INVITATION FOR BID

Arlington Public Schools
Purchasing Office

June 30, 2017

ADDENDUM NO. 1

IFB #: #33FY17

TITLE: TERM CONTRACT FOR PROVISION OF TAXICAB SERVICES FOR STUDENTS

DUE DATE: Friday, July 7, 2017, prior to 2:00 PM, Local Prevailing Time

THE SUBJECT INVITATION FOR BID IS AMENDED AS FOLLOWS:

1. On Page 1, the 2nd Paragraph that states “a minimum of two (2) term contracts” is incorrect. Delete the 2nd Paragraph and replace it with the one below.

   Bids received at, or after, 2:00 P.M. Local Prevailing Time on July 7, 2017, shall not be considered. Bids will be publicly opened and read for the establishment of a minimum of one (1) term contract for PROVISION OF TAXICAB SERVICES FOR STUDENTS.

2. On Page 4, delete Section 3.2.10 and Section 3.2.10.1 and replace with the new language below that removes the requirement to provide a copy of background checks and adds a requirement to provide copies of your Arlington County Public Vehicle Drivers License.

   3.2.10 Drivers must be certified through Arlington County with background checks including fingerprinting. Evidence of the background check must be shown by providing copies of Arlington County Public Vehicle Driver’s Licenses for each driver that will be assigned to APS work.

   3.2.10.1 Background checks must be performed for each driver assigned to transport APS students when they renew their Public Vehicle Driver’s License. Evidence of the renewal must be provided at the time of license renewal.
3. On Page 4, after Section 3.4.1.1 insert the statement below.

3.4.1.1 APS will use the table below as proof of a valid Certificate of Public Convenience and Necessity. It shows the number of authorized Taxicabs in Arlington as of October 2016, as posted on the County web site.

Current Number of Authorized Taxicab Certificates by Company
Last updated October 2016

<table>
<thead>
<tr>
<th>Company/Certificate Holder</th>
<th>Number of Taxicabs</th>
<th>Hybrid</th>
<th>Wheelchair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red Top</td>
<td>355</td>
<td>111</td>
<td>28</td>
</tr>
<tr>
<td>Blue Top</td>
<td>181</td>
<td>100</td>
<td>19</td>
</tr>
<tr>
<td>Arlington Yellow Cab</td>
<td>100</td>
<td>87</td>
<td></td>
</tr>
<tr>
<td>EnviroCab</td>
<td>50</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>All Access</td>
<td>50</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Friendly Cab</td>
<td>39</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>Crown Cab</td>
<td>37</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Hess Cab</td>
<td>35</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>847</strong></td>
<td><strong>410</strong></td>
<td><strong>97</strong></td>
</tr>
</tbody>
</table>

4. On Page 4, delete Section 3.4.3.3 and Section 3.4.3.4 and replace with the new language below that adds “For taxicab companies providing handicap service”.

3.4.3.3 For taxicab companies providing handicap service a minimum of five (5) wheelchair accessible vehicles available to service APS assignments as needed.

3.4.3.4 For taxicab companies providing handicap service a minimum of two (2) vehicles having drop down seats.

5. On Page 8, delete Section 10.1.2 and Page 28 delete Section 65.1.2 and replace with the new language below that changes the Commercial General Liability from $2,000,000 to $1,000,000.

10.1.2 Commercial General Liability - $1,000,000 general aggregate covering all premises and operations and including Personal Injury, completed Operations, Contractual Liability, Independent Contractors, and Products Liability. The general aggregate limit shall apply to this project. Evidence of Contractual Liability coverage shall be typed on the certificate.

65.1.2 Commercial General Liability - $1,000,000 general aggregate covering all premises and operations and including Personal Injury, Completed Operations, Contractual Liability,
Independent Contractors, and Products Liability. The general aggregate limit shall apply to this project. Evidence of Contractual Liability coverage shall be typed on the certificate.

6. On Page 12, CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY, delete this section and replace with the language below that removes the requirement to provide Certificate Numbers and copies of them.

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

In submitting this bid, the Bidder certifies that the firm signing this bid and registered under that name is legally qualified, in accordance with the regulations of Arlington County Code Chapter §25.1, to provide Taxicab services.

Bidder Questions and APS Responses

Question 1: On Page 1 please explain the meaning of “for the establishment of a minimum of two (2) term contracts”.

Answer 1: See the correction in 1. on Page 1 above. The “establishment of a minimum of one (1) term contract” means that APS has the option to award to more than one Responsive and Responsible bidder.

Question 2: In Section 3.2.1 APS requests a copy of the meter receipt be submitted along with the trip log on all invoices. Our drivers submit both a trip log and the meter receipt to the office which we cross check to insure accuracy and the trip log is then scanned and an invoice is created based on this info. In the past we have not sent this scanned trip log along with the invoice but it has always been available if requested. Can we continue this process.

3.2.1 The Contractor shall forward trip logs along with the Taxicab meter receipts, during the billing month, to the appropriate APS Program Contact Individual identified herein, along with an invoice for payment. Each APS program area will issue a separate Purchase Order identifying the address to which the Contractor shall send the invoices. The invoices shall be billed to the correct APS program area on a monthly basis. The invoices shall be submitted for payment within thirty (30) days of receipt by the Taxicab driver.

Answer 2: No. The scanned trip log must accompany all invoices. No meter receipt is needed.
Question 3: In Section 3.2.1 APS requests a monthly invoice. Our billing periods close on the 15th and the last day of the month. Will APS accept billing twice a month?

