



REQUEST FOR PROPOSALS  
(RFP)  
FOR  
LAB CONSTRUCTION PROJECT MANAGER  
24RFP002

AUGUST 17, 2023

280 S. DECATUR BLVD.  
LAS VEGAS, NEVADA 89107

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## **SECTION I - INTRODUCTION**

### **A. Purpose**

The Southern Nevada Health District (“Health District”) seeks a qualified construction project manager (“Project Manager”) to oversee the construction (expansion) of a 14,000 square foot Biosafety Level 3 laboratory in Las Vegas, Nevada (“Project”).

The Project Manager will be responsible for managing all aspects of the Project from planning to completion, ensuring adherence to schedule, budget, and quality standards.

### **B. Entity Information**

The Health District was created in 1962 when the State Legislature combined the health departments of the county and several adjoining cities. The Health District is one of the largest local public health organizations in the United States, serving more than 2.3 million residents and safeguarding the public health of more than 40 million visitors to Las Vegas annually.

The mission of the Health District is, “To assess, protect, and promote the health, the environment, and the well-being of southern Nevada communities, residents, and visitors.”

The Health District is governed by the Southern Nevada District Board of Health (“Board”). The Board is vested with jurisdiction over all public health matters within Clark County, Nevada.

### **C. Anticipated Contract Term and Funding**

1. The anticipated contract term will be 16 months from commencement date.
2. Any contract resulting from this RFP will be subject to the availability of funding and shall be terminated immediately if funding is withdrawn, limited, or impaired.

### **D. Ethics in Procurement**

It is unlawful for any Proposer to offer, or any employee of the Health District or their immediate family to solicit or accept a gratuity in connection with the solicitation, award, or administration of any contract or purchase order issued by the Health District.

### **E. Conflict of Interest**

Proposals must contain a statement disclosing or denying any interest, financial or otherwise, that any employee or official of the Health District or the appropriate Advisory Board may have in the in the proposing agency or the proposed project.

## **SECTION II - SCOPE OF SERVICES**

### **A. Responsibilities**

The selected Project Manager will be responsible for the following key tasks:

1. Develop and execute a comprehensive Project plan that outlines Project milestones, timelines, and deliverables.
2. Coordinate and collaborate with architects, engineers, contractors, and other stakeholders to ensure effective communication and Project progress.
3. Manage Project risks, identifying potential issues and developing mitigation strategies.
4. Ensure compliance with all relevant local regulations, building codes, and safety standards.
5. Conduct regular site visits to oversee construction progress and ensure work is performed according to approved plans and specifications.
6. Facilitate regular project meetings to update stakeholders on Project status, milestones, and any issues requiring resolution.
7. Maintain accurate Project documentation, including contracts, change orders, and progress reports.

### **B. Qualifications and Requirements**

1. Minimum of five (5) years of experience in construction project management with a proven track record of successfully managing similar projects.
2. Strong understanding of construction processes, building codes, and regulations.
3. Excellent communication and interpersonal skills to effectively liaise with stakeholders, contractors, and team members.
4. Demonstrated ability to manage project budgets and financial aspects, ensuring cost-effective solutions.
5. Strong organizational skills to effectively manage multiple tasks and priorities.
6. Experience in laboratory construction or similar specialized environments is preferred.

## SECTION III - TIMETABLE AND PROVISIONS

### A. Timetable

RFP Issuance.....	August 17, 2023
Deadline to Submit Questions .....	August 24, 2023
Deadline to Disseminate Questions and Answers .....	August 29, 2023
Deadline to Submit Proposals.....	September 14, 2023
Evaluation Completed/Recommended Award Notification .....	September 21, 2023
Board of Health Consent to Award.....	TBD
Contract Start Date.....	TBD

### B. Authorized Health District Contact

All questions about this RFP from RFP Issuance to Recommended Award Notification shall be directed to the Authorized Contact, **Kevin Bratcher** at [procurement@snhd.org](mailto:procurement@snhd.org). No other person has the authority to respond to questions about this RFP unless expressly authorized by the Authorized Contact. **Proposers that do not adhere to this requirement may be disqualified.**

### C. Questions

Written questions about this RFP must be submitted via email to [procurement@snhd.org](mailto:procurement@snhd.org) by **2:00 PM PDT on August 24, 2023**. All written questions and answers will be posted to [the Health District Public Notices website](#) by **5:00 PM PDT on August 29, 2023**.

### D. Deadline to Submit Proposals

Proposals are due by **2:00 PM PDT on September 14, 2023**.

