

RE-ADVERTISED
COUNTY OF MOORE
NORTH CAROLINA
INVITATION FOR BID

ISSUE DATE: April 24, 2025

IFB: 2025-04

TITLE: REPLACE SANITARY SEWER LIFT STATION 3-3 PROJECT

ISSUING DEPARTMENT: COUNTY OF MOORE
1 Courthouse Square
Carthage, NC, 28327

Sealed Bids will be received until **4:00:00 PM EST Wednesday, June 4, 2025** from qualified Contractors for the **Replace Sanitary Sewer Lift Station 3-3 Project** for the Moore County Public Works Department. Bid opening is public.

For your convenience, a Bid Drop-off Box is located in the lobby at 1 Courthouse Square, Carthage, NC 28327. A Pre-Bid/Site Visit will be held at 2:00 pm Wednesday, May 28, 2025, beginning at 5227 HWY 15-501 Carthage, NC 28327. For your convenience, a Bid Drop-Off box is located in the lobby at 1 Courthouse Square.

All inquiries for information concerning Instructions to Bidders, Bid Submission Requirements or Procurement Procedures shall be directed to (in writing):

Terra Vuncannon, Purchasing Manager
1 Courthouse Square
Carthage, NC 28327
(910) 947-4017
tvuncannon@moorecountync.gov

Sealed Bids shall be mailed and/or hand delivered to the Issuing Department shown above, and the envelope shall bear the name and number of this Invitation for Bids. It is the sole responsibility of the Bidder to ensure that its bid reaches the Issuing Department by the designated date and hour indicated above.

In compliance with the Invitation for Bids and to all the terms and conditions imposed herein, the undersigned offers and agrees to furnish the services and install the goods described in accordance with the attached signed bid.

Firm Name: _____ Date: _____

Address: _____ Phone: _____

By: _____
(typed)

By: _____
(signed)

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INSTRUCTIONS TO BIDDERS

1. **Sealed Bid shall be submitted to the Issuing Department and include the enclosed Bid Form.** In order for a bid to be considered, it shall be based on the terms, conditions and specifications contained herein and shall be a complete response to this Formal Bid. The County reserves the right to make an award in whole, or in part, and to reject any and/or all bids, and to waive any informality in bids unless otherwise specified by the Bidder. The Proposer shall sign the bid correctly and bids may be rejected if they show omissions, alterations of form, additions not called for, conditional bids or any irregularities of any kind.
2. All labor costs, direct and indirect, shall have been determined and included in the proposal. The cost and availability of all equipment, materials, and supplies associated with performing the services described herein shall have been determined and included in the bid. Do not include sales tax in bid figures. The County pays sales tax and will add this to your bid figures separately when invoices are paid. All price quotes shall include delivery to the delivery point, installation, and set-up charges, as necessary. Goods shall be set in place ready for owner's use. All goods shall be new and of average quality. No remanufactured, refurbished or used goods will be accepted. Appropriate product information (e.g. brochures, catalog cuts, etc.) shall be included with the bid.
3. After the Formal Bid issue date, all communications between the Issuing Department and prospective Bidders shall be in writing. No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to Terra Vuncannon at the address listed on page one if this solicitation or via e-mail to tvuncannon@moorecountync.gov. All questions concerning this Formal Bid shall reference the section and page number. Questions and responses affecting the scope of goods will be provided to all prospective Bidders by issuance of an Addendum. **All written questions shall be received by Terra Vuncannon at tvuncannon@moorecountync.gov no later than 10:00 am Thursday, May 29, 2025. NO EXCEPTIONS. Please include "IFB 2025-04" in subject header of e-mail.** All addendums pertaining to this Formal Bid will be posted to the County website at www.moorecountync.gov within 24 – 48 business hours after the deadline for questions. **It is the bidder's responsibility to check the website for the addendums.**
4. The County will not be responsible for any oral instructions. Should a Bidder find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, s/he should at once notify the Issuing Department in writing, and a written addendum shall be issued. Acknowledgement of any Addendum received during the time of the bid shall be noted on the Bid Form in the spaces provided. In closing of a contract, any Addendum issued shall become a part thereof. **It is the Bidder's responsibility to ensure that all addenda have been reviewed, signed and returned.**
5. Bids will be examined promptly after opening and award will be made at the earliest possible date. The prices quoted must be held firm, and no bids may be withdrawn until **90 days** after bid opening date. The County reserves the right to conduct any test/inspection it may deem advisable to ensure services/materials/supplies/equipment, as

appropriate, conform to specifications.

