

**ADDENDUM**

Document 00910

ADDENDUM NO. 3

Date of Addendum: 5/15/2023

\*\*\*FYI - This date is to be entered by hand, when signed for release\*\*\*

PROJECT NAME: GSD – HPD 1200 Travis Parapet Demolition and Reconstruction

PROJECT NO: WBS No. G000212-0005-4-01-01

PROPOSAL DATE: (There is no change to the Proposal Date.)

FROM: City of Houston, General Services Department  
900 Bagby, 2nd Floor, City Hall Annex  
Houston, Texas 77002  
Attn: Micheal Evans, Senior Project Manager

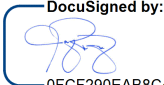
TO: Prospective Proposers

This Addendum forms a part of the Proposal Documents and will be incorporated into the Contract, as applicable. Insofar as the original Project Manual and Drawings are inconsistent, this Addendum governs.

**Bidding Requirements**

Item 1. Replace Documents 4 and 5 in RFP in its entirety with revised Documents No. 4 and 5 attached hereto.

*This Addendum uses the change page method: remove and replace or add pages, or Drawing sheets, as directed in the change instructions below. Change bars ( | ) are provided in the outside margins of pages from the Project Manual to indicate where changes have been made; no change bars are provided in added Sections. Reissued Drawing Sheets show the Addendum number below the title block and changes in the Drawing are noted by a revision mark and enclosed in a revision cloud.*

(TRC: )  0FCF290EAB8C486...  
Richard Vella  
Assistant Director  
Real Estate, Design & Construction Division  
General Services Department


DATED: 5/15/2023

END OF ADDENDUM NO. 3

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

	<p><b>4 - PROPOSAL FORM – PART A FOR CMAR SERVICES</b></p>
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*Proposals are to have clearly marked tabs that correspond to the sections of the Proposal. Total pages are limited by the Proposal form and additional pages set out in Proposal instructions. Other pages should not be included. The response boxes can be expanded to fit more information; however, the tables must remain the same size. Typically, font size shall be 8 pt. or larger.*

**0.1 PROPOSER’S GENERAL INFORMATION**

Is Proposal being submitted by a Joint Venture?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Proposer’s legal name:			
Proposer’s assumed names (if any):			
Proposer’s local address:		Proposer’s Headquarters Address (if different than local address):	
Contact Name for Proposal: Email address: Telephone number:		Federal Tax ID Number:	

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**0.2 JOINT VENTURE FIRM(S) INFORMATION.** *If submitting as a joint venture, the following information is required for each additional joint venture firm. Insert additional tables, if necessary.*

Firm's legal name:			
Firm's assumed names (if any):			
Firm's local address:		Firm's Headquarters Address (if different than local address):	
Federal Tax ID Number:			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**1.1 PROPOSER'S EXPERIENCE.** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Construction Firm Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**1.1**

Construction Firm Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**1.1**

Construction Firm Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.1 PROPOSED KEY PERSONNEL.** *List the Key Personnel proposed for this project. Include the Preconstruction Project Manager, Constructability/Document Coordination Reviewer, Estimator, Construction Project Manager, and the Project Superintendent.*

Proposal Project Role	Describe Functions of Project Role	Personnel Name	Corporate Title	Active Registrations / Certifications / Licenses	Years of Experience
Preconstruction Project Manager					
Constructability and Document Coordination Reviewer					
Estimator					
Construction Project Manager					
Project Superintendent					

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.2 EXPERIENCE OF PRECONSTRUCTION PROJECT MANAGER.** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Preconstruction Project Manager Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.2**

Preconstruction Project Manager Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

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**2.2**

Preconstruction Project Manager Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.3 EXPERIENCE OF CONSTRUCTABILITY/DOCUMENT COORDINATION REVIEWER** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Constructability/Document Coordination Reviewer Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded <b>zero</b> points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.3**

Constructability/Document Coordination Reviewer Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.3**

Constructability/Document Coordination Reviewer Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.4 EXPERIENCE OF ESTIMATOR** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Estimator Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i><b>NOTE:</b> If the project is not substantially complete at the time of submission, the PROPOSER will be awarded <b>zero</b> points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.4**

Estimator Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.4**

Estimator Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
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**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

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**2.5 EXPERIENCE OF CONSTRUCTION PROJECT MANAGER** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Construction Project Manager Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.5**

Construction Project Manager Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.5**

Construction Project Manager Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.6 EXPERIENCE OF CONSTRUCTION SUPERINTENDENT** *Proposers should select **three** representative projects of similar size, scope, and delivery method. Recent projects completed within ten years or less are preferable. The three projects are not limited to projects of similar occupancy type.*

Construction Superintendent Name:			
I. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.6**

Construction Superintendent Name:			
II. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

**2.6**

Construction Superintendent Name:			
III. Project Name:			
Project Location:		Construction Delivery Method:	
Year Construction Completed (month/year): <i>NOTE: If the project is not substantially complete at the time of submission, the PROPOSER will be awarded zero points.</i>		Highrise (Y/N):	
Construction Cost:		Building Area Square Footage:	
Name, Phone Number and Email of Owner's Representatives:			
Project Description:			
Architectural Firm:			
Project Role:			
Names of Proposed Key Personnel Listed in Section 2.1 that Worked on this Project (if any):			
<i>Attach up to <b>two</b> pages of photographs behind this sheet.</i>			

## REQUEST FOR PROPOSALS (RFP)

### FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

#### 3.1 PRECONSTRUCTION APPROACH. *Attach up to five pages describing the following:*

- a. *Describe the Proposer’s concepts for working in a team relationship with the City of Houston, Architect, and Engineering Consultants during the Preconstruction Phase Services.*
- b. *Describe the methodology of reviewing completed construction documents, site conditions and proposed phasing. Discuss methods of documenting and proposing changes to construction documents.*
- c. *Describe the plan for coordination of phasing, security, and operations.*
- d. *Describe the participation of possible subcontractors in the preconstruction phase.*
- e. *Describe the scheduling and estimating efforts during the preconstruction phase.*
- f. *Describe the subcontracting plan. Include the methodology of advertising, negotiating, and awarding contracts for subcontracted work.*

**4.1 SAFETY:** *Attach current worker’s compensation Experience Modifier Rating (EMR) from the National Council on Compensation Insurance (Attach documents behind this page). In lieu of EMR, Loss Run Report for past Five (5) years may be provided along with correspondence documentation from Proposer’s Insurance provider stating that Proposer does not qualify for an EMR. Proposer, and if a Joint Venture, each member of the Joint Venture, shall provide an OSHA Form 300A Summary of Work-Related Injuries and Illnesses for all company activities in the past five (5) years. If the Proposer or any member of the joint venture received a citation from OSHA in excess of serious (i.e., willful) within the previous five (5) years, please provide detail.*

*If “No” is indicated below for the Safety Program Manual, the Proposal will not be evaluated.*

Current Worker’s Compensation Modifier Numbers for the last five (5) years. Start with most recent and include year.					
Does your company have a Safety Program Manual?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

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**5.1 HIRE HOUSTON FIRST:** *Proposers answer one of the following City of Houston designations, as defined in the Code of Ordinances Section 15-176.*

Designated as a "City Business Enterprise"?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Designated as a "Local Business Enterprise"?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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## **REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction / WBS Number: G000212-0005-4-01-01

### **6.1 REQUIRED FORMS.** *All Proposers must include with the PROPOSAL the following forms.*

- City of Houston Affidavit of Ownership or Control Form - 00455  
<http://purchasing.houstontx.gov/forms.shtml>
- POP1 - Pay or Play Acknowledgement Form - 00460  
<http://www.houstontx.gov/obo/popforms.html>

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction

Number: G000212-0005-4-01-01



**5 - PROPOSAL FORM – PART B  
FOR CMAR SERVICES**

**5 FEE PROPOSAL**

CONSTRUCTION PHASE FEE FOR THE PROJECT SERVICES (see Section 2.9 of CMAR Contract – Document 7)	_____ %
CMAR Contingency (see Section 2.7 of CMAR Contract – Document 7)	<u>  3  </u> %

**REQUIRED FORMS.** *All Construction Management Proposers must include with the Proposal the following form.*

- Bid Bond (As referenced in Section 6.14 of the Terms and Conditions)

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Print Name/Title

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction

Number: G000212-0005-4-01-01

**BID BOND**

THAT WE, \_\_\_\_\_, as Principal,  
(Proposer)

("Proposer"), and the other subscriber hereto, \_\_\_\_\_, as Surety, do hereby acknowledge ourselves to be held and firmly bound to the City of Houston, a municipal corporation, in the sum of \_\_\_\_\_ Dollars (\$\_\_\_\_\_) (an amount equal to 5 percent of \$\_\_\_\_\_ the estimated construction cost for the payment of which sum, well and truly to be made to the City of Houston and its successors, the Proposer and Surety do bind themselves, their heirs, executors, administrators, successors, and assigns, jointly and severally.

**THE CONDITIONS OF THIS OBLIGATION ARE SUCH THAT:**

**WHEREAS**, the Proposer has submitted on or about this day a response to the Request for Proposals for Construction manager at Risk services for:

\_\_\_\_\_  
(Project Name, Location and Number)

**Now, THEREFORE;** if the Proposer:

1. Enters into a Construction Manager at Risk Contract with the City,
2. The City accepts a Guaranteed Maximum Price Proposal submitted by the Proposer in accordance with the Construction Manager at Risk Contract,
3. The Proposer executes a Guaranteed Price in the format set out in Construction manager at Risk Contract,
4. The Proposer executes a Performance Bond, Payment Bond, and Maintenance Bond in the amount and format set out by the Construction Manager at Risk Contract (such bonds to be executed by a Corporate Surety authorized by the State Board of Insurance to conduct insurance business in the State of Texas, and having an underwriting limitation in at least the amount of the bond), and
5. The Proposer submits all other submittal documents required by the Construction Manager at Risk Contract as part of the Guaranteed Maximum Price Proposal within the time set out in the Construction Manager at Risk Contract.

then this obligation shall become null and void; otherwise, it is to remain in full force and effect.

If Proposer is unable to or fails to perform the obligations undertaken herein, the undersigned Proposer and Surety shall be liable to the City for the full amount of this obligation which is hereby acknowledged as the amount of damages which will be suffered by the City on account of the failure of such Proposer to perform such obligations, the actual amount of such damages being difficult to ascertain.

Notices required or permitted hereunder shall be in writing and shall be deemed delivered when actually received or, if earlier, on the third day following deposit in a United States Postal Service post office or receptacle, with proper postage affixed (certified mail, return receipt requested), addressed to the respective other Party at the address prescribed in the Contract documents, or at such other address as the receiving Party may hereafter prescribe by written notice to the sending Party.

**IN WITNESS THEREOF**, the Proposer and Surety have signed and sealed this instrument on the respective dates written below their signatures and have attached current Power of Attorney.

**REQUEST FOR PROPOSALS (RFP)**

FOR CONSTRUCTION MANAGER AT RISK SERVICES

GSD - HPD 1200 Travis Parapet Demolition and Reconstruction

Number: G000212-0005-4-01-01

**SIGNATURES**

ATTEST, SEAL: (if a corporation)

WITNESS: (if not a corporation)

By: \_\_\_\_\_

Name:

Title:

ATTEST/SURETY WITNESS: (SEAL)

By: \_\_\_\_\_

Name:

Title:

Date:

\_\_\_\_\_  
(Name of Proposer)

By: \_\_\_\_\_

Name:

Title:

Date:

\_\_\_\_\_  
(Full Name of Surety)

\_\_\_\_\_  
(Address of Surety for Notice)

\_\_\_\_\_  
(Telephone Number of Surety)

By: \_\_\_\_\_

Name:

Title:

Date