### E. Proposal Submission

Email one (1) PDF document to [procurement@snhd.org](mailto:procurement@snhd.org). Indicate “24RFP002 Lab Construction Project Manager” in the subject line. Mailed, hand-carried or faxed proposals, or hyperlinks to proposals will not be accepted.

### F. Late Proposals

Proposals submitted after **2:00 PM PDT on September 14, 2023**, will be rejected as late.

## **SECTION IV - REQUIREMENTS**

### **A. Proposer Requirements**

Proposer must meet the qualifications and requirements detailed in section II.B and must:

1. Have a minimum of five (5) years of experience in construction project management.
2. Be qualified to conduct business in Nevada and possess a valid Nevada business license.

### **B. Proposal Requirements**

Complete and submit the following as one PDF proposal document:

#### **1. Cover Letter, Required Documents and Statements**

- a. Submit a cover letter on Proposer's letterhead signed by a legally authorized representative including Proposer's name, address, phone number, email address, website URL; the RFP number and name; and a statement of interest.
- b. Complete and submit Attachment A - Proposal Form.
- c. Provide a copy of Proposer's valid Nevada business license.
- d. Provide an affirmative statement that Proposer, officers, and affiliates are not excluded or debarred from doing business with any local, state, or federal government agency.
- e. Provide an affirmative statement that Proposer, officers, and affiliates are independent of and not related to the Health District or its operations.
- f. Provide an affirmative statement that no conflict of interest exists between Proposer, officers, and affiliates and the Health District or its operations. Provide a list of Proposer's current contracts with the Health District.
- g. Provide a statement disclosing or denying any interest, financial or otherwise, that any employee or official of the Health District or of its governing or advisory boards may have in the Proposer or in the Project.
- h. Disclose all litigation, mediation, arbitration, or other alternate dispute resolution procedures involving Proposer, officers, and affiliates in the past five (5) years.
- i. Disclose all complaints filed with any state regulatory bodies or professional organizations against Proposer, officers, and affiliates.
- j. Provide a list of exceptions to any RFP specifications or requirements and the proposed alternatives. The Health District reserves its right to reject any proposed alternative.

#### **2. Executive Summary**

Describe your view of the working relationship that will be required to successfully complete the Project and your overall understanding of the technical aspects of the Project.

#### **3. Project Plan and Approach**

- a. Describe your overall project plan for accomplishing the Project objectives.
- b. Describe how you will manage the Project budget and ensure cost-effective solutions.
- c. Describe how you will coordinate and collaborate with architects, engineers, contractors, and other stakeholders to ensure effective communication and Project progress.
- d. Describe how you will identify and manage risks, and your strategy to prevent or minimize risks from occurring and to minimize the impact of risks if they occur.

- e. Describe how you will ensure compliance with all relevant local regulations, building codes, and safety standards.
- f. Describe how you will oversee construction progress and ensure that work is performed according to approved plans and specifications.
- g. Describe how you will maintain accurate Project documentation, including contracts, change orders, and progress reports.

#### **4. Qualifications and Experience**

- a. Describe your firm's qualifications and relevant experience.
- b. Describe your firm's construction management experience with similar projects, particularly with laboratory facilities. Provide examples of past relevant projects.
- c. Describe your firm's experience with LEED certification and LEED certified projects.
- d. Describe the qualifications and experience of your proposed Project team. Provide resumes with relevant work history, experience, and certifications for key team members.

#### **5. List of References**

Provide references for at least four (4) clients, preferably governmental entities, for whom Proposer has provided similar services. Include contact names, addresses, phone numbers and email addresses.

#### **6. Price**

Complete and submit Attachment B - Price Form.

### **C. Proposer Representations and Certifications**

- 1. Proposer has read and understands the RFP documents, makes its proposal in accordance therewith, and agrees with and will abide by the RFP terms and conditions.
- 2. Proposer has not communicated about this RFP or its proposal with anyone associated with the Health District in any capacity other than the RFP Authorized Contact.
- 3. Proposer has prepared its proposal independently and without collusion.
- 4. Proposer shall comply with all applicable federal, state, and local laws, regulations and ordinances whether explicitly stated.

### **D. General Conditions**

- 1. Interpretation or Correction of RFP (Documents)
  - a. Proposer shall promptly email the Authorized Contact about any identified error or inconsistency in the RFP and/or to request clarification of the RFP by the Deadline to Submit Questions, except as related to addenda issued after that date.
  - b. Changes to this RFP will be only by written addenda issued by the Authorized Contact or his designee. Addenda will be posted to [the Health District Public Notices website](#). Proposer shall be responsible for ensuring that its proposal reflects all addenda.

