

## CONSTRUCTION MANAGER AT RISK ADVERTISEMENT

Appalachian State University is accepting proposals for a Construction Manager at Risk (CMR) for the Indoor Practice Facility project until December 12, 2024 at 4:00 PM in the Office of Planning, Design & Construction at Facilities Annex, 2458 Hwy 105 S, Boone, NC 28607.

This project scope includes demolition of the existing indoor practice facility and adjacent softball stadium and the construction of a pre-engineered metal building (PEMB) approximately 101,000 sq. ft. in total including an adjoining event space, support space, and 10,000 sq. ft. clinic "shell" space at 400 Jack Branch Drive, Boone, NC 28608.

The project has an estimated construction budget, including CMR fees, of \$25,000,000.

### **Schedule**

Demolition - Spring 2025

Construction - Summer 2025

A Mandatory Pre-Proposal Conference will be held on:

Conference Date: December 5, 2024  
Conference Time: 1:00 PM  
Conference Address: Appalachian State University  
400 Jack Branch Drive  
Boone, NC 28608

For purposes of coordination, primary contact for project information is:

W. Brett Scantlin, Project Manager  
App State Planning, Design, and Construction  
Facilities Annex  
2458 Hwy 105  
Boone, NC 28607  
828-262-8856  
[scantlinwb@appstate.edu](mailto:scantlinwb@appstate.edu)

Project Information Link:

<https://pdc.appstate.edu/rfps>

## RFP DATA SHEET

Item	Datum
Short Description of Project	This project scope includes demolition of the existing indoor practice facility and adjacent softball stadium and the construction of a pre-engineered metal building (PEMB) approximately 101,000 sq. ft. in total including an adjoining event space, support space, and 10,000 sq. ft. clinic "shell" space at 400 Jack Branch Driver, Boone, NC 28608.
Issuing Office	Planning, Design and Construction, Appalachian State University
Department, Agency/Institution, Location where the Project will be constructed	Appalachian State University, 425 Jack Branch Drive, Boone, NC
Project Overview	See CMR Request Proposal
Website address (URL) for posting of notices regarding this project	pdcc.appstate.edu
Expected Date of Completion of Design	03/15/25
Project Designer & Consultants	Mcmillan, Pazdan, Smith
Construction Manager at Risk Selection Schedule	01/06/25
Construction Management Fee (Section II Paragraph E.2)	The Construction Management Fee will be a fixed number based on a percentage of the Cost of Work. For this project, the maximum percentage of the Cost of Work has been reasonably determined by the Owner and State Construction Office to be TBD.
Project Construction Cost	Total Project Budget: \$25,000,000 Less: Design Fees Movable Equipment (Telecommunications Reserve) (Uilities Reserve) (Other Reserves – itemize) Owner’s Contingency Estimated Available for Construction (GMP) Estimated Construction Management Fee Estimated CMR Contingency

## STATE OF NORTH CAROLINA

### Qualifications Questionnaire for Construction Manager at Risk

**Due Date:** December 12, 2024 @ 4:00pm

**Submitted to:** W. Brett Scantlin, PE  
Appalachian State University  
2458 Hwy 105 S  
Boone, NC 28607

**Project Title:** Indoor Practice Facility, Boone, NC

**Proposer's Name and Principal Office serving this project:**

(Include Company Name and address along with the name of the contact person with telephone number and e-mail address)

**Profile of Proposer:**

- A. Give corporate history of the company including organizational structure, years in business and evidence of authority to do business in North Carolina.
- B. Provide annual workload for each of the last five (5) years; number of projects and total dollar value.
- C. List projects for which the company is currently committed including name & location of each project, time frame to complete & dollar volume of each project.
- D. Financials – Attach latest balance sheet and income statement if available, based on company type. Audited statements preferred. If not available, attach a copy of the latest annual renewal submission to the relevant licensing board. Indicate Dunn & Bradstreet rating if one exists. (Firms must submit financial data and may clearly indicate a request for confidentiality to avoid this item becoming part of a public record.)
- E. Attach letter from Surety Company or its agent licensed to do business in North Carolina verifying proposer's capability of providing adequate performance and payment bonds for this project.
- F. List all construction projects performed by the proposer for agencies and institutions of the State of North Carolina during the past 10 years.
- G. Litigation/Claims. If yes to any of the questions below, list the project(s), dollar value, contact information for owner and designer and provide a full explanation with relevant documentation.

1. Has your company ever failed to complete work awarded to it? \_\_\_ Yes \_\_\_ No
2. Has your company ever failed to substantially complete a project in a timely manner (i.e. more than 20% beyond the original contracted, scheduled completion date)? \_\_\_ Yes \_\_\_ No
3. Has your company filed any claims with the North Carolina State Construction Office within the last five years? \_\_\_ Yes \_\_\_ No
4. Has your company been involved in any suits or arbitration within the last five years? \_\_\_ Yes \_\_\_ No
5. Are there currently any judgments, claims, arbitration proceedings or suits pending or outstanding against your company, its officers, owners, or agents? \_\_\_ Yes \_\_\_ No
6. Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging? \_\_\_ Yes \_\_\_ No
7. Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina? \_\_\_ Yes \_\_\_ No

### **Project Experience**

- A. List three projects of similar size, scope and complexity performed by the proposer.
- B. For each of the three projects, include specific details on the extent to which pre-construction & construction phase services were provided.
- C. For the three projects listed above where CM services were provided, list the Guaranteed Maximum Price (if given), or if not given, the estimated cost provided by you, and the total cost of the project at completion.
- D. For each of the three projects above where CM services were provided, compare the number of days in the original schedule with the number of days taken for actual completion.
- E. For each of the three projects listed above, attach project owner references including the name, address, telephone and fax numbers, and e-mail address of the project owner representative.

### **Key Personnel**

- A. List of key personnel who will be assigned to the project. Attach sworn statement that the above persons will be exclusively assigned to this project for its duration.
- B. For each person listed above, list what aspects of pre-construction or

construction the person will handle. For those persons who will divide their time between pre-construction and construction phases, indicate what percentage of their time will be devoted to each phase.

- C. For each person listed in response to A & B above, list his/her experience with firm, other prior and relevant experience with projects of similar size and scope in construction/design, and the person's location. Attach the resumes and references for each person listed.
- D. Attach project organizational chart indicating the placement of each of the persons listed in response to A & B above.

**Project Planning**

- A. Provide a brief, overall description of how the project will be organized and managed, and how the services will be performed in both Pre-Construction and Construction Phases. Project planning that offers the same project manager for pre-construction and construction phases shall be given preference.
  - a. Value Engineering
  - b. Constructability Issues
  - c. Cost Model/Estimates
  - d. Project Tracking/Reporting
  - e. Request for Information (RFI) and Shop Drawings
  - f. Quality Control
  - g. Schedule and Staffing Plan
- B. HUB Participation: Describe the program (plan) that your company has developed to encourage participation by HUB firms to meet or exceed the goals set by North Carolina General Statute 143-128.2. Please explain how the firm will address minority participation in the management levels of the company. Include a HUB plan in the proposal. Provide documentation of HUB participation that the firm achieved over the past three (3) years on both public and private construction projects. Outline specific outreach efforts that your firm will take to notify HUB firms of opportunities for participation. Indicate the minority participation goal that you expect to achieve on the project.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**\*\*COMPANY NAME\*\***

By: \_\_\_\_\_

Title: \_\_\_\_\_

Attest:

\_\_\_\_\_

(Corporate Seal)

**VERIFICATION**

I HEREBY CERTIFY THAT THE RESPONSES OF \_\_\_\_\_  
ARE CORRECT AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE AND FOR THOSE  
RESPONSES GIVEN WHICH ARE BASED ON INFORMATION AND BELIEF, THOSE  
RESPONSES ARE TRUE AND CORRECT BASED ON MY PRESENT BELIEF AND  
INFORMATION.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\*\*COMPANY NAME\*\*

(Corporate Seal)

By: \_\_\_\_\_  
President

Attested: \_\_\_\_\_  
Secretary

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public in and for the County and State aforesaid,  
hereby certify that \_\_\_\_\_ personally came before me this day and  
acknowledged that he/she is secretary of \_\_\_\_\_ and that by authority duly given and as the  
act of the corporation, the foregoing instrument was signed in its name by its president, sealed with its  
corporate seal, and attested by him/herself as is secretary.

Witness my hand and official seal, this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Official Signature of Notary

\_\_\_\_\_, Notary Public  
Notary's Printed or Typed Name

\_\_\_\_\_  
My Commission Expires: