REQUEST FOR QUOTE

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For

Lease Space For the Workforce Solutions South Plains Muleshoe Career Center

Initial Issue Date: Wednesday May 1, 2019

Quote due Date and Time May 30, 2019 5:00pm

I. Introduction

The South Plains Regional Workforce Development Board dba Workforce Solutions South Plains (hereinafter, "the Board" or "Workforce Solutions") is a 501(c)(3) Non-profit Corporation that administers workforce development services funded by the Texas Workforce Commission (TWC) for the 15-county South Plains Regional Workforce Development Area (SPRWDA) which consists of Bailey, Cochran, Crosby, Dickens, Floyd, Garza, Hale, Hockley, King, Lamb, Lubbock, Lynn, Motley, Terry and Yoakum Counties.

The Board's workforce services contractors operate five full-service Workforce Solutions Career Centers to provide employment and training services to residents of the South Plains. These facilities, located in Brownfield, Lubbock, Levelland, Muleshoe, and Plainview, are leased facilities and are open to the public from 8 a.m. to 5 p.m. five (5) days a week Monday through Friday. Some of the facilities have extended hours.

II. Purpose of Request for Quote (RFQ)

The Board is seeking quotes on office space to lease in Muleshoe, TX. The office would serve as a Workforce Solutions Career Center. The Board will consider a stand-alone location or co-location with another tenant in a "like industry" (post-secondary educational institutions, community-based organizations, business consulting, business development, economic and workforce development agencies etc.) Owners may provide quotes for one or more locations.

III. DESCRIPTION OF OCCUPANCY NEEDS

Location:

Office space is to be located within **Muleshoe**, **Texas** and shall be in a location that is properly zoned.

Term of Lease:

- Terms of a lease would require the landlord to repair, replace and maintain the roof, foundation, parking facility, and plumbing, HVAC, structural soundness and other structures or equipment serving the facility.
- Lease should include, when applicable, right of first refusal on adjacent space.
- Facility must be complete and meet all site requirements and be ready for occupancy on or before October 1, 2019, or a reasonably negotiated time following award of lease agreement.
- The initial term of the lease should not exceed five years and should include one renewal option for an additional five years. The total length of the Lease Agreement would be ten years.

Workforce Solutions Space Requirements

- The location must be in an area that is assessable by the general population
- Open floor layout or office space for 3 employees with a reception area
- Conference room space
- Storage Closet
- No less than 1 handicap accessible bathroom

Code Requirements

The facility shall comply with all local, state, and national codes, ordinances and regulations governing the particular class of facility, as interpreted by the inspecting authority (ies).

Site Requirements

- If applicable, shrubs, grass, landscaping, and automatic irrigation system shall be maintained by the owner.
- Site must have a designated dumpster location within a reasonable distance behind the building.
- Provide paved, off-street parking for no less than 10 cars.
- Parking lot striping and handicapped signs shall be provided by the building owner.

Additional Requirements

- Exterior of the building should be attractive, quality construction with brick veneer or an alternative acceptable to the Board.
- Interior finishes provided (carpet, resilient flooring, ceramic tile, cove base, vinyl wall coverings, paint, ceiling systems, and signage package) shall be commercial quality.
- Compliance with the American Disabilities Act (ADA); make all necessary required accommodations for persons with disabilities; i.e. proper ramp, doors opened with closed fist, signage in building accessible, etc. This requirement is subject to change as the ADA is amended or as reasonable accommodations are requested and required.

Quote documents may be mailed to the address below and may also be emailed to <u>rocky.brown@spworkforce.org</u>; or faxed to 806-744-5378

Workforce Solutions South Plains WDB Rocky Brown, Chief Operating Officer 1301 Broadway Suite 201 Lubbock, TX 79401

Deadline for Information Submission

Office hours for the location listed above are Monday through Friday 8: 00am to 5:00pm. This RFQ is open until 5:00pm May 30, 2019. Please call Rocky Brown at 806-744-1987 or email rocky.brown@spworkforce.org if you have questions about this RFQ. This document is available in electronic format and on the website www.workforcesouthplains.org.

ATTACHMENT A- QUOTE COVER SHEET

Name of Organization	
Mailing Address	
City/State/Zip Code	
Authorized Representative -Contact	
Telephone Number	
Fax Number	
Email Address	
Federal Employer ID Number	
State Comptroller ID Number	
HUB	□YES □NO if YES: Certification No.
	Certifying Agency
	Attach a copy of current certification.
Type of Organization	□Corporation □Partnership □ Sole Ownership □Other (describe)
Name & Title of Authorized Signatory	
Signature and Date	

ATTACMENT B- APPLICATION

Physical Address of Proposed Facility		
Name of building owner		
Name of property management company if applicable		
Age of Facility	Year Built:	
Are there currently any tax or other types of liens against the property?	□YES □ NO If YES, identify:	
Does the facility meet ADA requirements	□YES □NO	
Does the facility have ADA bathrooms, how many bathrooms are in the space	□YES □ NO	
Are the elevators ADA compliant		
Is the facility near or convenient to a public transportation stop?	□YES □NO □NA	
Access to facility: Monday through Friday 7:00 a.m. to 6:30 p. m.	□YES □NO	
Are employees able to enter/open the building at any time?	□YES □NO If NO, detail the procedure for off hours entry:	
The office will be occupied by 3 employees. The description of the facility needs is in section III.	Total Square Footage Co-located Space	
Square Footage Cost	\$ per square foot	
Floor Plan	Attach Copy	
Other Occupants	List, if applicable, if building has any other existing occupants	
Insurance Requirements; the	Specify: Please provide a copy of the policy	

owner must provide proof of property insurance.	
How many parking spaces are available: Desired minimum 10 for staff and the public.	Number of parking spaces available
How many ADA accessible parking spaces are available minimum requirement is 1 van accessible. If the parking lot currently does not have a space is there ability to create one.	
Building Maintenance/Repair/Utilities	Owner/landlord willing to accept for repair and maintenance of roof, foundation, parking, plumbing, HVAC, structural soundness, other structures or equipment serving the facility, ceiling tiles, flooring, and any other items considered long-lived assets YES NO Owner/landlord pays utility cost YES NO Comments:
Terms of Lease-i.e. length, renewal, notices, escalation clauses, restrictions, etc. May submit a draft copy of a lease agreement	Owner/landlord willing to accept a five-year lease with a five- year lease option for a total of ten years. YES INO Comments:
Do you agree to the Provision that allows early termination (without penalty) should Workforce Solutions suffer a loss of its public funding equivalent to 15% or more in one year.	□YES □NO Comments:
Would facility be ready to occupy on or before October 1, 2019?	□YES □NO If NO, estimate the date of availability for occupancy:
If you have previously leased	You may attach this information.

space to other entities	
provide contact name and	
phone number.	
Provide any additional	
information you believe to	
be an asset of this location.	

Please attach any additional relevant information:

ATTACHMENT C - CERTIFICATION OF PROPOSER

I hereby certify that the information contained in this proposal and any attachments is true and correct and may be viewed as an accurate representation of proposed services to be provided and the administrative, management and financial systems of this organization. I certify that no employee of Workforce Solutions South Plains has assisted in the preparation of this proposal.

I acknowledge that I have read and understand the requirements and provisions of the RFQ, and that the organization will comply with applicable local, state and federal regulations and directives in the implementation of the program. I also certify that I have read and understand the Governing Provisions and Limitations section presented in this RFP and will comply with the terms.

This proposal is a firm offer for a minimum of 90 days.

١,	, certify that I am the
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(Typed Name)

______of the corporation, partnership, organization, or other

(Typed Title)

entity named as Respondent herein and that I am authorized to sign this proposal and submit it to the Workforce Solutions South Plains Workforce Board on behalf of said organization by authority of its governing body.

(Signature)

(Address)

(Phone)

ATTACHMENT D - TEXAS CORPORATE FRANCHISE TAX CERTIFICATION

Pursuant to Article 2.45, Texas Business Corporation Act, state agencies may not contract with for profit corporations that are delinquent in making state franchise tax payments. The following certification that the corporation entering into this contract is current in its franchise taxes must be signed by the individual on Form 203, Corporate Board of Directors Resolution, to sign the contract for the corporation.

The undersigned authorized representative of the corporation contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

Indicate the certification that applies to your corporation:

□ The Corporation is a for-profit corporation and certifies that it is not delinquent in its franchise tax payments to the State of Texas.

□ The Corporation is a non-profit corporation or is otherwise not subject to payment of franchise taxes to the State of Texas.

Signature

Date

Type Name and Title

ATTACHMENT E - STATE ASSESSMENT CERTIFICATION

The undersigned authorized representative of the firm or individual contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

The firm or individual certifies that:

□ Is current in Unemployment Insurance taxes, Payday and Child Labor law monetary obligations, and Proprietary School fees and assessments payable to the State of Texas.

□ Has no outstanding Unemployment Insurance overpayment balance payable to the State of Texas.

Signature and Date

Type Name and Title

ATTACHMENT F - CERTIFICATION REGARDING CONFLICT OF INTEREST

By signature of this proposal, Proposer covenants and affirms that:

- no manager, employee or paid consultant of the Proposer is a member of the Board, the Executive Director, or an employee of South Plains Regional Workforce Development Board (Board);
- (2) no manager or paid consultant of the Proposer is married to a member of the Board, the Executive Director, or an employee of the Board;
- (3) no member of the Board, the Executive Director or employee of the Board owns or controls more than a 10 percent interest in the Proposer;
- (4) no spouse or member of the Board, Executive Director or employee of the Board is a manager or paid consultant of the Proposer;
- (5) no member of the Board, the Executive Director or employee of the Board receives compensation from Proposer for lobbying activities as defined in Chapter 305 of the Texas Government Code;
- (6) proposer has disclosed within the Proposal any interest, fact or circumstance which does or may present a potential conflict of interest;
- (7) should Proposer fail to abide by the foregoing covenants and affirmations regarding conflict of interest, Proposer shall not be entitled to the recovery of any costs or expenses incurred in relation to any contract with the Board and shall immediately refund any fees or expenses that may have been paid under the contract and shall further be liable for any other costs incurred or damages sustained by the Board relating to that contract.

Disclosure of Potential Conflict of Interest	
Name of	
Organization:	
Name/Title of Authorized	
Signatory:	
Signature	Date:

ATTACHMENT G- CONDITIONS AND LIMITATIONS

- A. The only purpose of this Request for Quote (RFQ) is to ensure uniform information in the solicitation of proposals and procurement of services. This RFQ is not to be construed as a purchase agreement or contract or as a commitment of any kind; nor does it commit the Board to pay for costs incurred prior to the execution of a formal contract unless such costs are specifically authorized in writing by Board.
- B. The Board reserves the right to accept or reject any or all proposals received, to cancel or reissue this RFQ in part or its entirety.
- C. The Board reserves the right to negotiate the final terms of any and all contracts or agreements with bidder(s) selected.
- D. Misrepresentation of the bidder's ability to perform as stated in the proposal may result in cancellation of any contract or agreement awarded.
- E. Bidders shall not, under penalty of law, offer or provide any gratuities, favors, or anything of monetary value to any officer, member, employee, or agent of the Board for the purpose of having an influencing effect toward their own proposal or any other proposal submitted hereunder.
- F. No employee, officer, member or agent of the Board shall participate in the selection, award or administration of a contract if a conflict of interest, or potential conflict, would be involved.
- G. Bidders shall not engage in any activity that will restrict or eliminate competition. Violation of this provision may cause a bidder's bid to be rejected. This does not preclude joint ventures or subcontracts.
- H. Any bidder may withdraw his bid either in person or by written request by a duly authorized representative at any time prior to the scheduled closing time for receipt of bids.
- I. No contract may be awarded until the bidder has complied with Executive Order 12549, 29CFR, Part 98 by submitting to the Board a signed Certification of Debarment, which states that neither the bidders, nor any of its principals, are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in a procurement by any Federal department or agency.
- J. The Board's Chief Operations Officer is the responsible authority for handling complaints or protests regarding the procurement and proposal selection process. No protest shall be accepted by the State until all administrative remedies at the Board level have been exhausted.
- K. Bidders not selected by this process may appeal the Board decision by submitting in writing a formal letter of appeal addressed Chief Operations Officer, Workforce Solutions South Plains, 1301 Broadway, Ste 201, Lubbock, Texas, 79401. This appeal must be sent by registered mail and identified on the envelope as an appeal with the grounds of the appeal clearly stated in the letter, within fourteen calendar days of decision notification (the date on the notification letter). The Chief Operations Officer shall review the appeal and review applicable laws, and request determination if appeal is valid and shall make decisions. If persons are not satisfied with the decision they may pursue all other avenues of appeal provided by law.
- L. Proposals must be manually signed by a person having the authority to bind the organization in a contract.
- M. Any material that is to be considered as confidential in nature must be clearly marked as such and will be treated as confidential by the Board to the extent allowable in the Public Information Act.
- O. Funding for goods or services requested in this RFQ is contingent upon the Board's actual receipt and availability of funds from the Texas Workforce Commission.
- P. Workforce Solutions South Plains is an equal opportunity employer and complies fully with the nondiscrimination and equal opportunity provisions of the following laws: Section 188 of the Workforce Innovation and Opportunity Act (WIOA), which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex,

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national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIA Title I- financially assisted program or activity; Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color and national origin; The Americans With Disabilities and the ADAA, Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities; the Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs.