

**CC2024-05 ENGINEERING SERVICES FOR DESIGN, BIDDING, AND CONSTRUCTION  
SUPERVISION OF WATER MAIN AND ANCILLARY STRUCTURE  
PROPOSAL OPENING DATE 8/22/2024 AT 11:00AM**

CC2024-05 ENGINEERING SERVICES FOR DESIGN, BIDDING, AND CONSTRUCTION SUPERVISION OF WATER MAIN AND ANCILLARY STRUCTURE TO CONNECT KLOCKNER BOOSTER ZONE 3 ZONE, HOPEWELL, TWP NJ FOR A PERIOD OF 30 MONTHS - VIRTUAL PROPOSAL OPENING DATE 8/22/2024 AT 11:00AM		
NUMBER OF RESPONDENTS:	<b>1</b>	
NAME OF BIDDER	<b>ARCADIS US, INC.</b>	
ADDRESS	<b>EAST</b>	
CITY, STATE, ZIP	FAIR LAWN, NJ 07410	
CONTACT NAME	CATHERINE MALLON TRYNOR	
TELEPHONE	201-797-7400	
FAX	N/A	
E-MAIL	<a href="mailto:catherine.malon@arcadis.com">catherine.malon@arcadis.com</a>	
STATEMENT OF OWNERSHIP DISCLOSURE	INCLUDED	
EQUAL EMPLOYMENT OPPORTUNITY EXHIBIT A	INCLUDED	
REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONNAIRE	INCLUDED	
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA	N/A	
NJ BUSINESS REGISTRATION CERTIFICATE FOR CONTRACTOR	INCLUDED	
EIC FOR CONTRACTOR	CERT# 188 EXP.8/15/2027	
USE OF SUB-CONTRACTORS	<b>YES - SEE ATTACHED</b>	
SUB-CONTRACTOR'S BRC, EIC & LICENSING	<b>INCLUDED</b>	
NON-COLLUSION AFFIDAVIT	INCLUDED	
AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE	INCLUDED	
ETHICS COMPLAINT DISCLOSURE	INCLUDED	
DEBARMENT NOTICE, STATE AND FEDERAL FOR CONTRACTOR	INCLUDED	
CERTIFICATION AND DISCLOSURE OF POLITICAL CONTRIBUTIONS	INCLUDED	
INVESTED ACTIVITIES ACTIVITIES IN IRAN	INCLUDED	
CITY OF TRENTON RESIDENT EMPLOYMENT POLICY	INCLUDED	
CERTIFICATE OF INSURANCE	<b>REQUIRED FROM AWARDED PROPOSER</b>	
60-DAY EXTENSION COMPLIANCE	<b>YES</b>	
PROVIDE PRIORITY EMERGENCY SERVICES	N/A	
REFERENCES	INCLUDED	
W-9	N/A	
EXCEPTIONS (IF ANY)	NONE	
SEE ATTACHED BREAK-DOWN OF PRICING	<b>SEE ATTACHED BREAK-DOWN OF PRICING</b>	
FATAL FLAW	<b>NONE</b>	

## 8. Fee Proposal

In this section you will find Arcadis' Fee Proposal. We propose to provide the services described herein for the fee presented. As requested, an allowance of \$50,000 has been included.

### Fee Table

	Task	Hours	Hourly Rate	Labor	Subs	Expenses	Total Not-to-Exceed Fee
1	Kickoff Meeting	62	\$ 182.74	\$ 11,300	\$ -	\$ 268	\$ 11,598
2	Future Demand	120	\$ 181.50	\$ 21,780	\$ -	\$ -	\$ 21,780
3	Hydraulic Modeling	502	\$ 182.09	\$ 91,410	\$ -	\$ -	\$ 91,410
4	Water Main Design	1398	\$ 138.50	\$ 193,620	\$ 101,300 *	\$ -	\$ 294,920
5	Bidding Assistance	40	\$ 170.50	\$ 6,820	\$ -	\$ 2,468	\$ 9,288
6	Construction Phase Engineering Services	786	\$ 165.01	\$ 129,700	\$ -	\$ 5,590	\$ 135,290
	<b>TOTAL</b>	<b>2908</b>	<b>\$ 156.35</b>	<b>\$ 454,660</b>	<b>\$ 101,300</b>	<b>\$ 8,326</b>	<b>\$ 564,286</b>

\* Subcontractor costs include geotechnical investigation services to be provided by Converse Consultants (one on either side of the railroad crossing) and surveying that shall determine (using all reasonably attainable non-invasive means) the location of all utilities that may impact work on the site including water, sewer, electric, natural gas, telephone, cable, and all others and specify locations on the construction plans per TWW's RFP. Surveying services will be provided by Borbas Land Surveying and Mapping, LLC. It is assumed that the City of Trenton will provide traffic control during subcontractor work.

### Labor Table

	Task	Principal-in-Charge	Principal Engineer I	Senior Engineer / Scientist II	Senior Engineer / Scientist I	Senior Engineer / Scientist	Technician / Project Assitant IV	Design Tech II	TOTAL
1	Kickoff Meeting	0	4	26	20	12	0	0	62
2	Future Demand	0	4	68	0	48	0	0	120
3	Hydraulic Modeling	0	48	238	24	192	0	0	502
4	Water Main Design	0	90	124	240	404	40	500	1398
5	Bidding Assistance	0	4	2	10	24	0	0	40
6	Construction Phase Engineering Services	0	4	58	114	610	0	0	786
	<b>TOTAL</b>	<b>0</b>	<b>154</b>	<b>516</b>	<b>408</b>	<b>1290</b>	<b>40</b>	<b>500</b>	<b>2908</b>

**NOTICE OF INTENT TO SUBCONTRACT FORM  
(MANDATORY)**

This notice of intent must be completed and included as part of each proposer's proposal. Failure to submit this form will cause rejection of the proposal as non-responsive.

Please check one of the below-listed boxes:

☒ If awarded this contract, I will engage subcontractors to provide certain goods and/or services.

ALL PROPOSERS THAT INTEND TO ENGAGE SUBCONTRACTORS MUST ALSO SUBMIT A COMPLETED AND CERTIFIED SUBCONTRACTOR UTILIZATION PLAN (AS APPLICABLE) WITH THEIR REQUEST FOR PROPOSALS. PROPOSERS SHOULD ALSO SUBMIT A NEW JERSEY BUSINESS REGISTRATION CERTIFICATE FOR EACH SUBCONTRACTOR AS WELL AS ANY LICENSES HELD BY SUBCONTRACTORS WITH THEIR BID PROPOSAL.

☐ If awarded this contract, I do not intend to engage subcontractors to provide any goods and/or services.

**ALL PROPOSERS THAT DO NOT INTEND TO ENGAGE SUBCONTRACTORS MUST  
ATTEST TO THE FOLLOWING CERTIFICATION:**

I hereby certify that if the award is granted to my firm and if I determine at any time during the course of the contract to engage subcontractors to provide certain goods and/or services, I will submit the Subcontractor Utilization Plan for approval to the Business Administrator or his legal representative in advance of any such engagement of subcontractors. Additionally, I certify that in engaging subcontractors, I will make a good faith effort to achieve the subcontracting set-aside goals established for this contract, and I will attach to the plan documentation of such efforts.

Respectfully submitted by:



Signature

Catherine Mallon Traynor

Name, typed or printed

Senior Vice President

Title

Arcadis U.S., Inc.

Name of Firm

17-17 Route 208 North, Fair Lawn, NJ 07410

Business Address/Zip

201.797.7400

Telephone

N/A

Fax

(Seal—if bid is by a  
corporation)

**PROVIDE A LIST SUB-CONTRACTORS  
COPY OF LICENSES SUBMITTED WITH BID  
(MANDATORY IF APPLICABLE)**

NAME Borbas Surveying and Mapping, LLC  
ADDRESS 402 Main Street  
CITY, STATE, ZIP Boonton, NJ 07005  
TELEPHONE: 973-316-8743  
FAX NO. NA  
TRADE Surveying  
LICENSE NO. \_\_\_\_\_

NAME Converse Consultants  
ADDRESS 2738 W. College Avenue  
CITY, STATE, ZIP State College, PA 16801  
TELEPHONE: 814-234-3223  
FAX NO. 814-234-3255  
TRADE Geotechnical investigations  
LICENSE NO. \_\_\_\_\_

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
FAX NO. \_\_\_\_\_  
TRADE \_\_\_\_\_  
LICENSE NO. \_\_\_\_\_

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