6. Pursuant to North Carolina General Statutes Section 143-129, "award shall be made to the lowest responsible, responsive bid or bidders, taking into consideration quality, performance and the time specified in the bids for the performance of the contract."
7. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each Bidder shall plainly set forth the warranty for the goods in the bid. Operations and maintenance manuals for equipment shall also be provided, as appropriate.
8. All purchases for goods or services are subject to the availability of funds for this particular purpose.
9. The General Statutes of the State of North Carolina, insofar as they apply to purchasing and competitive bidding, are made a part hereof.
10. The County of Moore is committed to creating and maintaining an environment free from harassment and other forms of misconduct that fundamentally compromise the working environment of the County. All contractors performing work/services at a County facility shall take all necessary steps to assure that none of its employees engage in harassment or intimidation relating to personal beliefs or characteristics of anyone on the County's premises, including but not limited to, race, religion, age, color, sex, national origin or disability. Such harassment is unacceptable and will not be condoned in any form at the County of Moore. If such conduct occurs, the contractor will take all necessary steps to stop it and prevent its future occurrence. This policy shall be strictly enforced.
11. For all the work being performed under this Contract, the County of Moore has the right to inspect, examine, and make copies of any and all books, accounts, records and other writing relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the vendor/contractor must make the materials to be audited available within one (1) week of the request for them.
12. Bidders are cautioned that this is a formal bid, not a request for contract, and the County of Moore reserves the right to reject any and/or all bids. It further reserves the right to waive informalities insofar as it is authorized so to do where it deems it advisable in protection of the best interests of the County.
13. Bids will be tabulated, evaluated and a recommendation presented to the County of Moore Board of Commissioners for their approval.
14. Any and all exceptions to the Specifications must be stated in writing, giving complete details of what is to be furnished in lieu of requested Specifications.
15. The County of Moore reserves the right to cancel and terminate any resulting contract, in whole or in part, without penalty, upon forty-five (45) days' notice to the Vendor(s). Any contract cancellation shall not relieve the Vendor(s) of the obligation to deliver any

outstanding services issued prior to the effective date of the cancellation.

16. **Bids in one (1) original and one (1) copy will be received from each Bidder in a sealed envelope or package. Please include the following information on the bid envelope: "IFB 2025-04".** Each original shall be signed and dated by an official authorized to bind the form. Unsigned bids will not be considered.
17. Upon receipt by Moore County Financial Services, your Bid is considered a public record except for material which qualifies as "trade secret" information under N.C. Gen. Stat. 66-152 et. seq. After the Bid opening, your Bid may be reviewed by the County's evaluation committee, as well as other County staff and members of the general public who submit public records requests. To properly designate material as trade secret under these circumstances, each Bidder must take the following precautions: (a) any trade secrets submitted by a Bidder must be submitted in a separate, sealed envelope marked "Trade Secret — Confidential and Proprietary Information — Do Not Disclose Except for the Purpose of Evaluating this Bid," and (b) the same trade secret/confidentiality designation must be stamped on each page of the trade secret materials contained in the envelope.

