not less than \$9.18 per hour. Contactor is required to sign and have notarized the attached Affidavit of Compliance - Living Wage Provision and submit the Living Wage Compliance Report within 10 days following completion of the work or every 3 months, whichever comes first.

C. LOCAL BUSINESS ENTERPRISE: Bids that are issued on or after August 10, 2009, include a Local Business Enterprise (LBE) bid incentive in accordance with Chapter 365 of the Milwaukee code of ordinances. Please note that the LBE criteria has been revised, effective December 18, 2009, information regarding the LBE incentive and revised criteria can be found by accessing the city's web site: <http://www.milwaukee.gov>, click the departments link, click the Procurement Services (purchasing) link under Business and Development category, click the Important Information link (see also attached forms).

It is your responsibility as a bidder to familiarize yourself with this ordinance prior to submitting your bid. Local Business Enterprise means a business which satisfies all of the following criteria:

1. Owns or leases property within the geographical boundaries of the City of Milwaukee. Post office boxes shall not suffice to establish compliance as a Local Business Enterprise. A residential address may suffice to establish compliance as a Local Business Enterprise, but only if the business does not own or lease other real property, either within or outside the geographical boundaries of the City of Milwaukee. Leased property shall not suffice to establish compliance as a local business enterprise unless at least half of the acreage of all the real property owned or leased by the business is located within the geographical boundaries of the City of Milwaukee.
2. Has owned or leased real property and has been doing business within the geographical boundaries of the City of Milwaukee for at least one year.
3. Is not delinquent in the payment of any local taxes, charges or fees, or has entered into an agreement to pay any delinquency and is abiding by the terms of the agreement

D. SLAVERY DISCLOSURE AFFIDAVIT: Note: effective December 28, 2005, the City of Milwaukee adopted an ordinance relative to the disclosure of participation in or profits derived from slavery by contractors. All contractors awarded a contract on behalf of the City of Milwaukee, whether or not subject to a competitive bid, shall complete an affidavit prior to entering into the contract verifying that the contractor has searched any and all records of the company or any predecessor company regarding records of investments or profits from slavery or slaveholder insurance policies during the slavery era. The names of any enslaved persons or slaveholders described in those records must be disclosed in the affidavit.

The city shall make the information contained in the affidavit available to the public. Any contract between the city and a contractor which fails to provide the requisite affidavit or which includes material false information on such affidavit shall be rendered null and void in accordance with Milwaukee Code of Ordinances 310-14.

Note: only those bidders who have not submitted this affidavit with a previous bid should submit a signed and notarized copy of the slavery disclosure affidavit with their bid.

NOTICE

**HOURLY RATE FOR EMPLOYEES WORKING ON CITY
OF MILWAUKEE CONTRACTS SHALL NOT BE LOWER THAN**

\$9.18 PER HOUR

REFERENCE MILWAUKEE CODE OF ORDINANCES 310-13

Rate Effective 3/1/2012

Per Section 310-13, Milwaukee Code of Ordinances

CITY OF MILWAUKEE - DEPARTMENT OF CITY DEVELOPMENT

DEPARTMENT OF ADMINISTRATION-PROCUREMENT SERVICES SECTION

AFFIDAVIT OF COMPLIANCE - LIVING WAGE PROVISION

BID/RFP NUMBER: _____ DATE: _____

The undersigned hereby agrees to pay all workers employed by the Contractor in the performance of this contract, whether on a full-time or part-time basis, a base wage of not less than **\$9.18** per hour. The undersigned agrees to make a sworn report within 10 days following the completion of the contract, or every 3 months, whichever occurs first, and to procure and submit a like sworn report from every subcontractor employed by the contractor, to the DCD - Procurement Services Division. Such report shall include, but not be limited to, for the specified time period, the person's name, address, type of work performed, total hours worked on the service contract, hourly wage rate, gross earnings, and employer's contribution to vacation, welfare and trust funds. Said reports or affidavits shall be accompanied by a statement that each and every employee has been paid in full the amount of not less than **\$9.18** per hour, and that there has not been, nor is to be, any rebate or refund of any part of said wages by the employee to the employer.

ALL OF OUR EMPLOYEES RECEIVE AN HOURLY WAGE THAT IS GREATER THAN \$9.18/HOUR. NOTE: REPORTS AS STATED ABOVE ARE STILL REQUIRED.

I/We hereby state that I/we will comply with Section 310-13 of the City of Milwaukee Code of Ordinances as stated above:

AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

COMPANY NAME: _____

Personally came before me on this _____ day of _____ 20____ ,
(he/she) _____ who acknowledges that he/she executed the
foregoing document for the purpose therein contained for and on behalf of said
company. IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

(SEAL)

NOTARY PUBLIC SIGNATURE

PRINT NAME

My commission expires: _____



**DEPARTMENT OF CITY DEVELOPMENT OF THE
OF THE CITY OF MILWAUKEE
PROCUREMENT SERVICES SECTION**

**LOCAL BUSINESS ENTERPRISE (LBE) PROGRAM
AFFIDAVIT OF COMPLIANCE**

IMPORTANT: This form must be submitted with your bid to be considered for LBE status.

