# CITY OF WALTHAM REQUEST FOR PROPOSALS TRAFFIC DESIGN SERVICES – INTERSECTION OF LEXINGTON STREET, BACON STREET AND TOTTEN POND ROAD

The City of Waltham requests proposals from experienced Traffic Design and Signal Consultants to design the traffic signal placement and any roadway or pavement changes for the above intersection. (See attached diagram of current traffic signals) (Exhibit A)

### I. INTRODUCTION

Whereas, the intersection of Lexington Street, Totten Pond Road and Bacon Street is a well-travelled intersection (Exhibit B);

Whereas, said intersection has several problems including:

- a. Traffic travelling southbound on Lexington Street encounters head-on traffic lanes travelling northbound on Lexington Street, resulting in a dangerous condition and weave on Lexington Street;
- b. Three lanes of traffic currently exist at the mouth of Totten Pond Road. One lane proceeds to a left hand turn onto Lexington Street, and two lanes proceed right, one onto Lexington Street and one onto Bacon. Those two right-hand lanes swing left when taking a right-hand turn causing a dangerous shift in the intersection.

### II. BACKGROUND

Whereas, the City of Waltham acquired the property at 380 Lexington Street (See attached plan, which also delineates the 100 and 200 foot riverfront area and the 100 foot buffer to the bordered vegetative wetlands) (Exhibit C);

Whereas, prior to the purchase, the City's Traffic Commission and the City's private Master Plan Consultant analyzed the intersection, and the suggestions of the City's Traffic Engineer;

To date, placement of traffic signals has not been performed by the City's Traffic Engineer or Master Plan Traffic Consultant with regard to any plan;

The purpose of this Request for Proposals is to design the placement of the traffic signals on Lexington Street, Bacon Street and Totten Pond Road and associated roadwork and pavement improvements to eliminate the issues in a) and b) above now that 380 Lexington Street side yard and frontage are available;

Proposals will be received at the Office of the Purchasing Agent, City Hall, 610 Main Street, Waltham, MA 02452, until **10 a.m. on February 28, 2017.** 

A **Pre-bid briefing and site inspection** will be held **1.00 pm. February 21, 2017.** Meet at 380 Lexington Street, Waltham.

Three (3) copies of the Traffic Design Services Proposals shall be submitted in sealed envelopes with Proposer's name and clearly labeled "Traffic Services Proposals for Intersection of Lexington Street, Bacon Street and Totten Pond Road."

The Proposals will be evaluated based upon price and qualifications. Draft contract attached.

All proposals must comply with Chapter 30B of Massachusetts General Laws. All proposals are subject to funding. The City reserves the right to accept or reject any or all proposals and to make awards as it determines to be in the best interest of the City. Any questions pertaining to this Request for Proposal are to be directed to Joseph Pedulla, MCPPO, CPO, Purchasing Agent, City of Waltham, City Hall, 610 Main Street, Waltham, MA 02452, Tel. 781-314-3244, Email: jpedulla@city.waltham.ma.us.

### III. SCOPE OF SERVICES

A. The City desires to correct the dangerous conditions in the intersection, particularly those mentioned above in the Introduction sections a) and b).

The Project will include:

- 1. Placement of traffic signals.
- 2. Placement of stop lines.
- 3. Design and placement of traffic lanes from Lexington to Lexington Street, Lexington to Bacon Street and Totten Pond Road to Lexington to Bacon and vice versa for the above.
- 4. Any recommendation and design to address the dangerous conditions.
- 5. Recommendations regarding any curbs, sidewalks, paving, street markings, islands, utility poles and traffic coordination.
- 6. Review and coordination of the traffic and signal solution with Lincoln Street, Dale Street, Beaver Street and the other surrounding roadways.

The front yard and side yard of 380 Lexington Street are to be utilized as part of the solution to the signal and intersection improvements.

