



REQUEST FOR PROPOSALS

ALL PROSPECTIVE CONSTRUCTION FIRMS

REQUEST FOR PROPOSALS

EMAS TRAINING PAVILION

GHS-FD Project Number: F2026002

Grady Health System Department of Design & Construction is soliciting proposals for construction services for the **EMAS TRAINING PAVILION (F2026002)**

The project is located at 235 Estoria Street SE, Atlanta, Georgia 30316.

The following RFP (dated Tuesday, October 27, 2026, and posted on the Grady website) outlines the scope of services being requested. The **mandatory pre-proposal** meeting is **Tuesday, November 3, 2026, at 10:00 am**, in the conference room of the Estoria EMS Training Academy. The driving address is 235 Estoria Street, SE Atlanta, GA 30316.

Proposals, in accordance with the RFP for project number F2026002, are due, via e-mail, Friday, November 13, 2026, at 2:00 pm.

Additionally, registration with VendorMate (through the following website: <https://registersupplier.ghx.com>) must be completed prior to proposal submission.

Please notify **Tyrone Williams** by email at tewilliams@gmh.edu of your intention to submit a proposal by filling out and submitting Appendix D by close of business, **Tuesday, November 3, 2026**.

Sincerely,

Tyrone Williams

Tyrone Williams
Construction Project Manager
Design & Construction
Grady Health System



Grady Health System

EMS TRAINING PAVILION

GHS – FD Project Number – F2026002

Request for Proposals

Construction Services

Released: October 27, 2026

Due Date: November 13, 2026

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1.0 GENERAL INFORMATION

Grady Health System is soliciting Proposals for Construction Services for the following project.

PROJECT: EMS TRAINING PAVILION
PROJECT: F2026002
LOCATION: 235 Estoria Street SE, Atlanta, GA 30316

1.1 Introduction

Grady Health System (“GHS”) is one of the Southeast’s largest public hospital systems.

With a delivery system that includes affiliations with public health organizations, medical education programs, and community advocates, GHS provides quality, cost-effective, and customer focused health care to residents of metropolitan Atlanta and citizens of the State of Georgia.

Grady Health System is comprised of:

- Grady Memorial Hospital (953 licensed beds)
- Correll Pavilion (Ambulatory Care)
- Ponce de Leon Center (HIV/AIDS Primary Care and Research)
- Crestview Health and Rehabilitation Center (388 licensed long-term care beds)
- Loughlin Radiation Oncology Center,
- Nine community health centers,
- Regional Perinatal Center
- State of Georgia Poison Control Center
- Georgia Cancer Center for Excellence
- The Marcus Stroke and Neuroscience Center
- Grady EMS-Atlanta’s 911 ambulance service,
- The region’s premiere Level I trauma center and nationally renowned emergency medicine and burn centers.

Grady Health System (GHS) seeks to continue delivering patient-focused emergency medical transportation and healthcare services to residents throughout metropolitan Atlanta and citizens across the State of Georgia. To support this mission and enhance the training and preparedness of its Emergency Medical Services (EMS) personnel, GHS intends to design and construct a dedicated EMS Training Pavilion. The facility will provide a centralized location for hands-on training, simulations, continuing education, and professional development activities, ensuring EMS staff are equipped with the skills and resources necessary to provide the highest level of patient care and emergency response services. The Training Pavilion will support both current operational needs and the future growth of the EMS Department.

The information contained in this RFP about Grady Health System, its facilities, services and business practices is confidential, and should not be distributed or disseminated without the express written approval of Grady Health System.

Grady Health System’s Design & Construction team manages all capital improvements, space planning, programming, architectural/engineering design, and construction for the Grady Health System.

Any questions regarding this RFP shall be submitted via e-mail correspondence to **Tyrone Williams** at tewilliams@gmh.edu. Contact with Grady Health System’s administration, staff, and board members regarding this RFP is strictly prohibited during the selection process

1.2 Project Overview

Projects Description

Provide all labor, materials, equipment, and supervision necessary for the construction of a 1,372-square-foot educational training pavilion, including associated landscaping and site improvements.

Goals of this Effort

The primary goal of the project is to create a dedicated EMS Training Pavilion that provides a realistic, safe, and adaptable training environment for Emergency Medical Services personnel. The facility will support the development, maintenance, and enhancement of clinical, operational, and emergency response skills through hands-on instruction and scenario-based training exercises.

Specific goals include:

- Provide a centralized training venue for EMS personnel education, certification, and continuing professional development.
- Create realistic simulation environments that replicate emergency medical, mass casualty, and disaster response scenarios.
- Enhance workforce readiness, competency, and safety through practical skills training and multidisciplinary exercises.
- Support onboarding and field preparation of new EMS personnel while providing ongoing training opportunities for existing staff.
- Facilitate classroom instruction, practical demonstrations, and collaborative training activities.
- Improve emergency response effectiveness and patient care outcomes by ensuring personnel are trained in current best practices and operational procedures.
- Provide a flexible facility capable of accommodating evolving training requirements, technologies, and EMS operational needs.
- The EMS Training Pavilion will serve as an investment in workforce development, supporting Grady Health System's commitment to delivering high-quality emergency medical transportation and patient care services throughout metropolitan Atlanta and the State of Georgia
- Increase Diverse Subcontractor Participation by:
 - Engaging Diverse Sub-suppliers in partnership and/or joint venture-ship roles.
 - Achieving a **30%** minority spend to Diverse Suppliers for all services of this project.

Tasks Included

The selected construction firm will be responsible for the following tasks:

- Construction services.
- Identifying and implementing elements of Sustainability throughout the project delivery.
- Developing schedule and construction cost for project scope of work.
- Assembling a comprehensive construction team to include all required disciplines, including but not limited to architectural, structural, mechanical, plumbing, electrical, fire protection, and medical equipment coordination.
- Collaborating with project stakeholders to construct the work in accordance with the contract documents to meet the needs of the clinical program.

Project Budgets

Project budgets to include construction costs for the EMS TRAINING PAVILION.

Proposal Schedule Requirement

Contractors shall provide a detailed construction schedule as part of their proposal. The schedule shall identify the anticipated duration and sequencing of all major project activities, including but not limited to:

- Mobilization
- Permit acquisition and approvals
- Subcontractor procurement and coordination
- Material and equipment procurement (buyout)
- Site preparation and civil work
- Electrical work
- Pavilion construction
- Inspections, and project closeout

The proposed schedule shall clearly indicate the planned start and completion dates for each activity, the overall project duration, and any critical milestones necessary for successful project delivery. Contractors shall identify long-lead items and any assumptions that may impact the project schedule.

1.3 Qualifications and Expertise

Grady Health System (GHS) requires the successful Bidder to exhibit the highest standards of integrity and work ethics (e.g. confidentiality, diligence, and professionalism). The Bidder shall have experience in providing similar scope of work in similar institutions as described in this RFP. The firm must have gained this experience as a result of being regularly engaged in the business of providing services in acute health care/patient and long-term care resident environment.

GHS shall assess each Bidder's response and whether in the opinion of GHS, the Bidder can undertake and complete the scope of work delineated within this RFP in a satisfactory and timely manner. GHS will award a contract only to a responsible Bidder that can successfully perform under the terms of this RFP.

Vendor Registration

All vendors are required to complete a Vendor Registration Application through the GHS electronic vendor registration process once awarded a contract and all representatives must register prior to visiting any location or department of the health system. All fees due are the responsibility of the awarded Vendor and their associates. The registration allows GHS to manage the vendors supplying critical services to the health system, profile of the vendors and all representatives that visit the health system. The electronic Vendor Registration Application can be completed on the GHS website at <https://registersupplier.ghx.com>

1.4 Evaluation Criteria and Process

The selection of the awardee to be engaged by GHS to accomplish the scope of work will be based on the following criteria that are utilized by the Evaluation Team. The Evaluation Team is comprised of members of the GHS staff.

- Demonstrating and Understanding the Services
- Previous Experience on Projects of Similar Nature/References
- Management Plan
- Cost Proposal
- Diverse Subcontractor Supplier Plan
- Incorporation of Environmental Sustainability Measures

2.0 SCOPE OF WORK / CONSTRUCTION RESPONSIBILITIES

The scope outlined in this proposal is to provide construction services for the projects in accordance with the contract documents.

The selected construction team will coordinate with the design team in value engineering activities.

To eliminate conflicts and reduce change orders during construction it is imperative that architectural, structural, electrical and plumbing be coordinated and existing conditions be field verified during the pre-construction phase. You are expected to conduct field investigations as required to understand and account for existing conditions at the jobsite (required prior to bid submittal).

- Pre-construction Services including
 - Safety Assessments, Preparation and Approval (PCRA/ICRA/ILSM)
 - Contractor/Subcontractor/Vendor Orientation
 - Field Verifications
 - AHJ Coordination
 - Permitting
 - Scheduling
- Construction Services including
 - Managing All Disciplines
 - AHJ Inspections / Approvals
 - Facilitate Owner/Architect/Contractor (OAC) meetings
 - Invoicing
- Activation
 - Coordination with Owner's Activation Team
 - Coordination activities with Owner's Commissioning Agent
 - FF&E (non-medical equipment) Coordination with Owner's Vendor
- Closeout
 - Closeout Submittals
 - As-Built Electronic Record Drawings
 - Attic Stock
 - Certificates of Occupancy / Completion

Owner Provided Services

Grady Health System may contract separately for low voltage, audio visual, and will contract separately for materials testing, survey, commissioning, wayfinding, art consultant, planning support services as required to implement the project.

3.0 RFP SCHEDULE OF EVENTS

The following Schedule of Events represents the Owner's best estimate of the schedule that will follow. The Owner reserves the right to adjust the schedule as the Owner deems necessary.

RFP Posting	October 27 / 28, 2026
Prospective Firms Pre-proposal meeting	November 3, 2026 (Appendix D due)
RFI's Due	November 6, 2026 – 12:00 noon
Response to RFI's	November 10, 2026 – 12:00 noon
RFP Proposal Due Date	November 13, 2026 – 2:00 pm via e-mail
Anticipated RFP Award Date	November 19, 2026
Awarded Firm Start Date	TBD

4.0 PROPOSAL FORMAT

Provide one (1) electronic copy of the proposal submitted to **Tyrone Williams** at tewilliams@gmh.edu.

Cover Letter: Provide a statement of interest. Include name and number for the **primary point of contact**. Should your firm be selected?

1. **Company Information:** Provide basic company information: Company name, address, indicate type of ownership, name of primary contact, telephone number, fax number, e-mail address, and company website (if available). Identify the office from which the project will be managed and this office's proximity to the project site.
 - a. Please disclose any ownership and/or relationships with Grady Health System.
 - b. Disclose whether the proposing entity or any shareholder, member, partner, officer, or employee thereof is presently a party to any pending litigation or has received notice of any threatened litigation or claim directly or indirectly bearing on Grady Health System or the Fulton-DeKalb Hospital Authority.
 - c. Disclose the name and title of any of Grady Health System's and/or The Fulton-DeKalb Hospital Authority's board members, officers, administration, employees, contracted employees or independent contractors who are employed by or affiliated with the Offeror's organization.
2. **Proposed Team Organization:** Provide your project team's organization chart to include all subcontractors and vendors per the requirements of this RFP.
3. **Qualifications and Experience:** Provide professional qualifications and a description of experience for principal project staff. Provide information to support the following criteria:
 - a. Accreditation types and levels of lead staff
 - b. Field-led personnel's certification types and levels
 - c. Individual lead field personnel's experience (overall and with provider) of similar healthcare projects.
4. **Similar Project Experience:** Provide information on the firm's experience over the last five years with projects of similar type, size, function, and complexity. Describe no more than five (5) projects, in order of most relevant to least relevant, which demonstrate the firm's capabilities to perform the anticipated services listed in this RFP for this project. For each project, the following information should be provided:
 - a. Project name, location and dates during which services were performed.
 - b. Brief description of project and physical description (square footage, number of stories, site area).
 - c. Exact services performed by your firm and relevance to this project.
 - d. Owner's current contact information.
 - e. Identify how your company added value on each project example.
5. **Project Approach:** Provide a response to the following items, along with a description of any other concepts or qualities that differentiate your firm's approach to the project:
 - a. Provide information on Sustainability efforts to include previously incorporated measures and best practices for projects with similar size and scope.
 - b. Describe your approach to developing, assembling, and managing a construction team with experience to be successful.

