



DISTRICT OF COLUMBIA DEPARTMENT OF MENTAL HEALTH
 CONTRACTS AND PROCUREMENT ADMINISTRATION
 64 NEW YORK AVENUE, NE 4TH FLOOR, WASHINGTON, DC 20002
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April 8, 2009

TRAINING SERVICES
INVITATION FOR BID (IFB) AMENDMENT NUMBER TWO (2)

Solicitation Number: RM-09-IFB-065-BY-THS

To All Prospective Bidders:

Amendment 0002 contains questions and responses for Solicitation Number RM-09-IFB-065-BY-THS.

Question No.	IFB Section	Question
One	L.2	In this IFB there are no instructions on the expected format of the proposal. Is there a specific format that is expected?
DMH RESPONSE: This is an Invitation for Bid, The Department of Mental of Health is soliciting price quotations not proposals for the General Requirement in Section C. Please refer to Section L.2, PREPARATION AND SUBMISSIONS OF BIDS, when preparing and submitting a Bid in response to Solicitation Number: RM-09-IFB-065-BY-THS.		

Question No.	IFB Section	Question
Two	B.5	On pages 3, 4, 5, and 6 of the IFB are the Pricing Schedules. Some of the areas have been highlighted in gray and its hard to see any information that I type or write over these gray areas. Can you produce other forms without the gray highlighting?
DMH RESPONSE: Please find attached pages 3, 4, 5, and 6 of the IFB, which are the Schedule B Price Sheets for the Base Year and associated Option Years without the highlighted gray areas.		

Question No.	IFB Section	Question
Three	I.10.1, I.10.2 and I.10.5	On page 37 of the IFB, Section I.10.1 is about Bodily Injury Insurance. Then in Section I.10.5 Bodily Injury Insurance is brought up again under Automobile Liability. The same is true with I.10.2. regarding Property Damage. Its been my experience that both Bodily Injury and Property Damage is terminology used under Automobile Liability. But because these sections are separated on page 37, I am wondering if they are considered altogether different. Perhaps I.10.1 and I.10.2 have something to do with Bodily Injury and Property damage outside of the scope of Automobile Liability....Please clarify.
DMH RESPONSE: Each Insurance Requirement has its on distinct meaning and application. The Bodily Insurance Requirement in Section I.10.1 and the Property Damage Requirement in Section I.10.2 is not the same Insurance Requirement listed under Automobile Liability in Section 1.10.5.		

Question No.	IFB Section	Question
Four	K.1	On Page 44 of the IFB, Section K.1. a request is made for "a sworn Tax Certification Affidavit". I am not accustomed to that terminology. Is this the same as an IRS Form W-9?
DMH RESPONSE: The sworn "Tax Certification Affidavit" is a requirement of the Office of Tax and Revenue (OTR) - Tax Compliance for Contracts exceeding \$100,000 the Vendor must show proof that taxes are current and that, if in arrears, an approved payment schedule exists. In order to do business with the District of Columbia you must be registered with the Office of Tax and Revenue, you may find more information on the Office of Tax and Revenue's Website, https://www.taxpayerservicecenter.com/fr500/.		

Question No.	IFB Section	Question
Five	L.2	What documents, if any (e.g., curriculum vitae), should accompany the Bid?
DMH RESPONSE: Please refer to Section L.2 – PREPARATION AND SUBMISSIONS OF BIDS when preparing and submitting a Bid in response to Solicitation Number: RM-09-IFB-065-BY-THS.		

Question No.	IFB Section	Question
Six	L.2	Is the entire BID document to be forwarded?
DMH RESPONSE: Please refer to Section L.2 – PREPARATION AND SUBMISSIONS OF BIDS when preparing and submitting a Bid in response to Solicitation Number: RM-09-IFB-065-BY-THS.		


Question No.	IFB Section	Question
Seven	C.4.4	Regarding basic requirement C.4.4: "technical assistance" is thought to include...? Also, is such "technical assistance on psychiatric consumer issues" to have been provided for management, staff, clinicians, patients/clients and/or their families...?
DMH RESPONSE: Technical assistance would be provided to Saint Elizabeths' clinical staff, not to patients and their families.		

ALL OTHER TERMS AND CONDITIONS OF THE REQUEST FOR PROPOSALS REMAIN UNCHANGED.

Only one copy of this amendment is being sent to prospective Offerors. Offerors shall sign below and attach a signed copy of this amendment to each proposal to be submitted to the place specified for receipts of proposals. Proposals shall be mailed or delivered in accordance with the instructions provided in the original RFQ. In the event your proposal has been previously deposited with the Department of Mental Health, Contracts and Procurement Administration (DMH/CPA), submit this signed Amendment in a sealed envelope, identified on the outside by the RFQ number and submission date. This signed Amendment must be received by the DMH/CPA no later than the date and time for closing.

Failure to acknowledge receipt of Amendment Two (2) for Solicitation Number RM-09-IFB-065-BY-THS may be cause for rejection of any proposal submitted in response to the subject RFQ.

Signed:



Samuel J. Feinberg, CPPO, CPPB
 Director, Contracts and Procurement
 Agency Chief Contracting Officer

Amendment Number Two (2) is hereby acknowledged and is considered a part of the proposal for Solicitation Number RM-09-IFB-065-BY-THS.

 Signature of Authorized Representative

 Date

 Title of Authorized Representative

 Print or Type Name of Offeror

B.5 PRICING SCHEDULE

B.5.1 Base Year

CONTINUATION SHEET		SOLICITATION/CONTRACT #			PAGE 3 OF 60
NAME OF CONTRACTOR OR CONTRACTOR -					
Contract Line Item No. (CLIN)	Item Description	Maximum Quantity	Unit	Unit Price	Extended Price
0001	Consulting Services (Sections C.3.1, C.3.2, C.3.4 and C.3.5)	125	Hours	\$ _____	\$ _____
0002	Training Services (Sections C.3.3, C.3.6 and C.3.7)	125	Hours	\$ _____	\$ _____

Print Name of Offeror

Print Name of Authorized Person

Title

Signature of Authorized Person

Date

B.5.2 Option Year One

CONTINUATION SHEET		SOLICITATION/CONTRACT #			PAGE 4 OF 60
NAME OF CONTRACTOR OR CONTRACTOR -					
Contract Line Item No. (CLIN)	Item Description	Maximum Quantity	Unit	Unit Price	Extended Price
0001	Consulting Services (Sections C.3.1, C.3.2, C.3.4 and C.3.5)	125	Hours	\$ _____	\$ _____
0002	Training Services (Sections C.3.3, C.3.6 and C.3.7)	125	Hours	\$ _____	\$ _____

Print Name of Offeror

Print Name of Authorized Person

Title

Signature of Authorized Person

Date

CONTINUATION
SHEET

SOLICITATION/CONTRACT #

PAGE 5 OF 60

NAME OF CONTRACTOR OR CONTRACTOR -

Contract Line Item No. (CLIN)	Item Description	Maximum Quantity	Unit	Unit Price	Extended Price
0001	Consulting Services (Sections C.3.1, C.3.2, C.3.4 and C.3.5)	125	Hours	\$ _____	\$ _____
0002	Training Services (Sections C.3.3, C.3.6 and C.3.7)	125	Hours	\$ _____	\$ _____

Print Name of Offeror

Print Name of Authorized Person

Title

Signature of Authorized Person

Date

CONTINUATION SHEET		SOLICITATION/CONTRACT #			PAGE 6 OF 60
NAME OF CONTRACTOR OR CONTRACTOR -					
Contract Line Item No. (CLIN)	Item Description	Maximum Quantity	Unit	Unit Price	Extended Price
0001	Consulting Services (Sections C.3.1, C.3.2, C.3.4 and C.3.5)	125	Hours	\$ _____	\$ _____
0002	Training Services (Sections C.3.3, C.3.6 and C.3.7)	125	Hours	\$ _____	\$ _____

Print Name of Offeror

Print Name of Authorized Person

Title

Signature of Authorized Person

Date

*** END OF SECTION B ***