In submitting a Bid, each Bidder agrees that the County may reveal any trade secret materials contained in such response to all County staff and County officials involved in the selection process, and to any outside consultant or other third parties who serve on the evaluation committee or who are hired by the County to assist in the selection process. Furthermore, each Bidder agrees to indemnify and hold harmless the County and each of its officers, employees, and agents from all costs, damages, and expenses incurred in connection with refusing to disclose any material which the Bidder has designated as a trade secret. Any Bidder that designates its entire Bid as a trade secret may be disqualified.
18. Bidder shall comply with the North Carolina Workers' Compensation Act and shall provide for the payment of workers' compensation to its employees in the manner and to the extent required by such Act. In addition, the Provider shall maintain, at its expense, the following minimum insurance coverage:

| | |
|-------------------|---------------|
| General Liability | - \$2,000,000 |
| Auto Liability | - \$2,000,000 |
| Umbrella Coverage | - \$5,000,000 |
19. Bid Bond of 5% of total bid price must accompany bid response. ***PLEASE NOTE BID BOND INCLUDED ON OUTSIDE OF SEALED BID RESPONSE.***
20. Performance and Payment Bonds will be required from the awarded vendor prior to contract execution.
21. Contractor must have active North Carolina General Contractors License and have completed at least five (5) similar projects.

22. Contractor must be registered with the NC Secretary of State.
23. **The following must be included in the Bid Packet to be considered a responsive bid:**
Signed Bid Form (must acknowledge addenda)
Bid Bond
List of five similar projects (include reference contact information)
Non-Collusion Affidavit
Notarized E-Verify Affidavit
W-9 Form

SCOPE AND PROVISIONS OF WORK

1. LOCATION: Lift Station 3-3 – 39 Garner Lane, Pinehurst, NC 28374
2. PURPOSE: This purpose of this project is to replace one sanitary sewer lift station.
3. GENERAL REQUIREMENTS: Contractor shall replace the sanitary lift stations following the construction drawings (seal dated 6-24-24 by C Brian Patnode PE). Contractor shall comply with the Moore County Public Works (MCPW) General Conditions, General Construction, and Wastewater Lift Stations and Force Mains Standards and Specifications for the work. These are available on the Moore County website at <https://www.moorecountync.gov/172/Engineering..>
4. PRECONSTRUCTION MEETING: A preconstruction meeting between the County Engineer and the Contractor will be held on-site prior to any materials being delivered and any work being undertaken.
5. CONTINUED SANITARY SEWER SERVICE: Contractor shall provide rerouting of sanitary sewer inflow from MH-1 to new force main tee pumping connection.
6. SUPERINTENDENT: Contractor shall provide a full-time on-site Superintendent throughout the span of work.
7. COMPLETION TIMELINE: Work shall begin with adequate forces and materials after the contract is signed by the County and a Notice to Proceed (NTP) is received by the Contractor. Work shall progress on a consistent productive pace. Full Completion shall be no later than one-hundred and eighty (180) calendar days from NTP.
8. DAMAGES TO EXISTING FACILITIES: Contractor shall repair any damage caused by Contractor to the satisfaction of the Owner.
9. LIQUIDATED DAMAGES: If the Contractor fails to complete the work within the time specified in the contract, the Contractor shall pay liquidated damages to the Owner in the amount of \$1,000 for each calendar day of delay until the work is completed or accepted.
10. WARRANTY: Contractor shall warrant that the work is free of any defect for a period of twelve (12) months from the date of final acceptance of the work.
11. MEASUREMENT AND PAYMENT: Payment to Contractor shall be on a Lump Sum basis for each lift station satisfactorily replaced.

AERIAL MAP
39 Garner Lane, Pinehurst NC 28374



BID FORM

This Bid shall consist of equipment, labor, materials, and traffic control for **Replace Sanitary Sewer Lift Station 3-3 Project**. Use this form for submitting Bids. No alterations or changes in Bid format will be allowed. All items should be priced for the units and quantities specified. The County of Moore shall reserve the right to reject any or all Bids.

| DESCRIPTION | TOTAL PRICE |
|----------------------------------|-------------|
| Replace Lift Station 3-3 Project | |

NC LICENSE # _____

Responsive Bid must include the following documents:

- 1. Signed Bid Form**
- 2. Bid Bond**
- 3. List of five similar projects (include reference contact information)**
- 4. Notarized Non-Collusion Affidavit**
- 5. E-Verify Affidavit**
- 6. Current W-9 Form**

On behalf of _____ (Bidder), I am submitting a bid for the **Replacement of Lift Station 3-3 Project**. This Bid covers equipment, labor, materials, traffic control and all other incidentals to complete the project. I certify that the contents of this Bid are known to no one outside the undersigned, and to the best of my knowledge all requirements have been complied with.

By: _____ (Authorized Signatory Printed)

By: _____ (Authorized Signature Signature)

Title: _____ (Authorized Signatory)

Date: _____

Authorized Signatory E-mail: _____

Receipt of the following addendum is acknowledged:

Addendum No. _____ Received: (circle) YES / NO Date: _____

NON-COLLUSION AFFIDAVIT

State of North Carolina
County of Moore

I _____, being first duly sworn, deposes and says that:

He/She is the _____ of _____, the proposer that has submitted the attached proposal;

He/She is fully informed respecting the preparation and contents of the attached proposal and of all pertinent circumstances respecting such proposal;

Such proposal is genuine and is not a collusive or sham proposal;

Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, Employees or parties of interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Proposer, firm or person to submit a collusive or sham proposal in connections with the contract for which the attached proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached proposal or of any other Proposer or to fix overhead, profit or cost element of the proposal price of any other Proposer or to secure through collusion, conspiracy, connivance or unlawful agreement any advantage against the County of Moore or any person interested in the proposed contract; and

The price or prices quoted in the attached bid are fair, proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Signature and Title

State of North Carolina
County of _____
Subscribed and sworn before me,
This _____ day of _____, 2025

Notary Public
My commission expires _____

Moore County E-Verify Affidavit

STATE OF NORTH CAROLINA

AFFIDAVIT

COUNTY OF MOORE

I, _____ (the individual attesting below), being duly authorized by and on behalf of _____ (the entity bidding on project hereinafter "Employer") after first being duly sworn hereby swears or affirms as follows:

1. Employer understands that E-Verify is the federal E-Verify program operated by the United States Department of Homeland Security and other federal agencies, or any successor or equivalent program used to verify the work authorization of newly hired employees pursuant to federal law in accordance with NCGS §64-25(5).
 2. Employer understands that Employers Must Use E-Verify. Each employer, after hiring an employee to work in the United States, shall verify the work authorization of the employee through E-Verify in accordance with NCGS§64-26(a).
 3. Employer is a person, business entity, or other organization that transacts business in this State and that employs 25 or more employees in this State. (mark Yes or No)
 - a. YES _____, or
 - b. NO _____
 4. Employer's subcontractors comply with E-Verify, and if Employer is the winning bidder on this project Employer will ensure compliance with E-Verify by any subcontractors subsequently hired by Employer.
- Executed, this ____ day of _____, 2025.

Signature of Affiant

Print or Type Name: _____

State of North Carolina

County of _____

Signed and sworn to (or affirmed) before me, this the ____
day of _____, 2025.

My Commission Expires:

Notary Public

(Affix Official/Notarial Seal)

**Request for Taxpayer
Identification Number and Certification**
Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

| | | |
|---|--|--|
| Print or type. See specific instructions on page 3. | 1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) | |
| | 2 Business name/disregarded entity name, if different from above. | |
| | 3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____ | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.) |
| | 3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/> | |
| 5 Address (number, street, and apt. or suite no.). See instructions. | | Requestor's name and address (optional) |
| 6 City, state, and ZIP code | | |
| 7 List account number(s) here (optional) | | |

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

| | | | | | | | | | |
|--------------------------------|--|--|--|---|--|--|--|--|--|
| Social security number | | | | | | | | | |
| | | | | - | | | | | |
| or | | | | | | | | | |
| Employer identification number | | | | | | | | | |
| | | | | - | | | | | |

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 for Part II, later.

| | | |
|------------------|--------------------------|------|
| Sign Here | Signature of U.S. person | Date |
| | | |

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they