### B. The Designer will be responsible for:

- 1. Design listed above.
- 2. Prepare specifications for bid documents and final bid documents.
- 3. Attend at least three meetings with Wires Inspector and Traffic Engineer.
- 4. Prepare any necessary filings with local, state and federal agencies.
- 5. Answer technical questions during the bid process
- 6. Construction oversight during the entire construction period.
- 7. Final construction bid documents will be due within 60 days of the date of award.

### IV. QUALIFICATIONS

Licensed Engineer, preferably a Traffic Engineer, with proof of demonstrated experience with traffic signal, traffic design, and associated amenities for at least 5 similar projects.

### V. <u>REQUIRED SUBMISSION</u>

- 1. Professional liability insurance in the amount of \$1,000,000.00, worker's comp and automobile insurance.
- 2. Name, address and contact information of all MA governmental units to which the Proposer has provided similar design service.
- The name, address, contact person's name and telephone number of all
  private sector clients to which the proposer has provided similar design
  consulting services and a brief synopsis of the services provided, including
  contract dates.
- Resumes of key personnel who will be interacting with the City including a statement of professional experience, qualifications and education together with a report of specific experience related to the scope of services.
- 5. A Plan of Services detailing specifically how the proposer will complete the scope of work.
- 6. Completed Compliance section.

# Request for Professional Services

Design – Intersection of Lexington St., Bacon St., and Totten Pond Road Placement of traffic signals, curbs and sidewalks, paving, street markings, any necessary islands, and moving of any utility poles

### **COST EVALUATION FORM**

Scope of Work	# of Hours	Task Cost
Task 1 – Survey Review Bacon, Lexington, Totten Pond Rd intersection		
Task 2 – Complete Design/ Cost Estimates for Placement of traffic signals, curbs and sidewalks, paving, street markings, any necessary islands, and moving of any utility	poles	
Task 3 – Construction Drawings/ Specifications/Final Cost Estimates		
Task 4 – Bid Procedures Limited to reviewing bids, checking references, making recommendation for award, answer questions and attend a Pre-bid meeting.		
Task 5 – Construction Inspections/ Oversight		
	Project Total:	:
Prepared for the City of Waltham		
By: Company's Name	Date:	

### **AGREEMENT**

### CITY OF WALTHAM

	This agreement, mad TY OF WALTHAM, pa R, and	 •	
Hereinafter called th	ie CONTRACTOR.		

**ARTICLE 2.** Witnesseth, that the parties to this agreement, each in consideration of the agreement on the part of the others herein contained, do hereby agree, the CITY OF WALTHAM for itself, and said contractor for his heirs, executors, administrators and assigns as follows:

To furnish all equipment, machinery, tools and labor, to furnish and deliver all materials required to be furnished (except as otherwise specified) and deliver in and about the project and to do and perform all work in strict conformity with the provisions of this Contract and of the Notice to Bidders, Bid, Project Manual, and Drawings hereto annexed. The said Notice to Bidders, Bid, Project Manual, documents submitted in response to the bid and Drawings are hereby made a part of this contract as fully and to the same effect as if the same had been set forth at length and incorporated in the contracts.

ARTICLE 3. In consideration of the foregoing premises the CITY agrees to pay and the CONTRACTOR agrees to receive as full compensation for everything furnished and done by the CONTRACTOR under this contract, including all work required but not included in the items herein mentioned, and also for all loss or damage arising out of the nature of the work aforesaid, or form the action of the elements, or from any unforeseen obstruction or difficulty encountered in the prosecution of the work, and for all expenses incurred by or in consequence of the suspension or discontinuance of the work specified, and for well and faithfully completing the work, and the whole hereof, as herein provided, such prices as are set forth in the accompanying bid.

This Agreement entered into as of the day and year first written above.

### CITY OF WALTHAM, MASSACHUSETTS

FOR THE CITY	FOR THE COMPANY			
Jeannette A. McCarthy, MAYOR,	CONTRACTOR (Signature),			
City of Waltham	Date:			
Date:				
	Company			
	Address			
John B. Cervone, City Solicitor Date: APPROVED AS TO FORM ONLY				
Joseph Pedulla, Purchasing Agent Date:				
Paul Centofanti, Auditor Date: I CERTIFY THAT SUFFICIENT FUNDS ARE AVAILABLE FOR THIS CONTRACT				
Timothy Kelly, Wires Inspector and Traffic Signal Maintenance Date:				

# **COMPLIANCE FORMS** (PLEASE COMPLETE AND SUBMIT THESE FORMS WITH YOUR RESPONSE)

### NON-COLLUSION FORM AND TAX COMPLIANCE FORM

### **CERTIFICATE OF NON-COLLUSION**

The undersigned certifies under penalties of perjury that this bid or proposal has been made and submitted				
in good faith and without collusion or fraud with any other person. As used in this certification, the word				
"person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other				
organization, entity or group of individuals. The undersigned certifies that no representations made by any				
City officials, employees, entity, or group of individuals other than the Purchasing Agent of the City of				
Waltham was relied upon in the making of this bid				
(Signature of person signing bid or proposal)Date				
(Name of business)				
TAX COMPLIANCE CERTIFICATION				

Pursuant to M.G.L. c. 62C, & 49A,I certify under t knowledge and belief, I am in compliance with all l of employees and contractors, and withholding and	nws of the Commonwealth rela	•
Signature of person submitting bid or proposal	Date	
Name of business		
NOTE		
Failure to submit any of the required documents, in package may cause the disqualification of your property.		our bid response

### **CERTIFICATE OF VOTE AUTHORIZATION**

Date:			
l	, Clerk of		hereby certify
that at a meeting of	the Board of Directors o	f said Corporation duly held on t	the day of
		um was present and voting throเ	ughout, the
following vote was	duly passed and is now in	full force and effect:	
VOTED: That	(nar	ne) is hereby, authorized, directe	d and empowered
		on to sign, seal with the corpora	
acknowledge and d	eliver all contracts and ot	ther obligations of this Corporati	on; the execution
of any such contrac	t to be valid and binding	upon this Corporation for all pur	poses, and that
this vote shall rema	in in full force and effect	unless and until the same has be	een altered,
		of such directors and a certificate	of such later vote
attested by the Cler	k of this Corporation.		
I further certify that	:	is duly elected/appointed	
		on whose signature appears belo	
		Signature of Officer	
SIGNED:		3.8.1444.6 31 311.361	
	<del></del>	(Corporate Se	eal)
Clerk of the Corpora	ation:		
Print Name:			
	COMMONWEAL	TH OF MASSACHUSETTS	
_			
County of	<del></del>	Date:	
Then personally app	peared the above named	and acknowledged the foregoing	g instrument to be
		ovided to me through satisfactor	-
whose name is sign	ed on the preceding or at	ttached document in my presenc	ce.
Notary Bublica			
Notary Public;			
My Commission exp	oires:		

### **CORPORATION IDENTIFICATION**

The bidder for the information of the Awarding Authority furnishes the following information. If a Corporation: Incorporated in what state \_\_\_\_\_ President \_\_\_\_\_ Treasurer \_\_\_\_\_ Secretary \_\_\_\_\_ Federal ID Number If a foreign (out of State) Corporation – Are you registered to do business in Massachusetts? Yes \_\_\_\_\_, No \_\_\_\_\_ If you are selected for this work you are required under M.G.L.ch. 30S, 39L to obtain from the Secretary of State, Foreign Corp. Section, State House, Boston, a certificate stating that you Corporation is registered, and furnish said certificate to the Awarding Authority prior to the award. If a Partnership: (Name all partners) Name of partner \_\_\_\_\_ Residence \_\_\_\_\_ Name of partner \_\_\_\_\_ Residence \_\_\_\_\_ If an Individual: Name \_\_\_\_\_ Residence If an Individual doing business under a firm's name: Name of Firm \_\_\_\_\_ Name of Individual \_\_\_\_\_ Business Address \_\_\_\_\_ Date Name of Bidder Signature \_\_\_\_\_ Business Address (POST OFFICE BOX NUMBER NOT ACCEPTABLE) Telephone Number Today's Date City State

