# **BOARD OF SUPERVISORS AGENDA ITEM SUMMARY**

Requested Board Meeting Date: <u>06/18/2013</u>

## ITEM SUMMARY, JUSTIFICATION and/or SPECIAL CONSIDERATIONS

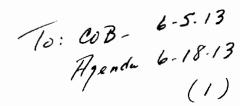
Amendment of Award: Contract # MA-PO-120000000000000000054, Amendment # 01, ISS Facility Services, Inc., to provide janitorial services for Ajo facilities, increase Living Wage adjusted by County, increase 3% in pricing for each service site. Funding Source: General Funds. Administering Department: Facilities Management.

### **BACKGROUND**

The contract was initially awarded by the Board of Supervisors on 05/15/2012 for a five year contract in the total amount of \$430,000.00. The current annual award amount is \$86,000.00. The contract's current termination date is 06/30/2017, historical requirements and expenditures average about \$5,300.00 per month, and as of 05/14/2013 the contract has an unused contract amount of \$372,230.08. Due to a 2.4% increase in County mandated Living Wage and a 6.7% cost increase in janitorial materials, the contractor is asking a 3% pricing increase for each service site.

This contract amendment is required to: 1) a 3% pricing increase for each service site; 2) amend County Living Wage.

Effective Date:	0701/2013	Contract vultimes 114. PO. 12 X 637 - 01
Termination Date:	06/30/2017	Ferm Date  Le - 30 - 17
Original Contract Amount: \$	\$430,000.00	Revenue ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
Prior Amendment Amounts: \$	N/A	Renewal By Term 4-1-17
This Amendment Amount: \$	\$ 0.00	Term Reviewed by: ## 4. 30.17
Revised Contract Amount:	\$430,000.00	
Contract Officer:	Nina Schatz,	724-8719, Procurement Department
Payment System:	AMS	
0.507.0500.000.005.000	, BOOLITO	ITEMANO
CLERK OF BOARD USE ONL	Y: BOS MTG	ITEM NO





# PIMA COUNTY DEPARTMENT OF FACILITIES **MANAGEMENT**

PROJECT: Janitorial Services for Ajo Facilities

CONTRACTOR: ISS Facility Services, Inc.

CONTRACT NO.: MA-PO-120000000000000000654

CONTRACT AMENDMENT NO.: One (01)

CONTRACT

NO.MA.PO./20000 00000 00000 6 5

AMENDMENT NO.

on all

This number must appear invoices, documents

correspondence pertaining

and this

contract.

ORIG. CONTRACT TERM: 07/01/12 - 06/30/17 **TERMINATION THIS AMENDMENT: 06/30/17** 

TERMINATION DATE PRIOR AMENDMENT: N/A

ORIG. CONTRACT AMOUNT: PRIOR AMENDMENTS:

\$430,000.00

N/A

AMOUNT THIS AMENDMENT:

\$ 0.00

REVISED CONTRACT AMOUNT: \$430,000.00

#### CONTRACT AMENDMENT

WHEREAS, COUNTY and CONTRACTOR entered into a Contract for services as referenced above; and

WHEREAS, CONTRACTOR and COUNTY, pursuant to Article III - Compensation and Payment, have agreed to a 3% increase in Unit Price of Exhibit B; and

WHEREAS, CONTRACTOR and COUNTY, pursuant to Article III - Compensation and Payment, have agreed to increase Living Wage in Exhibit D in order to be in compliance with COUNTY'S annual adjusted rate.

NOW, THEREFORE, it is agreed as follows:

**CHANGE**: ARTICLE III – COMPENSATION AND PAYMENT:

Remove Exhibit B: Unit Prices (Net 30 Days Payment Term) in its entirety and replace with Exhibit B

(AM01): Unit Prices (Net 30 Days Payment Term).

**CHANGE: ARTICLE III - COMPENSATION AND PAYMENT:** 

Remove Exhibit D: Living Wage Requirements and Certificate in its entirety and replace with Exhibit D

(AM01): Living Wage Requirements and Certificate.

The effective date of this Amendment shall be July 1, 2013.

(The Reminder Of This Page Is Intentionally Left Blank)

All other provisions of the Contract, not specifically changed by this Amendment, shall remain in effect and be binding upon the parties.

IN WITNESS THEREOF, the parties have affixed their signatures to this Amendment on the dates written below.

PIMA COUNTY	CONTRACTOR
	- CR
Chair, Board of Supervisors	Authorized Officer Signature
Date	Printed Name and Title
ATTEST	
Clerk of Board	
Date	
APPROVED AS TO FORM	
Deputy County Attorney ( Marc Notel) ky	
TOBIN ROSEN	

Printed Name

Date

Add'Services Total Monthly Cost \$2,034.25	Complete cleaning of chairs per chair \$2.58	Cost for Power Wash of sidewalk p/job irg over 2500 - 4000 sq ft \$103.00	Cost for Power Wash of sidewalk p/job mdm up to 2500 sq ft \$51.50	Cost for Power Wash of sidewalk p/job sm up to 1000 sq ft \$51.50	Minimum Service Charge (if less than one hour) \$25.75	Extra Services Hard Floor SinpiWax p/sqft	Extra Services Carpet Cleaning p/sqft	Extra Services Rate Per Hour (includes washing ext gmd floor windows)		Grand Total Five (5) Year (Line #11 x 5 YR)	Grand Total Yearly (Line #8 + #9)	Additional Services Listed Below (Line #20)	Total Yearly Cost List Above (Line #7 x 12 MO)	ent Service Listed Above		Park & Rec. Recreation Center 290	Salazar Ajo Library cs	īce*		Ajo Courthouse*	
\$2,034.25		\$103.00	\$51.50	\$51.50	\$25.75										111	290	33	125	12	111	
\$2,034.25		\$103.00	\$51.50	\$51.50	\$25.75										111 La Mina	290 5th St	33 Plaza Street (Ajo Plaza)	1259 Well Rd.	120 Estrella	111 La Mina	
\$2,034.25						\$0.15	\$0.08	\$16.48							M-F	Quarterly Floors	M-Sat	Mon, Wed, Fri	M-F	M-F	
\$2,034.25		4	4	4	10	3,000	3,000	10								6,000	4950	3500	2600	8500	
	\$77.25	\$412.00	\$206.00	\$206.00	\$257.50	\$463.50	\$247.20	\$164.80							n/a	n/a	\$874.68	\$592.00	\$598.22	\$2,006.77	
	\$927.00	\$4,944,00	\$2,472.00	\$2,472.00	\$3,090.00	\$5,562.00	\$2,966.40	\$1,977.60		TOTAL BID\$				\$5,424.89	<b>\$418</b> .18	\$357.41	\$993.95	<b>88</b> 5.13	\$679.80	\$2,280.42	
			•							\$447,548.18	\$89,509.64	\$24,411.00	\$65,098.64					\$8,341.52 Changed to full service 8-8-12		\$27,365.04	
															n∕a	7 am to 12 am	cles 9 pm to 8 am	5 pm to 12 am	5 pm to 12 am	5 pm to 12 am	
															yes						
															yes	yes	yes	yes	yes	yes	
																n/a					

Information provided on this sheet is as close to accurate as possible but the COUNTY cannot guarantee its veracity and recommends verification by vendor

Potential Minimum Weekly Manhours is provided as a guideline but not intended to suggest what the actual hours may be.

\* Yellow area (shaded) represents current service level. The bid will be evaluated by current service level. Please provide alternate pricing for increased or reduced service level for possible future adjustments.

## EXHIBIT D (AM01): LIVING WAGE REQUIREMENTS AND CERTIFICATE

This solicitation is subject to the Pima County living wage requirements as provided in the Pima County Procurement Code section 11.38 which specifies that a living wage requirement be included in County contracts for specific services.