Answer 3: Yes

Question 4: In Section 3.2.10.1 APS requests a copy of the driver background check be submitted with the bid. Background checks are performed on all drivers by the Arlington County Police Department and they retain those records. A new background check is done each time the driver applies to renew his Public Vehicle Driver’s License. Since we do not have a copy of the background check to attach to the bid, may we provide copies of Public Vehicle Driver’s Licenses as proof?

3.2.10 Drivers must be certified through Arlington County with background checks including fingerprinting and provide a copy of the certification along with the bid.

3.2.10.1 Background checks must be performed annually for each driver assigned to transport APS students. Evidence of the checks must be provided at the annual renewal date of the contract.

Answer 4: Yes, APS will accept copies of the Arlington County Public Vehicle Driver’s Licenses as proof of the background check. See changes to Section 3.2.10 and 3.2.10.1 on page 1 of this Addendum. Drivers must submit a copy of their Public Vehicle Driver’s License after each license renewal.

Question 5: In Section 3.2.11 APS requests a proof of Tuberculosis Testing for the drivers. This is not a requirement to obtain an Arlington County Public Vehicle Driver’s License and would be unduly burdensome and an additional expense that would discourage driver participation in this bid. Can this requirement be reconsidered?

3.2.11 Drivers must provide proof of Tuberculosis Testing prior to contract award.

Answer 5: No. APS requires our employees of vehicles that transport students to have this test and we are extending that to taxi drivers also.

Question 6: In Section 3.4.3 Fleet Requirements. With the low volume of trips, we feel that we can meet the performance standards of this contract with fewer than five wheelchair accessible taxis. Would APS consider reducing the number of wheelchair accessible vehicles required?

3.4.3 Fleet Requirements
3.4.3.1 Minimum of fifteen (15) full time drivers dedicated to serve APS assignments on an as-needed basis.

3.4.3.2 Minimum of thirty (30) vehicles dedicated to service APS assignments as needed.

3.4.3.3 For taxicab companies providing handicap service a minimum of five (5) wheelchair accessible vehicles available to service APS assignments as needed.

3.4.3.4 For taxicab companies providing handicap service a minimum of two (2) vehicles having drop down seats.

Answer 6: No. The minimums listed in 3.4.3 take into consideration scheduled maintenance, breakdowns and other issues that may reduce the ability of the contractor to provide timely service.

Question 7: In Section 3.4.3.4 Please clarify what is meant by “drop down seats” and their purpose in the requirement.

3.4.3.4 Minimum of two (2) vehicles having drop down seats.

Answer 7: Drop down seats are folding seats attached to the back of a forward facing seat. They are normally found in SUVs certified for wheelchair access and are used by attendants that are accompanying handicap students. Adequate seating is required for the attendants traveling with students.

Question 8: In Section 4.0 APS requests 3 “commercial” references. Would APS accept Arlington County references instead?

Answer 8: Yes, Arlington County as a reference is acceptable.

Question 9: In Section 10.1.6 Business Automobile Liability. The Arlington County Taxicab Ordinance requires coverage of $100,000 for bodily injury per person, $300,000 for bodily injury per occurrence and $50,000 for property damage per occurrence. Why is APS asking for $1,000,000?

10.1.6 Business Automobile Liability - $1,000,000 Combined Single Limit (Owned, non-owned and hired).
**Answer 9:** APS has lowered the Commercial General Liability limit in Section 10.1.2 from $2,000,000 to $1,000,000 (see 4. On page 2 of this Addendum) but we are firm on the $1,000,000 limit in 10.1.6.

**Question 10:** On Page 12, CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY requires bidders to provide Certificate numbers issued by Arlington County. The County only provides a statement that says we are authorized. Is this acceptable

**Answer 10:** See 3 on Page 2 and 6 on Page 3 of this Addendum that changes this requirement.

**Question 11:** The Pricing Schedule asks for a quote for a discount for disabled students. How is the taxi company to determine which students are disabled? Are students with a disability for which a discount may be given exclusively within one of the identified program areas?

<table>
<thead>
<tr>
<th></th>
<th>DISCOUNT FOR STUDENTS WITH DISABILITIES (Per Arlington County Code §25.1-12.J not to exceed 25%).) Bidders may enter zero.</th>
<th>% DISCOUNT</th>
<th>%</th>
<th>$54,000.00</th>
<th>($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Answer 11:** All the students in the Special Ed program have disabilities. The $54,000.00 amount in Line 4 of the Pricing Schedule is the amount that was spent in the last year by this program for taxi service. It is possible that Project Extra Step (McKinney-Vento) and Teen Parenting programs may have a student that is disabled using the taxi service but most are not. County Code §25.1-12.J does not require taxicab drivers to offer a discount but it is an option. Bidders may enter zero for the percentage off in line 4.

**Question 12:** If my company does not have any wheelchair accessible cabs, may I still bid on this ITB and be eligible for award.

**Answer 12:** Yes. If your company name appears in the Table in 3 on Page 2 of this addendum you may bid, and will be eligible for a contract that would not include the transporting of students that require wheelchair transportation.
This Addendum #1 for ITB 33FY17 – PROVISION OF TAXICAB SERVICES FOR STUDENTS, must be signed, dated and received in the Purchasing Office prior to the date and time stated above “OR” acknowledgement of receipt of this addendum may be noted on the Bid Form on Page 14 of the Invitation To Bid.

NAME OF OFFEROR: ________________________________________________

Address: _________________________________________________________

SIGNATURE: ______________________________________ DATE: ______________

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