- c. What unique understanding of similar healthcare projects will enable you to provide cost-saving ideas for incorporating state-of-the-art value engineering within an existing hospital environment?
- d. Describe examples within the past two years of strategies that your firm has employed to help Owners lower the cost of similar capital projects?

6. Proposed Fee:

Appendix E - Bid Form is included and should be filled out accordingly.

Please provide an Excel version of a completed Proposal Form as part of your response.

- a. Provide additional services' hourly rates for each of the proposed team members/roles.
- b. Provide a comprehensive list of anticipated reimbursable expenses. Note that reimbursable expenses are to be billed at actual or direct cost without markup.

8. Owner/Contractor Contract: *Will be distributed at a later date.*

9. RFP Project Documents

- a. APPENDIX A: AUTHORIZATION FORM
- b. APPENDIX B: CONTRACTOR WORK REQUIREMENTS
- c. APPENDIX C: SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES
- d. APPENDIX C-1: BUSINESS IDENTIFICATION AND NONDISCRIMINATION
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- l. APPENDIX F: SUPPLEMENTAL DOCUMENTS

Submittal of Questions or Clarifications: Questions about any aspect of the RFP or the project shall be submitted in writing via e-mail by 12:00 noon, November 6, 2026, to **Tyrone Williams** via e-mail at tewilliams@gmh.edu.

RFP electronic response packages are to be received no later than 2:00 pm, November 13, 2026

Hard copies are not required for this submission.

Please limit your submittal to no more than 20 double-sided 8.5" x 11" pages, with 11 pt. minimum font size. Appendices do not count towards the requested page limit count

5.0 SUPPLY CHAIN STRATEGY & PERFORMANCE

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS UTILIZATION

The overall objective of GHS is to encourage the involvement of small, emerging, and community-based businesses as contractors and suppliers in GHS-generated business activities, while ensuring that such activities comply with all applicable laws. It is the declared policy and intent of GHS to strive to maximize participation of small, emerging, and community-based businesses through all business contracting opportunities. GHS is committed to ensuring that small, emerging, and community-based businesses are given every opportunity to participate in contracting opportunities.

In adherence to GHS's commitment to small, emerging, and community-based businesses, Solicitors of a GHS contract must clearly be defined by GHS herein and demonstrate a good-faith effort to achieve the small, emerging, and community-based business goal set forth. By the documentation of Direct Tier II goods and/or services to be purchased from small, emerging, and community-based businesses certified by one (1) or more of the third-party certification agencies recognized by GHS. Such spending with small, emerging, and community-based businesses will be monitored. In connection with such monitoring, Contracted GHS Suppliers will be required to report monthly to GHS the spend with small, emerging, and community-based businesses, in a manner at GHS's sole discretion. In addition, a copy of the reported small, emerging, and community-based business expenditure must be attached to any invoice submitted to GHS. Failure to demonstrate the defined Good Faith Effort to achieve GHS's small, emerging, and community-based business goals and objectives, or to report in a manner prescribed by GHS, shall be a material breach of any controlling contract between GHS and Contractor or vendor.

GHS prohibits discrimination based on race, color, gender, religion, national origin, or disability in connection with the employment of any person or the award of any contract. GHS will provide equal opportunities without regard to race, color, gender, religion, national origin, or disability, by requiring that any vendor doing business with GHS provide equal opportunity to people and businesses employed by or contracting with the supplier of products and services to GHS.

The Small, Emerging, and Community-Based Business Goal for this Solicitation is 30% of the total project value (design and construction).

GHS® expects that the policies, programs, and practices of its vendors/Contractors will be carried out equitably and that Certified Small, Emerging, and Community-Based Businesses are afforded an equitable opportunity to participate in contract/subcontract opportunities.

Vendors interested in doing business with GHS® are required to sign the Certification below, complete the Contract Compliance Section in its entirety, and submit it with their bid response.

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS PLAN

In addition to the BID submission requirements, each vendor must submit a Small, Emerging, and Community-Based Business Plan (Appendix C) with their BID. The respondent must outline a plan of action to encourage and achieve participation by CERTIFIED SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES, as it relates to this RFP.

Required Forms and Economic Opportunity Plan Statement:

For the bid package to be considered complete, Bidders must submit the following completed documents included in this RFP package.

These documents are considered part of the Bid and should be submitted with the Bid. Failure by the Bidder to provide the information will result in the bid being determined non-responsive.

Vendors utilizing a joint venture partner, subcontractor, or consultant will be required to submit a monthly utilization report, formatted to GHS® specifications. No changes or substitutions may be made to this Small, Emerging, and Community-Based Business Section without the written consent of an authorized GHS® representative.

Requests for changes/substitutions by the Vendor must be made in writing to GHS® and include the reason for the change, how the contract will be impacted, the dollar amount, and any other pertinent information.

Vendor shall comply with the submitted plan unless a written approval from an authorized GHS® representative has been received.

Grady Health System contact information for Supply Chain Strategy & Performance can be found here:

- Tamika Goddard
Director, Strategic Sourcing and Procurement, Supply Chain
470.830.0222
tgoddard@gmh.edu
- Karla Loucas Bey
Manager, Supply Chain Strategy & Performance
kloucas@gmh.edu

These individuals should be utilized as a resource to aid your efforts in developing your small, emerging, and community-based business plan and to enhance participation in certified small, emerging, and community-based business enterprises.

Resources and websites to utilize:

- City of Atlanta - Supplier Diversity Management System (gob2g.com)
- Georgia GDOT - Oracle BI Interactive Dashboards - Directory of Prequalified Contractors (ga.gov)
- MARTA - Supplier Diversity Management Program (diversitysoftware.com)
- Fulton County - Compliance and Certification Online System - Fulton County, GA (diversitycompliance.com)

6.0 PROCESS FOR SELECTION

Admissibility

Appendix D must be completed (filled out) and submitted to GHS-FD at the Pre-bid Meeting.

To be admissible, a bid must comply with the requirements and content of submissions outlined in this RFP. Failure to adhere to this format may result in the bid being excluded from further consideration, at the sole discretion of GHS-FD.

Furthermore, bids from bidders who are currently debarred by Grady Health System, by any local jurisdiction or agency, and/or involved in any litigation with The Grady Memorial Hospital Corporation or Grady Health System will not be considered admissible.

Analysis of Bids & Award

- Bids will not be opened publicly. All parties submitting bids will be notified in writing of the results of their submission.
- GHS will not consider any exceptions, exclusions, and/or clarifications. The bid proposal will be considered for the completion of services in accordance with the scope of work described in this RFP.
- In evaluating bids, the selection will be based on a determination of Responsibility and a determination of Responsiveness.
- GHS-FD reserves the unqualified right to request additional information or meetings with any architect to visit previous or current project sites or to visit their premises, if deemed necessary to arrive at a fully informed decision.
- The award will be to the responsible and responsive bidder whose bid conforms to all material specifications, terms and conditions set forth in the bid, with the lowest price, provided his/her bid is reasonable and is in the interest of GHS to accept it. No bid shall be considered for award if the bid is not responsive to the essential requirements of the solicitation or is submitted by a non-responsive bidder.
- Protest: A formal written protest form can be obtained by contacting the Office of the Contracting Officer at 404-616-0450.

Appendix A: Authorization/Certification Form

Firm:

To whom it may concern:

This is to certify that:

NAME:

TITLE:

SIGNATURE:

Is/are authorized to sign all bid documents and, if the firm is selected, the contract for this assignment.

Certifies that he/she has read, understands, and agrees to be bound by the terms and conditions of the Request for Proposals.

By:

NAME: _____

TITLE: _____

PHONE: () _____

SIGNATURE: _____

DATE: _____

Note: this form may, at the firm's discretion, be replaced by another document to the same effect.

Appendix B: Contractor Work and Permit Requirements

PROJECT NAME: **EMS TRAINING PAVILION**
 AREA: **235 Estoria Street SE, Atlanta, GA 30316**

PROJECT No: **F2026002**
 PROJECT MANAGER: **Tyrone Williams**

Hospitality Program: Quality care for our patients is the key component in everything we do. Our Hospitality Program is centered around the values of safety, service, friendliness, helpfulness, courtesy, communications, response, privacy, dignity, respect, listening and professionalism. The purpose of this pledge is to let you know, for your acknowledgement, that everyone working in Grady Hospital has a stake in quality patient care, patient comfort and patient safety. By supporting these values, you will have a direct impact on our patients.

BADGE AND PERMITS Obtain Vendor Badge (must present valid ID and Project No. from Plant Operations Customer Service). A TB Skin Test (PPD) is required if on site for three or more days. PPDs may be obtained through GHS Employee Health Services (15A) at the expense of the contracting company. Area work/burn permits and utilities shutdown requests are secured prior to starting work.	INFECTION CONTROL All extra materials, debris, and trash are to be removed before moving to the next area or at the end of the day. No eating or drinking in hospital occupied work areas. All evidence of eating or breaks taken on a secured construction site must be removed before end of day. Maintain appropriate construction barriers.
INSURANCE Vendor must have proof of liability and workman's compensation insurance on site.	SHUTDOWNS No Mechanical or electrical systems may be shutdown or turned off for any reason without the GHS Project Manager and Facilities Management's assistance. Plan your work so that seven (7) calendar days notice can be given for all shutdowns. Request for Utilities Shutdown Permit required.
FIRE SAFETY Communicate to the FCC, ext. 5-3956, the area where you will be working: 7 A, B, C. etc. Approved barriers must be in place <u>prior</u> to beginning work. Safety and/or the GHS Project Manager must approve temporary barriers.	CEILING TILES Replace all ceiling tiles by the end of the day, even if work is not completed. Ceiling or ceiling tile removal for access to work or inspection will be tagged with the project permit number , GHS Project Manager's name and contact number. Damaged or discolored tiles should be noted before the project begins, or the contractor will be held responsible. Ceilings that are out for long periods of time must have protection or approval from Epidemiology/Safety to protect patient's health and welfare.
FIRESTOP Cover all wall or slab holes with temporary covers to maintain compartment integrity. After task completed, penetrations must be permanently sealed with Fire Stop. Communicate to GHS Project Manager any penetrations and/or repairs. The GHS Project Manager and/or Safety must inspect all patched penetrations prior to covering.	SAFETY Contractors are to provide fully charged, with pull pin seal, approved (must have a current inspection/service tag) fire extinguishers in the construction areas. Be conscious of all signage and surroundings. Do not obstruct hallways and corridors. Keep doors closed to mechanical spaces construction areas. All clothing must meet OSHA requirements.
SMOKING No smoking on premises. Use dedicated smoking areas outside of building.	CUTTING & CORING Observer to be posted to watch "blind side" of cutting, if coring, or if demolition is to be done.
COMMUNICATION DEVICES Use of cell phones <u>prohibited</u> throughout the hospital. Cellular telephones and 2-way radios may cause electromagnetic interference affecting life support and other critical equipment. Vulnerable, sensitive areas have signage restricting radio-transmitting devices within that vicinity.	SECURITY AND STORAGE Immediate work area secured to keep all others out. Secure all equipment when not in use or attended. Work with GHS Facility Development if project storage space is needed for overnight, or any length of time. Stairwell travel should allow re-entry every 5 th floor, if some stairwell doors are found to be locked. Assigned access cards and keys are for the contractor's use only. No "piggy-backing" is allowed. All assigned keys must be turned over to the foreman/project manager at the end of the day.
HOUSEKEEPING Do not obstruct hallways and corridors. Keep doors closed to mechanical spaces and construction area. The construction area shall be kept in a neat condition at all times. Combustible boxes and scrap materials shall be disposed of daily. Provisions shall be made to avoid the tracking of dust outside of the construction area. No refuge is to be left at any entry. Contractors will not use hospital equipment to clean up their projects.	UTILITIES All company owned equipment (power cords, etc.) must be inspected and approved by Safety/GHS Electrical Department prior to use. When using electrical equipment, a GFCI will be used.

<p>PARKING The GHS-PM will designate available parking areas for contractor employees. Parking space at GHS is limited and workers may be required to park some distance from their work place. Violation of this requirement will result in towing of the vehicle at the owner's expense.</p> <hr/> <p>ELEVATORS Contractors shall move material in an elevator specifically designated by GHS-PM. This elevator shall be designated the "Construction" elevator. The contractors are required to vertically migrate through the building using the stairs or construction elevators.</p>	<p>HAZARDOUS MATERIALS Before starting any work within GHS, conformation must come from the Asbestos Coordinator, Tyrone Williams (x5-9650), that the area is free of Asbestos Containing Material (ACM). ACM or presumed ACM is regulated by the Environmental Protection Agency (EPA) and must not be disturbed by non-asbestos abatement contractors. Work through project managers to insure compliance. No flammable storage on site. The Fire Command Center (FCC) and the Safety Department must be aware of all flammable products brought into Grady needed for task. Material Safety Data Sheets must be made available upon request, for contractor supplied products and materials.</p>
<p>OPEN FLAMES/HOT WORK Open flames of any kind require a burn permit obtained through the GHS Project Manager. This also applies to cutting and welding forms. A recent inspected and approved "ABC" fire extinguisher shall be kept at the work site at all times. Approved barriers are required for arc-welding.</p>	<p>SCHEDULING Any work needing to be performed outside of regular hours (0700-1700) or on weekends, must be pre-scheduled (requested in writing) through the GHS Project Manger one week in advance. Any secured areas, (i.e. 4th and 13th floors or locked offices), will not allow access and will need to be scheduled 48 hours in advance for work to be done in these areas.</p>
<p>SMOKE DETECTORS A network of smoke detectors protects Grady, which send a signal to the Fire Command Center (FCC). Dust, fumes, smoke, water and heat can set off the detectors. Plan your work so that seven- (7) days notice can be given to temporally take the smoke detectors out of service in the construction area. Request for Utilities Shutdown Permit required. Plant Operations may temporarily disconnect smoke alarms.</p>	<p>OCCUPIED AREAS It is expected that contractor employees working in occupied areas, including, corridors, be sensitive to patients, staff and the public. Yelling, foul language, dirt and debris without barricades, unattended ladders, toolboxes and materials are not permitted.</p>
<p>STANDARDS OF CONDUCT Use dedicated elevators for the transportation of equipment. Always yield to Grady patients, staff and daily business. Follow GHS directives during emergency responses and drills. Use of profane and abusive language is prohibited. No profane or derogatory verbiage on apparel. Keeping volume down on radios is required.</p>	<p>TOILETS Contractor personnel shall only utilize staff toilets as directed by your Supervisor. It is expected that use of toilets by contractor personnel will not result in any additional cleaning requirements.</p>
<p>GHS TELEPHONE NUMBERS Frequently used numbers inside GHS: GHS Plant Operations/Facility Management: 5-3960 GHS Facilities Development: 5-4291 Compliance Coordinator: Jinx Rainwater: 5-5291 Safety Office: 5-5356 Plant Operations: Duty Engineer: 404-837-0005 GHS Emergency: 911# Cardiac Arrest: 5-5555 Fire Commander Center: 5-3956 Housekeeping: 5-4065</p>	<p>INTERIM LIFE SAFETY MEASURES These are a series of administrative actions that must be taken to compensate for construction deficiencies or activities. They include:</p> <ol style="list-style-type: none"> 1. Ensuring that exits provide free and unobstructed egress. 2. Ensuring free and unobstructed access to emergency departments. 3. Ensuring that fire alarm, detection, and suppression systems are not impaired. 4. Ensuring that temporary construction partitions are smoke tight and non-combustible. 5. Providing additional fire-fighting equipment and personnel training. 6. Prohibiting smoking in or near construction areas. 7. Reducing flammable loads through revision of storage, housekeeping, and debris removal practices. 8. Conducting additional fire drill(s) each quarter. 9. Increasing hazard surveillance of buildings, grounds and equipment. 10. Training personnel when structural features are compromised. 11. Conducting organization wide safety programs to ensure awareness of hazards.

FIRE SAFETY MEASURES: In the event of a fire, the following steps should be taken:

Rescue anyone in immediate danger.

Alert/alarm by activating the nearest pull station (typically located at most stairwells or proximal to elevator lobbies).

Contain the fire by closing doors, windows and turning off fans

Extinguish (Pull the pin, Aim at the base of the fire, Squeeze the trigger and Spray in a sweeping motion) the fire as time allows, and continue to evacuate.

CONCURRENCE: I HAVE READ, UNDERSTAND AND PLEDGE TO SUPPORT PATIENT CARE AS OUTLINED ABOVE. I UNDERSTAND FAILURE TO COMPLY WITH THESE REQUIREMENTS CAN RESULT IN DISMISSAL FROM THE PREMISES.

SIGNATURE / FIRM: _____ **DATE:** _____

APPENDIX C
CONTRACT COMPLIANCE CERTIFICATION

CERTIFICATION:

I certify that the statements made by me in this Contract Compliance Section are complete and true to the best of my knowledge and belief and are made in good faith. I understand that if I knowingly make any misstatements of fact, I am subject to debarment from participation in future GHS® contracting opportunities, liability for breach of contract, and enforcement of any remedies available under the contract or as a matter of contract law. I agree that no changes shall be made to this section without the written consent of GHS®.