2. Responsive Proposal

A responsive proposal is one that conforms in all material respects to the RFP. The Health District reserves its right to waive any technicality, irregularity, or informality in determining responsiveness.

3. Responsible Proposer

A responsible proposer is one who has the capability in all respects to perform fully the contract requirements, and the experience, integrity, perseverance, reliability, facilities, and equipment that will assure good faith performance, and who submits a responsive proposal.

4. Rejection and Cancellation

The Health District reserves its right to reject any proposal that does not conform to the RFP requirements and to reissue or cancel this RFP for any reason or no reason.

5. Modification or Withdrawal of Proposal

Proposer may modify or withdraw its proposal by submitting a written request to the Authorized Contact prior to the Deadline to Submit Proposals.

6. Proposal Costs

The Health District will not reimburse any costs incurred to prepare or submit a proposal.

7. No Guaranteed Contract

This RFP neither creates an offer to contract nor commits the Health District to contract.

8. Limited Contract

The Health District reserves its right to contract for less than the services specified herein.

9. Exclusivity

Nothing in this RFP or any resulting contract precludes the Health District from obtaining services like those specified herein from other sources.

10. Public Records

The Health District is subject to the Nevada Public Records Act. Pursuant to NRS 239.010, et seq., documents provided to the Health District are presumed to be public records open to inspection and copying by any person. Proposals must contain sufficient information to be evaluated without reference to any confidential or proprietary information. Any proposal marked “confidential” or “proprietary,” or that contains materials so marked, may be returned to Proposer, and not considered for award. The Health District will produce documents provided by any Proposer, even if marked “confidential” or “proprietary,” pursuant to a public records request. The Health District will not be liable for disclosure of any Proposer’s documents or information provided to the Health District.



## SECTION V - EVALUATION & SELECTION

Proposals submitted by the Deadline to Submit Proposals will be reviewed for responsiveness to the RFP requirements. Responsive proposals will be evaluated per the following Evaluation Criteria. The Health District reserves its right to consider any other factors when evaluating proposals and Proposers if doing so is in the Health District's best interests.

### A. Evaluation Criteria

Criteria Description	Maximum Score
Project Plan and Approach	35
Qualifications and Experience	30
References	20
Price	15

### B. Clarification and Interviews

1. The Health District reserves its right as it deems necessary or appropriate to contact Proposers to clarify proposals or to obtain additional information, and/or to conduct site visits and/or interviews, and/or to request that Proposers make presentations.
2. The Health District reserves its right to base its decision solely on written proposals, irrespective of any other interactions with Proposers as referenced in paragraph B.1.

### C. Selection

1. The proposal selected for award, if any, will be the one that is most beneficial regarding Proposer's experience, qualifications and capabilities and price, and/or that best meets the Health District's needs.
2. If the Health District is unable to finalize a satisfactory contract with the selected Proposer within a reasonable time, the Health District shall formally terminate discussions with the selected Proposer and at its sole discretion begin discussions with another Proposer or cancel and reissue the RFP.
3. Any award/contract will be presented to the Board for consent as required.

## ATTACHMENT A

### Proposal Form

Complete and submit Attachment A. Indicate “None” as applicable.

The undersigned, as an authorized representative of the company named below, acknowledges that they have examined this Request for Proposals and all related documents, and hereby offers to furnish all labor, materials, tools, supplies, equipment, and services necessary to comply with the specifications, terms and conditions set forth herein for the firm fixed price per Attachment B - Price Form.

Company name:	
Company headquarters address:	
Company website:	
Ownership type (i.e., partnership, corporation):	
Company officers' names, titles, and number of years providing construction management services:	
Number of years in business:	
Number of employees:	
Federal tax ID number:	
Nevada business license number:	
Sam.gov unique entity identifier (UEI):	
Dun & Bradstreet D-U-N-S number:	
Does the proposal include exceptions to any RFP specifications or requirements?	Yes                      No

Signer acknowledges receipt of addenda issued/posted to [the Health District Public Notices website](#):

Addendum No. \_\_\_\_\_ Issue Date \_\_\_\_\_

Addendum No. \_\_\_\_\_ Issue Date \_\_\_\_\_

Addendum No. \_\_\_\_\_ Issue Date \_\_\_\_\_

Addendum No. \_\_\_\_\_ Issue Date \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## ATTACHMENT B

### Price Form

Complete and submit Attachment B signed by Proposer's authorized representative. The Total Firm-Fixed Price shall comprise **all costs** including all out-of-pocket expenses necessary to provide the RFP scope of services.

**Total Firm-Fixed Price**    \$ \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_