Contractors entering into eligible contracts with Pima County for the covered services shall pay a living wage to their eligible employees for the hours expended providing services to Pima County. Eligible employees shall receive a wage not less than \$11.32 per hour. A contractor may pay its eligible employees a wage of no less than \$10.07 per hour if the contractor provides health benefits with a monthly value at least as high as the difference between that wage and a monthly wage based on \$11.32 per hour. Contractors shall include all costs necessary for complete compliance to the living wage requirement.

In bid preparation, Contractors will need to consider the possibility of increased administrative costs. The following is a brief description of key Living Wage reporting requirements. These are not limited to but include:

One time reports: Due at the beginning term of each contract/renewal

- ->Payroll calendar
- -->Certificate of Living Wage Payments Form
- -> Master Listing of employees eligible to work on Pima County jobs
- ->Listing of Subcontractors to be used (if applicable)

<u>Staffing Plans, Including Subcontractors</u> (work schedules): Due <u>prior</u> to work performed to enable the Compliance Officer to rate check and interview employees; If there is not sufficient time prior to performing work, then a plan must be submitted as soon as possible after work is performed:

- ->Name of employee(s) who will be working
- ->Where work is performed
- ->Approximate time-frame work will be performed
- ->Total approximate hours to be worked
- ->Revised plan <u>IF</u> any information changed from the original staffing plan

Payroll Reports: Must be provided to the Compliance Officer 7 days after EVERY pay period

- ->Statement of Compliance
- -> Payroll Summary Reports:
- Name of all employees on a Pima County job
- Total hours worked/rate of pay/gross pay/paycheck number
- Support documentation for this information
- Signed "Statement of Compliance" even if no payroll performed

<u>Subcontracted Labor (if applicable)</u>: Packets are required to be submitted to Pima County's Compliance Officer as soon as the Subcontractor is issued payment. This includes:

- ->A letter signed by subcontractor indicating that laborers associated with the work billed on their attached invoice were paid at or above the Living Wage required rate
- ->the check # and date which this invoice was paid should be noted
- ->Attach the appropriate staffing plans (work schedules) of the subcontractor to this invoice. The subcontractor employee payroll check# needs to be noted beside their employee (s) name

(The remainder of this page is intentionally left blank)



## PIMA COUNTY PROCUREMENT

130 W. CONGRESS ST., 3RD FLOOR TUCSON, ARIZONA 85701-1317 TELEPHONE (520) 724-8161, FAX (520) 222-1484

# **CERTIFICATION OF LIVING WAGE PAYMENTS**

This firm certifies that it will meet all specifications, terms, and conditions contained in the Living Wage Contract Ordinance; AND that if labor is subcontracted, subcontractors will be held to the exact terms that is required of this firm.

YesX_ No If no, you must ex	cplain all deviations in writing.
Company Name: <u>755 Facil</u>	1ty Strylles
Description of Services:	rn
1 -1 1 -	
<i>'</i>	(PLEASE CHECK ONE(S) THAT APPLY)  mployees working on the above listed contract at least eleven dollars and thirty-two
cents (\$10.07) per hour <u>and</u> provide monthly wage based on eleven dolla than ten dollars and seven cents (\$	AND/OR mployees working on the above contract a wage of no less than ten dollars and seven a health benefits with a monthly value at least as high as the difference between a rs and thirty-two cents (\$11.32) per hour and the requested monthly wage if no less 10.07) per hour. In essence, the <a href="mailto:employer paid portion">employer paid portion</a> of benefits must have a en dollars and sixty-six cents (\$216.66). This equals the one dollar and twenty-five
Providers Name:	
Address:	
Phone:	Fax:
Plan or Program Number:	Type of Benefit:
Total premium paid per month:	Amount paid by employee:
(Attach	pages if needed for additional providers)
COMPANY NAME: 135 Mode	sty Struces
AUTHORIZED SIGNATURE:	DATE: 5/29/13
How	PRINTED NAME
G.M.	
	TITLE OF AUTHORIZED

**END OF EXHIBIT D (AM01)**