Authorized Representative Signature

Title: _____

Authorized Representative Printed Name

Date: _____

APPENDIX C-1: BUSINESS IDENTIFICATION AND NONDISCRIMINATION

(TO BE SUBMITTED WITH QUALIFICATIONS)

Part I – Business Identification (definitions in Appendix C-2). Please indicate if your company qualifies as one of the business designations below:

	Yes	No												
Small Business If yes, please check the following reason(s) that apply: _____ Less than 100 Employees _____ Less than \$1,000,000.00 in gross annual receipts														
Minority Business Enterprise If yes, please indicate the percentage of minorities who own, control, or operate your company: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;">African American</td> <td style="width: 10%; text-align: center;">%</td> <td style="width: 33%;">Asian American</td> <td style="width: 10%; text-align: center;">%</td> </tr> <tr> <td>Hispanic/Latino</td> <td style="text-align: center;">%</td> <td>Pacific Islander</td> <td style="text-align: center;">%</td> </tr> <tr> <td>Native American</td> <td style="text-align: center;">%</td> <td>Other</td> <td style="text-align: center;">%</td> </tr> </table>	African American	%	Asian American	%	Hispanic/Latino	%	Pacific Islander	%	Native American	%	Other	%		
African American	%	Asian American	%											
Hispanic/Latino	%	Pacific Islander	%											
Native American	%	Other	%											
FEMALE BUSINESS ENTERPRISE If yes, please indicate the percentage of women who own, control, or operate your company: _____%														
LOCAL SMALL BUSINESS If yes, please indicate the county where your company is located. _____ DeKalb _____ Fulton _____ Business location in both counties _____ Other														
ARE YOU RESPONDING AS A CONSULTANT?														
IS YOUR COMPANY CERTIFIED AS ONE OF THE BUSINESS DESIGNATIONS ABOVE? If yes, please give the certifying agency and include a copy of your current certification with your proposal response.														

Total percent of participation by one of the above-listed designations _____%

PART II - NONDISCRIMINATION POLICIES AND PROCEDURES

	Yes	No
Are you an individual and do not employ anyone? If yes, you do not need to complete the remainder of the questions.		
Does your company have an Equal Employment Opportunity/Affirmative Action statement posted on company bulletin boards?		
Do you notify all recruitment sources in writing of your company's Equal Employment Opportunity/Affirmative Action employment policy?		
Do your company advertisements contain a written statement that you are an Equal Employment Opportunity/Affirmative Action employer?		
Do you belong to any unions? If yes, have you notified each union in writing of your commitments to non-discrimination?		
Does your company have a collective bargaining agreement with workers? If yes, do the collective bargaining agreements contain non-discrimination clauses and/or your Equal Employment Opportunity policy covering all workers?		
Does your company, at least annually, maintain a written record of and review the Equal Employment Opportunity policy and Affirmation Action obligations with all employees including those having any responsibility for employment decisions?		
Do you conduct, at least annually, an inventory and evaluation of minority and female personnel for promotional opportunities and encourage these employees to seek, train and prepare for such opportunities?		
Do you conduct, at least annually, a review, of all supervisors' adherence to and performance under the vendors, and contractor's Equal Employment Opportunity policies and Affirmative Action obligations?		
Is there a person in your company who is responsible for Equal Employment Opportunity? If yes, please give name, phone and email address.		

Please explain any no answers, use additional paper as necessary:

Authorized Representative Signature: _____

Date: _____

APPENDIX C-2: SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS DEFINITIONS

(M/WBE) National Minority Supplier Development Council: A minority-owned business is a for-profit enterprise, regardless of size, physically located in the United States or its trust territories, which is 51% owned, operated, and controlled by minority group members, defined as follows:

Asian Indian - A U.S. citizen whose origins are from India, Pakistan, or Bangladesh.

Asian-Pacific - A U.S. citizen whose origins are from Japan, China, Indonesia, Malaysia, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Thailand, Samoa, Guam, the U.S. Trust Territories of the Pacific, or the Northern Marianas.

African American - A U.S. citizen having origins in any of the Black racial groups of Africa.

Hispanic - A U.S. citizen of Hispanic heritage, from any of the Spanish-speaking areas of the following regions: Mexico, Central America, South America, or the Caribbean Basin only.

Native American - A person who is an American Indian, Eskimo, Aleut, or Native Hawaiian, and regarded as such by the community of which the person claims to be a part.

(WBE) Women's Business Enterprise National Council: A Woman-Owned Business Enterprise is an independent business concern that is at least 51% owned and controlled by one or more women who are U.S. citizens or Legal Resident Aliens; whose business formation and principal place of business are in the US or its territories; and whose management and daily operation are controlled by one or more of the women owners.

(LGBTBE) National Gay and Lesbian Chamber of Commerce: Includes businesses physically located in the United States or its trust territories that are at least 51 percent unconditionally owned and operated by at least one lesbian, gay, bisexual, and/or transgender (LGBT) person or persons who are either U.S. citizens or lawful permanent residents. In addition, they must exercise independence from any non-LGBT business enterprise.

(VBE) Veteran-Owned Business - A small business that is at least 51% owned, operated, and controlled by one or more veterans.

(DVBE) Service-Disabled Veteran-Owned Business - A small business that is at least 51% owned, operated, and controlled by one or more veterans with a service-connected disability.

U.S. Small Business Administration:

(DBE) Small Disadvantaged Business - A small business that is at least 51 percent owned, operated, and controlled by one or more individuals who are both socially and economically disadvantaged.

HUBZone Business - A small business operating in a "Historically Underutilized Business Zone." HUB zones are defined at <http://map.sba.gov/hubzone/init.asp>

APPENDIX C-3: SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS PLAN
(TO BE SUBMITTED WITH BID)

Present Commitment: Offeror shall submit its present commitment and business plan to facilitate and promote the participation of small, emerging, and community-based businesses by the completion of Appendix C-4 in its entirety. Small, emerging, and community-based businesses utilized as Tier II contractors and suppliers must be certified by one or more of the 3rd Party Certification Agencies recognized by GHS.

Post-award performance: The specific, measurable performance criteria included in the Proposal for present commitment to small, emerging, and community-based businesses shall, subject to negotiation and mutual consent, become part of the awarded contract as specific, measurable requirements of vendor performance for the duration of the contract. Such spending with small, emerging, and community-based businesses will be monitored. In connection with such monitoring, Vendor will be required to report to GHS monthly, in a manner in GHS's sole discretion, all direct and/or indirect certified spend with small, emerging, and community-based businesses.

SUPPLIER DIVERSITY CERTIFICATION:

I certify that the statements made by me in this Small, Emerging, and Community-Based Business Section are complete and true to the best of my knowledge and belief and are made in good faith. I understand that if I knowingly make any misstatements of fact, I am subject to disqualification and debarment from participation in future GHS contracting opportunities, held liable for breach of contract, and subject to the enforcement of any remedies available under the contract or as a matter of contract law. I agree that no changes shall be made to this section without the written consent of GHS.

Authorized Representative Signature

Title

Date

APPENDIX C-4: SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS SUBCONTRACTING PLAN

(TO BE SUBMITTED WITH BID)- SUPPLY CHAIN STRATEGY & PERFORMANCE

The following are questions concerning the efforts your company will make to ensure that small, emerging, and community-based businesses will have an equitable opportunity to compete for lower-tier subcontracts associated with the Grady Health System agreement:

What product/service areas do you envision the inclusion of small, emerging, and community-based businesses in, and how is this determined?

How are small, emerging, and community-based business capabilities determined by your company?_

How will you ensure the maximum possible inclusion of small, emerging, and community-based businesses in all your purchasing solicitations (i.e., Request for Proposals, Request for Information, and Request for Quotes, etc.)?_

How will your company ensure that small, emerging, and community-based businesses are made aware of upcoming subcontracting opportunities, and how will you prepare them to respond appropriately?

How will you monitor your company's subcontracting performance with small, emerging, and community-based businesses under this agreement and make any adjustments to achieve the subcontracting plan goals?_____

Will your Diverse Supplier subcontract administrator:

Yes / No

_____ Develop and maintain lists of small, emerging, and community-based businesses from all possible sources.

_____ Oversee the establishment and maintenance of your company's contract and subcontract award records associated with this Grady Health System agreement?

_____ Conduct or arrange the training of your company's purchasing personnel on the Grady Health System agreement goals and processes to achieve this goal?

_____ Review purchasing solicitation documents to remove statements, clauses, and other provisions that may prohibit small, emerging, and community-based businesses from participating.

_____ Screen proposed purchasing solicitation documents for subcontracting opportunities and implement appropriate procurement policies and procedures to improve and increase opportunities for small, emerging, and community-based businesses.

- _____ Introducing small, emerging, and community-based businesses to company purchasing personnel based on the commodity or service in which these vendors may have a mutual or potential concern.
- _____ Maintain records demonstrating that procedures have been adopted and implemented to comply with the reporting requirements and small, emerging, and community-based business goals within the Grady Health System.
- _____ Prepare and submit the required monthly reports for small, emerging, and community-based businesses to Grady Health System

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESS SUBCONTRACTING PLAN (SECBSP) PG.2

(PROPOSED DSSP PLAN TO BE SUBMITTED WITH BID, FINAL PLAN TO BE PRESENTED AT SCHEDULE OF VALUES MEETING)

In adherence to GHS's commitment to Supply Chain Strategy & Performance, GHS suppliers must clearly as defined herein, demonstrate good faith effort to achieve the 30% small, emerging, and community-based business goal set forth by documenting the Tier II direct goods and/or services to be purchased from small, emerging, and community-based businesses certified by one or more of the 3rd party certification agencies recognized by GHS. Such spending with small, emerging, and community-based businesses will be monitored. In connection with such monitoring, Contracted GHS Suppliers will be required to report to GHS monthly, in a manner in GHS's sole discretion, all direct spend with Certified Small, Emerging, and Community-Based Businesses.

Company Name: _____
GHS Business Unit: _____
Phone Number: _____

Agreement Term: _____
GHS Business Unit Contact Name: _____
Vendor Contact e-mail: _____

Description of goods/services provided under this primary agreement (include name of project if applicable): _____

Who will be responsible for coordinating your company's small, emerging, and community-based business subcontracting activities during the period of this contract?

Name/Title: _____
Address: _____
Fax: _____

Company: _____
Phone: _____
E-Mail Address: _____

State the total dollar value planned to be subcontracted associated with this GHS agreement:

Please list all the GHS Accepted 3rd Party Certified Small, Emerging, and Community-Based Businesses you have identified that will serve as Direct Tier 2 Subcontractors associated with this GHS project and the projected spend amounts with each company:

Vendor Name	Address	Contact	Phone	Email	Certification Type	Business Classification (Product/Service)	Direct Projected Spend in Dollars	Direct Projected Spend by Percentage

Submitted by:

Authorized Representative Signature

Title

Date

APPENDIX C-5: CERTIFICATION OF EFFORTS

(TO BE SUBMITTED WITH BID)

Vendor: _____

RFP Name: _____ **RFP Number:** _____

I certify that the following efforts were made to achieve Certified Diverse Supplier participation.

- a) Provided written notices to certified small, emerging, and community-based businesses that have the capability to perform the work of the contract or to provide the service: **__Yes __No**
- b) Direct mailing, electronic mailing, facsimile or telephone requests **__Yes __No**
- c) Provided interested certified small, emerging, and community-based businesses with adequate information about plans, requirements, and specifications of the contract in a timely manner to assist them in responding to a solicitation: **__Yes __No**
- d) Allowed certified small, emerging, and community-based businesses the opportunity to review specifications, blueprints, and all other RFP related items at no charge, and allowed sufficient time for review prior to the bid deadline: **Yes __No**
- e) Acted in good faith with interested certified small, emerging, and community-based businesses, and did not reject certified small, emerging, and community-based businesses as unqualified or unacceptable without sound reasons based on a thorough investigation of their capabilities: **__Yes __No**
- f) Did not impose unrealistic conditions of performance on certified diverse business enterprises seeking subcontracting opportunities **__Yes __No**
- g) Additionally, I contacted the referenced certified diverse business enterprises and requested a bid. The responses I received were as follows:

Name and Address of Certified Small, Emerging, and Community-Based Business	Type of work and contract: supplies or Services to be performed.	Response	Reason for Not Accepting Bid

(If additional space is required, this form may be duplicated)

If applicable, please complete the following:

I hereby certify that certified small, emerging, and community-based businesses were “Unavailable” or “Unqualified” to submit bids to provide goods and services for this RFP response. I further certify that efforts have been made to establish “Joint Ventures”, and said entities were also unavailable at this time.

Reasons for the “Unavailability” or being determined “Unqualified”;

Submitted by:

Authorized Representative Signature

Title

Date

APPENDIX C-6*
STATEMENT OF INTENT

TO BE COMPLETED BY ALL KNOWN JOINT VENTURE PARTNERS/ SUBCONTRACTORS/CONSULTANTS
(TO BE SUBMITTED AT SCHEDULE OF VALUES MEETING)

Vendor: _____

RFP Name: _____

RFP Number: _____

_____ agrees to enter into a contractual agreement with
Prime Contractor

_____, who will provide the following
goods/services: Joint Venture Partner/Subcontractor/Consultant

in connection with the above-referenced RFP as a certified diverse business enterprise:

for an estimated amount of \$ _____ or _____ % of the total contract value.

Prime Contractor

Joint Venture Partner /Subcontractor/Consultant

Intend to work together in accordance with this Contract Compliance Section of the bid, contingent upon award and execution of a contract with Grady Health System with the aforementioned Prime Contractor.

I hereby certify that this statement is true and correct:

Prime Contractor Signature:

Joint Venture/Subcontractor/Consultant Signature:

Print Name:

Print Name, Title and Date:

Title:

Address:

Date:

Phone

Fax:

This form may be duplicated as needed.

APPENDIX D: INTENT TO SUBMIT

This letter serves as notification of intent to submit or not to submit a proposal for the **EMS TRAINING PAVILION**

RFP Number: **F2026002**

Complete and submit this form during the Mandatory Pre-Bid Meeting. This will determine your responsibility to submit a bid.

_____, Acting as a representative of _____
(Name of Representative) (Company Name)

Hereby offer our intent to:

_____ Submit a response to the request for services in this RFP.
_____ Decline to submit a response to the request for services in this RFP.

Reason: _____

(Print Name)

(Signature)

(Title)

(Date)

(Telephone/Fax number)

(Email address)

APPENDIX E: BID FORM

To: Grady Health System

Project: **EMS TRAINING PAVILION**

GHS-FD Project # **F2026002**

Date: _____

Submitted by:
(full name) _____
(full address) _____

1. OFFER

Having examined the Place of the Work, all matters referred to in the Request for Proposal, and the sample General Conditions of Contract Between Owner and Contractor including the Project Engagement Letter in Exhibit A prepared by Grady Health System Design & Construction for the above-mentioned project, we, the undersigned, hereby offer to enter into a Contract to perform the services requested for the Construction Price of:

Detailed Budget (CSI Format)	\$ _____
Markups Including:	
Subcontractor Default Insurance	\$ _____
Payment & Performance Bond	\$ _____
Liability Insurance	\$ _____
Builder's Risk Insurance	\$ _____
Preconstruction	\$ _____
Building Permit Allowance	\$ _____
Contractor's Contingency	\$ _____
Fee	\$ _____

Lum Sum Bid dollars, and 00/100
in lawful money of the United States of America, \$.....00

2. ACCEPTANCE

This offer shall be open to acceptance [and is irrevocable] for sixty [60] days from the bid closing date. If this bid is accepted by Grady Health System- Design and Construction within the time period stated above, we will:

- Execute the Agreement within two [2] days of receipt of Notice of Award.
- Furnish the required Insurance within two (2) days of receipt of Notice of Award.
- Commence work within five [5] calendar days after written Notice to Proceed of this bid.

3. CONTRACT TIME

All construction services will be completed in accordance with "Section 4.0 Schedule" of the RFP including construction schedule milestone dates that will be set forth in the Engagement Letter upon project award.

4. ADDENDA

The following Addenda have been received, and the associated modifications considered and all costs are included in the Bid Lump Sum Price.

Addendum # Dated
Addendum # Dated
Addendum # Dated

5. BID FORM SIGNATURES

The Corporate Seal of

(Bidder - print the full name of your firm)
was hereunto affixed in the presence of:

(Authorized signing officer Title)
(Seal)

(Authorized signing officer Title)
(Seal)

If the Bid is a joint venture or partnership, add additional forms of execution for each member of the joint venture in the appropriate form or forms as above.

APPENDIX F: SUPPLEMENTAL DOCUMENTS

The following contract documents are to aid in the bidding process.

Grady EMS Training Pavilion Construction Documents (100% CD Package):

- **General Information dated 6/25/2026**
 - G000 Cover Sheet
 - G001 General Information
 - G002 Project Specifications
 - G003 Project Specifications
 - G004 Project Specifications
- **Civil Plans dated 6/25/2026**
 - C1.0 Cover Sheet and General Notes
 - C2.0 Overall Site, Layout & Grading Plan
 - EC1.0, EC1.1, EC1.2 ES&PC Notes
 - EC2.0 Initial, Intermediate & Final ES&PC Plan
- **Site Plan dated 6/25/2026**
 - AS01 Architectural Site Plan
- **Architectural Plan dated 6/25/2026**
 - A100 Floor Plan
- **Structural Plans dated 6/25/2026**
 - S-001 General Notes
 - S-002 Wind Load Diagram Abbreviations & Legend
 - S-003, S-004 & S-005 Specifications
 - S-006, S-007 & S-008 Special Instructions
 - S-101 Pavilion Foundation & Roof Framing Plan
 - S-301 Foundation Details
 - S-501 Steel Framing Details
- **Plumbing Plans dated 6/25/2026**
 - P001 Plumbing Cover Sheet
 - P002 Plumbing Schedules
 - P500 Plumbing Details
- **Electrical Plans dated 6/25/2026**
 - E001 Electrical Cover Sheet
 - E002 Electrical Specifications
 - E101 Electrical Plan – Level 100
 - E601 Electrical Panel Schedule & One – Line Diagram
- **Low Voltage Plans dated 6/25/2026**
 - LV-000 Cover Page and Legends
 - LV-201 Level 1 – Floor Plan
 - LV401 One Line Diagram – Data Distribution
 - LV501 Details- Firestop
 - LV-502 Details - Installation

Please prepare and submit your bid in accordance with these plans, specifications, reports, and cut sheets.

END OF DOCUMENT