Bid/RFP #: _____

Company Name: _____

Address: _____

City, State, Zip _____

This affidavit of compliance will be the contractor's sworn statement that the business meets the following criteria:

- The business owns or leases property within the geographical boundaries of the City of Milwaukee. Post office boxes shall not suffice to establish status as a Local Business Enterprise.
- A residential address may suffice to establish compliance as a Local Business Enterprise, but only if the business does not own or lease other real property, either within or outside the geographical boundaries of the City of Milwaukee.
- Leased property shall not suffice to establish compliance as a Local Business Enterprise unless at least half of the acreage of all the real property owned or leased by the business is located within the geographical boundaries of the City of Milwaukee.
- The business has owned or leased real property within the geographical boundaries of the City of Milwaukee *and* the business has been doing business in the City of Milwaukee for at least one (1) year.
- The business is not delinquent in the payment of any local taxes, charges or fees, or the business has entered into an agreement to pay any delinquency and is abiding by the terms of the agreement.
- The business will perform at least 10% of the monetary value of the work required under the contract.

NOTE: If you are the primary owner of more than one business location and the other business location(s) is not located within the geographical boundaries of the City of Milwaukee, the business you are seeking to qualify as a Local Business Enterprise must serve as the primary functionally operational entity that is capable of providing the required services, commodities, or supplies for the purposes of this Bid/RFP. If you own more than one business, please list the name of the business(es) and their addresses on the "Business Property Location" form.

SITE VISITS: Please note the contractor agrees to allow the City to verify Local Business Enterprise status by allowing City Staff to visit the operation(s) of the business that is seeking Local Business Enterprise status at any time without notice, in an effort to maintain the integrity of the City's bidding process.

I hereby declare compliance with the City of Milwaukee Code of Ordinances Chapter 365.

Authorized Signature: _____

Printed Name: _____

Date: _____

NOTARIZATION

Subscribed to before me on this _____ day of _____ in the year _____, at
_____ County, _____ State.

NOTARY PUBLIC SIGNATURE: _____

(SEAL)

PRINT NAME: _____ My commission expires: _____

PLEASE SUBMIT THIS FORM WITH YOUR BID OR PROPOSAL TO:
DEPARTMENT OF CITY DEVELOPMENT OF THE
OF THE CITY OF MILWAUKEE
809 North Broadway
Milwaukee, Wisconsin 53202



**DEPARTMENT OF CITY DEVELOPMENT OF THE
OF THE CITY OF MILWAUKEE
PROCUREMENT SERVICES SECTION**

**LOCAL BUSINESS ENTERPRISE (LBE) PROGRAM
BUSINESS PROPERTY LOCATION FORM**

Important Note: This form must be submitted with your bid to be considered for LBE status.

Bid / RFP # _____

Property Location 1

Name:	
Address:	
City, State, Zip	

Property Location 2

Name:	
Address:	
City, State, Zip	

Property Location 3

Name:	
Address:	
City, State, Zip	

Property Location 4

Name:	
Address:	
City, State, Zip	

PLEASE SUBMIT THIS FORM WITH YOUR BID OR PROPOSAL TO:
DEPARTMENT OF CITY DEVELOPMENT OF THE
OF THE CITY OF MILWAUKEE
809 North Broadway
Milwaukee, Wisconsin 53202



City
of

Milwaukee

CITY OF MILWAUKEE - DEPARTMENT OF ADMINISTRATION
PROCUREMENT SERVICES SECTION

AFFIDAVIT OF COMPLIANCE
DISCLOSURE OF PARTICIPATION IN OR PROFITS DERIVED FROM SLAVERY BY CONTRACTORS

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

This affidavit of compliance will be the contractor's sworn statement that publicly discloses any slavery policies sold by any companies, or profits from slavery by industries or their predecessors who are doing business with the City of Milwaukee as defined in the Milwaukee Code of Ordinances 310-14.

Please check one:

_____ This business **was not** in existence prior to the slavery era (1865).

_____ This business **was** in existence prior to the slavery era (1865). I have searched any and all records for records of investments or profits from slavery, and have found no such records.

_____ This business **was** in existence prior to the slavery era (1865). I have searched any and all records for records of investments or profits from slavery, and am disclosing the following findings (attach additional pages, if necessary):

I hereby declare that all statements are true, accurate and complete as of the date furnished to the City of Milwaukee.

AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

DATE: _____

=====

Subscribed to before me on this _____ day of _____, 20____, at _____
County, _____ State.

NOTARY PUBLIC SIGNATURE: _____
(SEAL)

PRINT NAME: _____

My commission expires: _____

PLEASE RETURN THIS FORM TO:
200 E. WELLS STREET, ROOM 601, MILWAUKEE, WI 53202
OR FAX TO 414-286-5976