### **DEBARMENT CERTIFICATION**

In connection with this bid and all procurement transactions, by signature thereon, the respondent certifies that neither the company nor its principals are suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from the award of contracts, procurement or non procurement programs from the Commonwealth of Massachusetts, the US Federal Government and /or the City of Waltham. "Principals" means officers, directors, owners, partners and persons having primary interest, management or supervisory responsibilities with the business entity. Vendors shall provide immediate written notification to the Purchasing Agent of the City of Waltham at any time during the period of the contract of prior to the contract award if the vendor learns of any changed condition with regards to the debarment of the company or its officers. This certification is a material representation of fact upon which reliance will be placed when making the business award. If at any time it is determined that the vendor knowingly misrepresented this certification, in addition to other legal remedies available to the City of Waltham, the contract will be cancelled and the award revoked.

Company Name			
Address			
City	, State	, Zip Code	
Phone Number ()			
E-Mail Address			
Signed by Authorized Com	pany Representative:		
	Print n	ame. Date	

# **PROVIDE THREE (3) SERVICE APPROPRIATE REFERENCES**

1. Company Name:

Address:

NOTE

	Contact Name: Phone # Type of service/product provided to this Company:
	Dollar value of service provided to this Company:
2.	Company Name: Address: Contact Name: Phone # Type of service/product provided to this Company:
	Dollar value of service provided to this Company:
3.	Company Name: Address: Contact Name: Phone # Type of service/product provided to this Company:  Dollar value of service provided to this Company:

Failure to submit any of the required documents, in this or in other sections, with your

bid response package will be cause for the disqualification of your company

Department of the Treasury Internal Revenue Service

### **Request for Taxpayer Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return)		
S I	Business name/disregarded entity name, if different from above		
s on page	Check appropriate box for federal tax classification:  Individual/sole proprietor  C Corporation  S Corporation  Partnership	Trust/estate	
cific Instructions	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partne	ership) ►	Exempt payee
Inst	☐ Other (see instructions) ▶		
8	Address (number, street, and apt. or suite no.)	Requester's name and add Chief Procurement Office Purchasing Department,	er
26e <b>S</b>	City, state, and ZIP code	610 Main Street Waltham, MA 02452	
Ì	List account number(s) here (optional)		
ar			
avo ide titie:	your TIN in the appropriate box. The TIN provided must match the name given on the "Name id backup withholding. For individuals, this is your social security number (SSN). However, fint alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other, it is your employer identification number (EIN). If you do not have a number, see How to grape 3.	ora er –	number —
te.	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	Employer identi	fication number

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign & Date

Signature of Here U.S. person ▶

### Date ▶

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

### **Purpose of Form**

Sign

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
  - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

# CERTIFICATE OF AUTHORITY LIMITED LIABILITY COMPANY

The undersigned, be manager) of a Massachusetts limited L					nember /
Does Hereby Certify	that				
1. The Articles of Organi Secretary of State of the and the Articles of Organi	State of Ma	ssachusetts o	n		
<ol><li>The Company has cor</li><li>of the Limited Liability 0</li></ol>	•	•	requirements	contained in	n Section
3. There exists an Opera Agreement has not been remains in full force and e	amended or	repealed and	. ,		
4. Neither the Articles of require any further act to I follows:	•			,	,
<ol> <li>All said requirements,</li> <li>Operating Agreement or b</li> <li>have been met.</li> </ol>					
6. The following person of execute all documents is appearing to the right of the	n connection	n with said tra	ansaction and		
NAME	OFFIC	E HELD	SIG	NATURE	

IN Witness Whereof, the undersigned has executed this Certificate of Authority theday of, 20
(Signature)
STATE OF MASSACHUSETTS, COUNTY OF
On theday of, 20, before me, the undersigned personally appeared, personally known to me of proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me the he/she/ they executed the same in his/her/their capacity(ies), and that by his/her/the signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.
Notary Public:
My Commission Expires:
Notary Stamp:





