NOTICE OF REQUEST FOR STATEMENT OF QUALIFICATIONS

AIRPORT CONSULTING SERVICES - ENGINEERING

Bulloch County is seeking a qualified aviation consulting firm to provide professional engineering, architectural, and construction administration services including, but not limited to, geotechnical/subsurface investigations and topographic surveying, environmental assessments, preliminary and final design, and bidding, in connection with the Airport Capital Improvement Plan at the Statesboro-Bulloch County Airport in Statesboro, Georgia.

It is the intent of Bulloch County to enter into a multi-year Master Agreement with a consultant for the upcoming five (5) year period. The selected consultant will negotiate and enter into individual sub-agreements for services, based on the scope of work, with Bulloch County on an assignment-by-assignment basis during the term of the Master Agreement.

The services are limited to projects that Bulloch County expects to initiate within five (5) years of the effective date of the Master Agreement. A list of anticipated projects for the five (5) year period is attached. It is noted that some services may not be required. Bulloch County reserves the right to initiate additional procurement actions for projects and work items included in the initial procurement.

The selection of the consultant is being done in accordance with49 USC 47107(a) (17), 2 CRF 200.320, and FAA Advisory Circular 150/5100-14E and applicable Georgia state statutes and laws. Responding firms must possess a current pre-qualification by the Georgia Department of Transportation in the following categories:

Aviation Engineering Services (e.g. design and construction administration):

- Area Class 2.09 Airport Design
- Area Class 8.02 Airport Construction Administration and Observation
- Area Class 2.09b Airport Design – Electrical (effective 1/1/2025)

The consultant and any sub-consultants proposed shall not discriminate on the basis of race, color, national origin, or sex in the performance of this contract. Disadvantaged Business Enterprise (DBE) utilization is strongly encouraged. Proposed DBE firms are to be certified by the Georgia Uniform Certification Program. The consultant shall carry out applicable requirements of 49 CFR Part 26 in the award and administration of all Federally assisted contracts. Failure by the consultant to carry out these requirements is a material breach of the contract, which may result in the termination of the contract or such other remedy as Bulloch County deems appropriate.

Bulloch County reserves the right to reject any and all submittals in response to this Request for Qualifications, request clarification, or waive informalitaties/technicalities if they are deemed in the best interest of Bulloch County. Bulloch County is not liable for any costs incurred by the consultant in the preparation or presentation of a response to this request.

Scope of Services

The scope of work to be included in the multi-year contract may include, but is not limited to, the following:

a. Prepare Project Funding Applications and Capital Improvement Program (CIP) documents
b. Perform Design, Bidding and Negotiation, Construction Administration, and Resident Inspection Services
c. Assist with DBE Program overall goal updates/program administration
d. Prepare/Update Exhibit "A" Property Line Map, Airport Layout Plan, and Environmental Assessments as necessary
e. Construct/Rehabilitate Airfield Drainage Systems
f. Construct/Rehabilitate Airfield Lighting, and NAVAIDS/ILS Improvements
g. Construct/Rehabilitate Airport Buildings (Terminal/ Hangars/Maintenance)
h. Construct/Rehabilitate Airport Roadways and Parking Lots
i. Install/Upgrade Airport Fencing and Security Systems
j. Land Acquisition
k. Obstruction Clearing
l. Construct/Rehabilitate Airfield Pavement
m. Design/Construct Electrical Charging Systems
n. Such other airport-related work as Bulloch County may deem necessary

Submission Requirements

Required information is to be presented in a manner that clearly illustrates the following:

1. Team Description/Background: A general description of the submitting firm, including firm size, and general information regarding sub-consultant firms

2. Organizational Chart: Include a clear illustration of the Project Manager and key personnel representing the primary firm

3. Resumes: Include key personnel. Indicate each individual's qualifications and experience.

4. Relevant Experience: Qualifications and experience of the primary firm in the past five (5) years at general aviation airports of regional significance (i.e. GASP Level 3 or larger) similar in nature to Statesboro-Bulloch County Airport and other airports in Georgia

5. Proximity to the Statesboro-Bulloch County Airport: Geographical location of the office that will be primarily responsible for assigned projects and where the work will be accomplished, as well as the location of any supporting offices that will likely be involved in this contract.

6. References: Contact name, agency name, and telephone number of at least four (4) current airport clients if the primary firm located within Georgia.

7. Regulatory Familiarity: Demonstrate familiarity with the Federal Aviation Administration (FAA) Atlanta District Office and Georgia Department of Transportation (GDOT) Aviation Programs.

8. Workload: Provide a summary of the primary firm's current workload and ability to meet schedules and deadlines.

Evaluation Criteria

The following criteria summarized from FAA AC 150/5100-14E, Section 2-8, shall be used to select the consultant and therefore should be included in a Statement of Qualification:

1. Capability to perform all or most aspects of the project and recent experience in airport projects comparable to the proposed tasks
2. Key personnel's professional qualifications and experience and availability for the proposed project; their professional integrity and competence; and their knowledge of FAA regulations, policies, and procedures.
3. Capability to meet schedules or deadlines
4. Quality of projects previously undertaken and capability to complete projects without having major cost escalations or overruns.
5. Qualifications and experience of sub-consultants regularly engaged by the consultant under consideration
6. The capability of a branch office that will do the work to perform independently of the home office, or conversely, its capability to obtain necessary support from the home office.
7. Ability to furnish qualified inspectors for construction inspection.
8. Understanding of the projects' potential challenges
9. The degree of interest shown in undertaking the project and familiarity with and proximity to the geographic location of the airport.
10. Capability to incorporate and blend aesthetic and architectural concepts with the project design while accomplishing the basic requirements that transportation facilities be functional, safe, and efficient
11. Meeting the Disadvantaged Business Enterprise (DBE) contract goal, evidence documenting the consultant met the DBE goal, or by documenting that it made good faith efforts to meet the DBE goal
12. Capability to conduct a value engineering (VE) study for projects that are particularly complex or have unique features.

Submittal

All parties should submit an original and four (4) copies along with a digital copy of the Statement of Qualifications, which shall contain no more than thirty (30) pages, excluding tabs and a cover letter not exceeding two (2) pages. Submittals shall be printed single-sided on 8.5"x11" paper.

Selection Process

Qualifications will be reviewed and evaluated by a Selection Committee based on the criteria listed herein. At the discretion of the Selection Committee, consultants may or may not be invited to participate in an interview. It is the intent of the Statesboro-Bulloch County Airport to select a consultant because of this effort. All unsuccessful firms will be notified in writing no later than ten days after the selection and contracting process is completed.

Responses are to be addressed to:
Bulloch County Board of Commissioners
Project: Airport Consulting Services - Engineering
Attn: Peyton Fuller, Procurement Director
115 N Main Street
Statesboro, Ga 30458

Questions: All questions and requests for clarification regarding this RFQ shall be submitted to Peyton Fuller, Procurement Director, at pfuller@bullochcounty.net. Please include the project number, FY27-AP-ACE, in the subject line of the email. The deadline to submit questions or requests for clarification for this RFP is November 6, 2026, at 5:00 PM. All responses will be posted to the procurement websites no later than 5:00 PM on November 13, 2026.

Deadline for submittal is 3:00 PM on December 3, 2026. The Statement of Qualifications must be delivered in a sealed envelope or box clearly marked, " Airport Consulting Services - Engineering." Bulloch County shall assume no responsibility for responses that are received after the prescribed date and time, or that are not properly addressed or identified.

Responding firms shall have no contact related to this project with Bulloch County elected or appointed officials, members of the Statesboro-Bulloch County Airport Committee, or Statesboro City employees during this Statement of Qualifications process. Any such contact will subject the firm to immediate disqualification for consideration for this project. Contact may only be made to the designated point of contact for this RFQ listed above. Consultants can also request an airport site visit prior to the submitting.

This is a Request for Qualifications only. Price proposals are not required at this time.

Mandatory Forms:
Please also include the following forms in your submission. These forms will not count in the thirty (30) page limit.

A. Non-Collusion Affidavit
B. Respondent's Declaration
C. Contractor Affidavit
D. Subcontractor Affidavit

FORM A: NON-COLLUSION AFFIDAVIT

STATE OF:

COUNTY OF:

Owner, Partner, or Officer of Firm:

Company Name, Address, County and State:

Being of lawful age and being first duly sworn, the above-named individual on oath says that he/she is the agent authorized by the vendor to submit the attached proposal. Affiant further states that neither the vendor nor any of its employees or agents has prevented or attempted to prevent competition in such bidding by any means whatever; nor has the vendor or any of its employees or agents prevented or endeavored to prevent anyone from making a bid or proposal therefor by any means whatever; nor has the vendor or any of its employees or agents caused or induced another to withdraw a bid or proposal for the work. Affiant further states that neither the vendor nor any of its employees or agents has directly or indirectly violated Section 36-91-21(d) of the Official Code of Georgia Annotated.

FIRM NAME _____

SIGNATURE _____

TITLE _____

Subscribed and sworn to before me this _____ day of _____ 20____.

NOTARY PUBLIC _____

FORM B: RESPONDENT'S DECLARATION

The respondent understands, agrees and warrants:

That the respondent has carefully read and fully understands the full scope of the specifications.

That the respondent has the capability to successfully undertake and complete the responsibilities and obligations in said specifications.

That this SOQ shall be valid for **60** days.

That this SOQ may be withdrawn by requesting such withdrawal in writing at any time prior **to December 3, 2026, 3:00 PM EDT** but may not be withdrawn after such date and time for a period of **60 days**.

That Bulloch County reserves the right to reject any or all SOQs and to accept that SOQ which will, in its opinion, best serve the public interest. Bulloch County reserves the right to waive any technicalities or informalities in the solicitation.

That by submission of this SOQ the Respondent acknowledges that Bulloch County has the right to make any inquiry or investigation it deems appropriate to substantiate or supplement information supplied by the respondent.

If a partnership, a general partner must sign.

If a corporation the authorized corporate officer(s) must sign and the corporate seal must be affixed to this proposal.

RESPONDENT:

_____

Name Title

_____

Name Title

AFFIX CORPORATE SEAL (if applicable)

Subscribed and sworn to before me this _____ day of _____ 20____.

NOTARY PUBLIC _____

FORM C: Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of Bulloch County, Georgia has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_____ _____
Federal Work Authorization E-verify Company ID# Date of Authorization

_____
Name of Company

_____
Name of Contractor

Airport Consultant SOQ-Engineering
Name of Project

__**Bulloch County, Georgia**_____
Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, _____, 20____ in _____ (city), ____ (state).

_____
Signature of Authorized Officer or Agent

_____
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____,20____.

_____
NOTARY PUBLIC

My Commission Expires:
_____

* As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

FORM D: Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (**enter name of contractor**) on behalf of **Bulloch County, Georgia** has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_____ _____

Federal Work Authorization E-verify Company ID# Date of Authorization

_____

Name of Subcontractor

Airport Consultant SOQ-Engineering

Name of Project

Bulloch County, Georgia

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on _____, ___, 20__ in _____(city), _____(state).

_____

Signature of Authorized Officer or Agent

_____

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____,20__.

_____

NOTARY PUBLIC

My Commission Expires:

_____