



April 5, 2023

To: All Prospective Contractors

RE: "BKK Class III Landfill Gas Probe Assessment and Installation, DRR22035"

Addendum No. 1 to the Request for Qualifications

The following questions were received during the Questions and Answers period.

- Q 1 Is the Form required to report client references available for download? RFP Pages 44 and 45 (Client References) state "Page 1 of 2 (and 2 of 2) of the accessible fillable pdf of the Client Reference form" but no such form or link to the form is provided in the RFP.
- A 1 The required Client References form was inadvertently left out of the RFP document. It is included as an attachment to this Addendum.
- Q 2 Please verify that the minimum total SB/DVBE participation requirement for this solicitation is 25% (3% DVBE + 22% SBE)
- A 2 A total of 25% of contract dollars must go to a Small Business or Small Businesses, AND 3% of the total 25% of contract dollars must go to Disabled Veteran Businesses. A business that is certified as both SB and DVBE can satisfy both requirements if 25% of contract dollars are subcontracted out to them.
- Q 3 RFQ Section III states that one (1) non-bound original copy and one (1) electronic copy of SOQs are to be submitted. RFQ Attachment F (SOQ Completion Checklist) states one (1) unbound original, one (1) bound copy, and one (1) digital copy are to be submitted. Please clarify.
- A 3 One non-bound copy and 1 electronic copy on a USB drive are required. No bound copies are required.
- Q 4 Regarding the 25% minimum Small Business (SB) requirement (Page 15 of 78 of the RFQ), what portion of the scope of work does this apply to? Does this requirement apply to design services, construction services, or the entire scope of work?
- A 4 The 25% minimum Small Business (SB) requirement applies to any and all portions as long as the subcontracted firm is a California Certified Small Business currently in good standing and that the firm performs a commercially useful function, not as just a pass-through.

All other terms, conditions, and requirements of this Request for Qualifications will remain the same.

If you have any questions relating to this solicitation process, please contact me by e-mail at contracts@calrecycle.ca.gov.

Sincerely,

Melissa Mojonier
Contract Analyst
Administrative Services Branch

Attachments:

Interested Parties List

Client References Form

Interested Parties Listing For RFQ BKK Class III Landfill Gas Probe Assessment and Installation, DRR22035

| Company | Address/City/State/Zip | SB | DVBE | Business Description | Prime Contractor Interest | Sub Contractor Interest |
|---|--|----|------|---------------------------------------|---------------------------|-------------------------|
| CALRECYCLE | 1001 I Street Sacramento CA 95814 | No | No | | No | No |
| Engineering/Remediation Resources Group, Inc. | 4585 Pacheco Blvd, Ste 200 Martinez CA 94553 | No | No | | Yes | No |
| LSA | 157 Park Place Point Richmond CA 94801 | No | No | | No | No |
| Tetra Tech | 21700 Copley Drive Diamond Bar CA 91765 | No | No | LFG Probe Assessment and Installation | Yes | No |
| WSP | 7 Corporate Park IRVINE CA 92606 | No | No | Design, permitting, O&M | Yes | No |



Client References

List at least three (3) client references that can attest to the firm's qualifications to fulfill the requirements of the Scope of Work. List the most recent first. Client references must also be provided for any subcontractors identified in your submittal. Duplicate and attach additional pages as necessary.

FIRM'S / SUBCONTRACTOR'S NAME:

REFERENCE 1

Name of Firm

| | | | |
|----------------|------|-------|----------|
| Street Address | City | State | Zip Code |
|----------------|------|-------|----------|

| | |
|----------------|------------------|
| Contact Person | Telephone Number |
|----------------|------------------|

| | |
|------------------|-----------------|
| Dates of Service | Cost of Service |
|------------------|-----------------|

Brief Description of Service Provided

REFERENCE 2

Name of Firm

| | | | |
|----------------|------|-------|----------|
| Street Address | City | State | Zip Code |
|----------------|------|-------|----------|

| | |
|----------------|------------------|
| Contact Person | Telephone Number |
|----------------|------------------|

| | |
|------------------|-----------------|
| Dates of Service | Cost of Service |
|------------------|-----------------|

Brief Description of Service Provided

REFERENCE 3

Name of Firm

| | | | |
|----------------|------|-------|----------|
| Street Address | City | State | Zip Code |
|----------------|------|-------|----------|

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|----------------|------------------|
| Contact Person | Telephone Number |
|----------------|------------------|

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|------------------|-----------------|
| Dates of Service | Cost of Service |
|------------------|-----------------|

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| Brief Description of Service Provided |
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| If three references cannot be provided, explain why: |
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