



Parkland

Request for Proposal (RFP)

Construction Management Services

Parkland Hospital Replacement Program

Parkland Health & Hospital System
5201 Harry Hines Blvd, Dallas, Texas 75235

Issue Date: Wednesday, November 5, 2008
Pre-Proposal Conference: 2:00 PM, Wednesday, November 19, 2008
RFP Due Date: 12:00 Midnight, Thursday, December 11, 2008

Contact:

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A. Construction Management Engagement

Parkland Hospital seeks proposals from qualified construction managers for CM-at-Risk (CMAR) construction of an 862 adult bed full service acute care hospital and campus site work. The services include, preconstruction services, design assist, construction budgeting, construction scheduling, and delivery of the project within a Guaranteed Maximum Price (GMP).

The CMAR will report to the Vice President, Facilities Planning & Development.

The CMAR will establish an on-site organizational structure, lines of communication, authority, and leadership for pre-construction services, construction estimating, construction scheduling, GMP development, and construction management over companies involved in constructing the campus site work and hospital.

The CMAR will coordinate its work with the following organizations that will also be involved in the design, construction, and outfitting of the site, hospital, and other on-campus or near-campus projects.

- Program Manager to augment the Vice President, Facilities Planning & Development's program management staff in the overall management of the program
- Architect, for development of project plans and specifications.
- Program Controls Manager for deployment, and maintenance of the IT infrastructure for use by all of the organizations working to complete the program.
- Site Utilities Master Planner for evaluation of current site utility conditions, and research and development of long-term utility and energy management strategies for the hospital and other campus facilities.
- Medical Equipment Planners
- Other architects, engineers, contractors, consultants, etc., selected to deliver other campus-related projects.

When issued a written Notice to Proceed or contract for this engagement, the CMAR will adhere to the program schedule and deploy management and pre-construction personnel as stipulated in any agreement as a result of this RFP.

B. About the Parkland Hospital Replacement Program

Parkland Memorial Hospital is 54 years old, and it is outdated and 50 percent too small for the current volume of patients — over a million visits per year. Much of the utilities infrastructure is in need of replacement. The facility does not meet current code and is inefficient to operate, overcrowded, and functionally deficient. Physical limitations in the hospital often make it necessary to park patients' beds in the hallways while they wait for treatment. Some treatments are now limited to certain days of the week to manage the number of people in the facility. With the County population expected to double by 2025, Parkland Memorial Hospital needs replacing in order to meet Dallas County's future healthcare needs.

Parkland's mission, conditions, and future, have been thoroughly studied and evaluated over the past six years by the Dallas County Hospital District Board of Managers, Dallas County Commissioners Court, hospital leadership, and blue ribbon panel members from various businesses and organizations. From all of the alternatives that were studied, the alternative for total replacement of the current inpatient and outpatient campus was selected.

The total capital budget for the replacement campus is set at \$1.27 billion. The total capital budget includes, in part, \$747 million in a bond program to be approved by Dallas County voters in the general election on November 4, 2008. The budget also includes \$250 million of cash on hand from prior-year operations, \$100 million of cash from

future operations, and \$150 million to be derived from a philanthropic campaign. The campaign was launched on September 10, 2008, and \$80 million has already been raised in pledges and donations from generous private sector benefactors throughout the region.

Parkland's hospital replacement program features the construction of an 862 adult-bed full service acute care hospital (1.7 million SF), outpatient center (380,000 SF), office center (275,000 SF), parking for 6,000 vehicles, plant, and other support facilities to achieve a new healthcare campus on a Parkland-owned property north of Medical District Drive and east of Harry Hines Boulevard as shown in the following illustration.

The campus is divided by a Dallas Area Rapid Transit (DART) line and station which are scheduled to go into operation in the year 2010. Campus buildings are planned for construction inside the red boundary south and west of the DART line.

Parkland desires to sign and hold prime contracts with a program manager, architect, cm-at-risk, equipment planner, and other major consultants as shown in Figure 2 below.

These first-level team members will be responsible for identifying, justifying, contracting with, and managing lower tier entities that are added to the team to execute the program.

C. Parkland's History

The core of the Parkland Health & Hospital System is Parkland Memorial Hospital (Parkland), which was established in 1894 by the city of Dallas to care for the city's indigent residents. Today, Parkland is a political subdivision of the State of Texas.

Parkland serves the entire community and especially the indigent sick, the working poor and special populations with special needs who cannot get the care they need in their own hospital or region. With a tradition of service to the poor, Parkland also cares for middle class and wealthy who understand the value that Parkland brings to the community and chose to come here for their care.

Today, the hospital is ranked among the best hospitals in the U.S., including rankings for the last 15 years in U.S. News & World Report's annual survey.

Many of Parkland's Centers of Excellence are internationally recognized. They include: burn treatment and research, epilepsy, trauma care, kidney/pancreas transplant, cardiovascular services, diabetes treatment, gastroenterology, radiology, neonatal intensive care and high-risk pregnancy. Parkland continually ranks as one of the nation's busiest labor and delivery units, with nearly 16,000 babies delivered annually.

Since it was established in 1962, the regional burn center has treated more burn patients than any other civilian burn center in the world. In 1964, Parkland performed the first kidney transplant in Texas.

Since 1989, Parkland established health care outreach centers in underserved neighborhoods to bring preventive medicine to the poor. Parkland's Community Oriented Primary Care clinics lessen a serious and chronic problem at the hospital - desperately long waits for service and standing room only, seven days a week. These community health centers and outpatient clinics average nearly a million patient visits per year.

Through its research component with the University of Texas Southwestern Medical Center, Parkland participates in more than 600 research protocols yearly.

Parkland is often looked upon as the leader in trauma and emergency medicine. As the first Level I Trauma Center in Texas, Parkland is world renowned for its emergency department, which handles more than 145,000 patient visits a year. Parkland serves as a key link in Dallas' emergency preparedness system.

For more than 117 years, Parkland has been the safety net hospital for Dallas County. But Parkland's role goes beyond the safety net. It encompasses early access, primary care and preventive medicine. We believe in a patient-centered delivery of health care; while at the same time we work with entire populations to create healthier communities.

D. Operational Planning and Program Development

In June 2008, Parkland entered into an engagement with Karlsberger Healthcare Consulting, Inc. for operational planning and facilities program development.

Under operational planning, Karlsberger was tasked to identify and implement process changes to help Parkland attain top tier healthcare delivery benchmarks in hospital operations by eliminating waste and inefficiency such as waiting, motion, flow, skill imbalance, etc., from inpatient, clinical, and administrative processes on the current campus. The adopted clinical processes will help Parkland define the work flow, patient flow, and material flow processes for operating in the new hospital.

Under facilities program development, Karlsberger was tasked to develop a facilities program for the replacement hospital that includes room data information and schematic relationships for clinical and non-clinical areas, the facility, and the project as a whole.

Parkland desires to fully integrate the facilities program into the design of the new hospital, and therefore, Karlsberger Healthcare Consulting Inc. will represent Parkland during the design to impart facilities program requirements to the design team and to assure the design team's effectiveness toward incorporating the facilities program into the design.

E. Scope of Work for CMAR

The CMAR's initial scope of work covers only the site work and construction of the replacement hospital.

The construction services required from the CMAR for the site work and replacement hospital include:

- Preconstruction Services and Design Assist.
- Construction Budgeting and Cost Control.
- Project Scheduling.
- Establishment of the Guaranteed Maximum Price (GMP) and Construction Buyout.
- Construction Management
- Building and Equipment Shakedown and Startup.
- Building Turnover

The following campus buildings which are in replacement program ARE NOT in the Executive Architect's design scope of work at this time:

- Central Plant
- Parking Garages

- Office Center
- Clinic Center

March 31, 2014, is the date for the replacement hospital to be complete.

F. Parkland's Objectives and Requirements

Parkland desires to contract with Architect, Program Manager, CM-at-Risk, and Project Controls organizations that will bring a high degree of cohesion, cooperation, collaboration, coordination, and teamwork to the project. The team that Parkland assembles must deliver the project on time and on budget and provide cost-effective capital solutions, innovation, and resource stewardship while executing the program.

The organizations must develop and use communications and management methods that promote coordination, production, collaboration, efficiency, and synergy in executing the program.

Parkland would prefer to office key program management, design, construction management, and controls participants in one office or adopt any other organizational arrangement that will ensure a well-organized, fully engaged, and high performing team.

The organizations that comprise the team must engage, involve, and incorporate local business entities into the program in a meaningful and significant way.

The organizations must achieve minority goals of 25% for goods and services and 30% for construction. Minority commitments and actual business results must be tracked and reported . See paragraph ___ for more information on this subject.

Parkland would prefer that all organizations in the program use a single web-based IT infrastructure, website(s), hardware, software, and data storage for their work which his includes program correspondence, drawings, specifications, submittals, RFIs, approvals, procurements, accounting, contracting, and reporting. The organizations will need to assist Parkland in developing this complex IT infrastructure.

Parkland would prefer that all organizations in the program use *Prolog* for project management, *Primavera P6* for scheduling, *Autodesk Revit* for three-dimensional BIM, *NavisWorks* for model coordination, 48-section CSI Code Format for estimating and project management, and yet-to-be determined software important for team use.

All program data must reside on Parkland-owned servers.

All team members must agree to full disclosure and open transparency on all project transactions. Team members must establish a single financial chart of accounts for the program. Every dollar of accounting in the program must be open-book and recorded in single on-line project management and reporting system bought or developed for the program.

Parkland desires delivery of a well-organized, attractive, cohesive, and efficient medical healthcare campus. Parkland places significant value on the Executive Architect's campus development experience, healthcare design experience, design experience in clinical specialty functions, making buildings adaptable and surge capable, making buildings energy efficient, and providing buildings with low-as-possible life cycle cost features.

Parkland desires Just in Time (JIT) selection, delivery, and installation of certain medical and non-medical equipment during construction in order to open the hospital with most-current state-of-art technology in it.

The Architect must provide a Silver LEED-certified campus and buildings at minimum, and also other sustainable strategies, ROI analysis, and sustainability strategies and techniques for the program.

The hospital must fully comply with all applicable Center for Medicare and Medicaid Services (CMS) standards upon turn-over to Parkland.

The hospital must fully comply with all applicable Joint Commission standards and have a clean (empty) Statement of Conditions upon turn-over to Parkland.

All contracts over \$200K must be approved by the Board of Managers in accordance with Dallas County Code.

RFQ terms and conditions are provided in section L.

Parkland would prefer to establish an Owner-Controlled Insurance Program (OCIP) to cover all of the insurance requirements associated with executing the program.

G. Pre-Proposal Conference

A pre-proposal conference will be conducted by Parkland at the George Allen Courthouse Building, Central Jury Room, 600 Commerce St., First Floor, Suite 150 (in the West Tower), Dallas, Texas 75202, from 2:00 pm to 4:00 PM, Wednesday, November 19, 2008.

Prospective CMs, architects, program managers, minority enterprises, suppliers, and other interested parties are invited attend this conference to meet each other and to receive a presentation on the program and Parkland's plan for executing the program.

Parkland will describe the program, procurement process, and opportunities, and will field questions.

H. Two-Step Selection Process

A two-step process will be utilized to select the Construction Manager for the 862 adult bed replacement hospital.

Step 1 Short listing Assessment

Parkland will review all of the timely proposals that are received in response to this RFP.

A selection committee will evaluate the proposals against the criteria below and score and rank the submissions.

The companies or organizations with the top three ranked submissions will make the competitive range for further consideration by means of the procedures described in Step 2 below.

Parkland reserves the right to increase or decrease the number of companies or organizations in the competitive range.

Step 2 Selection Assessments

Parkland will provide supplementary instructions to the short-listed organizations which will call for comprehensive:

- Interview and evaluation of the organization's top manager and his fit for the effort.
- Interview and evaluation of the organization's pre-construction services, estimating, and scheduling resources and likely costs for the program.
- Interview and evaluation of the organization's cm-at-risk management resources, GMP buyout and procurement program, and likely cost of general conditions for the cm-at-risk.
- Review of commitments to achieving minority business, and other social goals for the community.
- Review of terms and conditions, general conditions, and other contract exhibits to be incorporated into the agreement.

Final Selection and Negotiation

Parkland intends to negotiate fees and other contract terms and conditions with the top-ranked firm or organization. If fair and reasonable fees and terms and conditions cannot be established with the top-ranked organization,

Parkland reserves the right to terminate this negotiation and initiate negotiations with the second-ranked organization, and so on and so forth, until fair and reasonable fees and terms and conditions have been established with one of the short-listed organizations.

Parkland reserves the right, any time during the selection process, to request additional information from any individual familiar with the organization, its employees, their work, or projects.

I. RFP Submittal Information and Instructions

Parkland's Representative for this RFP is:

Dan Mergen.
Parkland Health & Hospital System
Director, Facilities Contracts and Administration
5000 Harry Hines Blvd.
Dallas, TX 75235
Phone: 214-590-8045
Email: dmerg@parknet.pmh.org

Parkland's Representative is the only person authorized to provide a formal response for this procurement. No other Parkland employee is authorized to make any statement that would bind Parkland with regard to this RFP.

The deadline for written questions on this RFP is 12:00 midnight, Wednesday, November 26, 2008. Send questions by email to dmerg@parknet.pmh.org.

The deadline for proposals is 12:00 midnight, Thursday, December 10, 2008. Send proposals to dmerg@parknet.pmh.org by email in attachments in .pdf format.

J. Evaluation Criteria

A selection committee will evaluate proposals against the following criteria and weighting. Organizations are asked to organize their proposals in the following order:

Cover Letter

Criterion 1. Company or Team Description.

1. Describe the company's total size, resources, staffing, expertise, and workload as a business. If a joint venture is proposed, describe the joint venture and provide the size, resources, staffing, expertise, and workload for each joint venture partner.
2. Provide DUNS number for the company or each joint venture partner.
3. Provide the most recent annual report (or web link to the report) for the company or each joint venture partner.

(Relative Weight - 10 points.)

Criterion 2. Portfolio of Comparable Work.

1. Describe three projects in the organization's construction management portfolio in the past five years that most closely match the scope and features of Parkland's project.
2. Describe the company's role and any unique aspects in managing the construction for each project.
3. Provide the name, address, phone number, and title of client references for each project.

(The minimum level of reference for these hospitals should be design for new hospital construction of 350 adult beds or more, or 500,000 SF or more.)

(Relative Weight – 15 points)

Criterion 3: Project Leadership.

1. Provide the resume for the top on-site manager proposed for the Parkland project. In the resume, provide a list of the projects that this person has been assigned to and his or her role in the project.
2. What, in this person's experience and abilities, makes him or her the best candidate to lead a successful CM effort for the Parkland project?

(Relative Weight - 20 points)

Criterion 4. Pre-Construction Services.

1. Describe how the organization would tend to delivering the preconstruction services and design assist for the Parkland project.
2. Provide a staffing plan or organization chart for delivery of these services.
3. Provide resumes for the top managers and estimators in the pre-construction services organization.
4. What, in their experience and abilities, make them the best candidates to lead and perform pre-construction services on the Parkland project?

(Relative Weight – 15 Points)

Criterion 5. CM-at-Risk Services.

1. Describe how the organization would deliver cm-at-risk services for the Parkland project.
2. Provide a staffing plan or organization chart for these cm-at-risk services.
3. Provide resumes for the personnel in the organization that would report to manager described under Criterion 3 above and describe their responsibilities in the organization.
4. What, in their experience and abilities, make them the best candidates to lead and perform cm-at-risk services on the Parkland project?

(Relative Weight – 15 Points)

Criterion 6. Construction Quality Control.

Describe how the organization would tend to construction quality control on the Parkland project. (Relative Weight – 10 Points)

Criterion 7. Construction Scheduling.

Describe how the organization would tend to construction scheduling on the Parkland project. (Relative Weight – 10 Points)

Criterion 8. Local Community Involvement.

Describe steps and strategies the organization will take to generate robust community involvement in the Project. (Relative Weight – 10 Points)

Criterion 9. Minority Business Involvement.

Describe steps and strategies the organization will take to meet the 30% minority goal in the Project. (Relative Weight – 15 Points)

Criterion 10. Fee and General Conditions for the CM.

Provide a recommended reimbursement model for preconstruction services. (Relative Weight – 25 Points)

Provide a recommended reimbursement model for cm-at-risk services.

(Relative Weight – 20 Points)

K. Format for Submissions

Statements of interest and qualifications should be set up in 8½” x 11” portrait and submitted in unlocked .pdf files. Company or organization name should be shown in the header or footer for each page in each file. The file naming convention for each .pdf file should include the name of the organization submitting the document and also “RFP for CMAR (for example, “XYZ Company File 1 (CMAR RFP).pdf”).

L. RFP Terms and Conditions

1. Parkland - The term “Parkland” means the Dallas County Hospital District d/b/a Parkland Health & Hospital System;
2. The term “Authorized Representative” means any person or persons at Parkland (other than the Contracting Officer) who are authorized in writing to act for the Parkland.
3. A “Proposer” is a person or entity who submits a proposal, statement of interest, or qualifications.
4. Parkland may cover program insurance requirements with an Owner-Controlled Insurance Program (OCIP).
5. All business entities in the Proposer’s organization shall register with the Vendor Credentialing Services, LP at www.vcsdatabase.com, Parkland’s compliance screening agency, to positively demonstrate that they are not currently identified on the Federal Government Health and Human Services (HHS) List of Excluded Individual /Entities (LEIE); the General Services Administration (GSA) Excluded Parties List; the State of Texas Medicaid Excluded Supplier List, or other local, state, or federal excluded parties list.
6. All workers will be required to wear identification badges on the project.
7. Parkland reserves the right to hold all bids or proposals for 90 days from date of receipt without action; to waive any formalities or irregularities, reject any or all bids or proposals; and to require statements or evidence of bidders’ or proposers’ qualifications including financial statements. Bidders or Proposers acknowledge that time is of the essence and that Parkland may consider evaluation factors other than price in selecting the successful bidder or proposer.
8. Parkland reserves the right to cancel the procurement at any time for any reason.
9. Bidders or Proposers may be disqualified from consideration for contract award for these and other comparable situations or conditions:
 - Parkland identifies actual or potential collusion between the Bidder or Proposer and Parkland employees.
 - Parkland is in litigation with the Bidder or Proposer or a Bidder’s or Proposer’s associate, subcontractor, or identified to participate in this procurement.
 - Parkland determines that the Bidder or Proposer has defaulted or may default on previous or existing contracts.
 - Parkland determines that the Bidder or Proposer lacks the requisite competency as revealed by pertinent factors, including but not limited to, experience, equipment, financial statement and questionnaires.

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- Bidder or Proposer has failed, or is failing, to perform in a satisfactory manner on another contract for Parkland.
 - Bidder or Proposer violates the provisions of the procurement by communicating with Parkland personnel or consultants outside of the provisions set forth in the procurement.
 - Bidder or Proposer offers gifts, incentives, future promises or commitments, and/or bribes to any Parkland employee, official, or consultant.
 - Bidder or Proposer violates Parkland's rules for consultants/visitors.
 - Bidder or Proposer fails to provide a proposal in accordance with the IFB, RFP, or RFQ.
 - Bidder or Proposer is identified on the Federal Government Health and Human Services (HHS) List of Excluded Individual /Entities (LEIE); the General Services Administration (GSA) Excluded Parties List; the State of Texas Medicaid Excluded Supplier List; or the federal government terrorist list.
 - Bidder or Proposer fails to register with the Vendor Credentialing Services, LP at www.vcsdatabase.com.
 - Parkland receives the bid or proposal after the deadline stated in the procurement. Late bids and proposals are considered non-responsive and handled in accordance with Parkland policy handling non-responsive bid or proposal documents.
 - The Bidder or Proposer releases information that it is not authorized to release.
10. A contract based on this procurement requires the approval of the Dallas County Hospital District Board of Managers and Dallas County Commissioners, and will not be executed without the prior approval of the Dallas County Hospital District Board of Managers and Dallas County Commissioners.
 11. A contract, if awarded, shall be governed and construed in accordance with the laws of the State of Texas and venue shall be in Dallas County, Texas.
 12. Parkland is a State of Texas governmental entity and is not subject to any type of state or federal taxes. The District is exempt from Federal Income Tax under Section 501 (c) (3) of the IRS code. As such, it is exempt from paying sales tax on purchases. A tax exemption certificate can be issued if requested. The District's Tax ID number is 75-600-422-1.
 13. Parkland is a political subdivision of the State of Texas and as such is subject to the Texas Public Information Act and no disclosure made pursuant to such law shall be a violation of any of Parkland's obligations. Information submitted to Parkland in response to the procurement is subject to public disclosure under the Texas Public Information Act, Texas Government Code, Chapter 552, unless a Bidder or Proposer can demonstrate that the identified part or parts of the proposal falls within one or more of the exceptions to required public disclosure listed in the Public Information Act. If a bidder or proposer believes that certain information in the bid or proposal is exempt from required public disclosure under the Public Information Act, the bidder or proposer must specify the information and the exception(s) that it believes apply, with specific detailed reasons. Parkland will disregard blanket statements regarding the confidentiality of proposals and such statements will be deemed null and void.
 14. Parkland will process any request for information comprising all or part of a bidder's or proposer's bid or proposal in accordance with the procedures prescribed by the Public Information Act. Bidders should consult the Attorney General's web site (www.oag.state.tx.us) for information concerning the application of the provisions of the Public Information Act to proposals and proprietary supplier information. All inquiries must be submitted in writing addressed to: Parkland Health & Hospital System Legal Department, 5201 Harry Hines Boulevard, Dallas, Texas 75235.

15. Bidder or Proposer, by submitting a bid or proposal, agrees to abide by the provisions of Section 202 of Executive Order 11246 regarding Equal Employment Opportunities.
16. It is the policy of the Dallas County Hospital District to better maximize opportunities for Woman/Minority Business Enterprises (WMBE) to participate in Parkland's contract activities. Parkland is committed to identifying, seeking out and assisting WMBEs in becoming familiar with Parkland's requirements for goods, services and construction. When a contract award is made, the awardee will be required to demonstrate that good faith efforts have been and will be extended to WMBEs to become its subcontractors and suppliers. Parkland, its contractors and subcontractors, shall not discriminate on the basis of race, color, religion, national origin, sex, age or physical handicap in the award and/or performance of contracts.
 - A Woman/Minority Business Enterprise (WMBE) is an enterprise that is either a Woman Owned Business or a Minority-Owned Business. A Woman Owned Business is a concern that is at least 51% owned by one or more women or, in the case of publicly owned concerns, in which at least 51% of the stock is owned by one or more women; whose management of daily operations is controlled by one or more of the women who own it; and in which the woman is a U.S. citizen or resident alien.
 - A Minority Owned Business is a concern that is at least 51% owned by one or more minority individuals or, in the case of publicly owned concerns, at least 51% of the stock is owned by one or more minority individuals; whose management of daily operations is controlled by one or more minority individuals who own it; and in which the minority individuals are U.S. citizens or resident aliens. Minority individuals are persons who are African Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Asian-Indian Americans, and other minorities as interpreted by an appropriate certifying agency (such as DFW Minority Business Development Council, Hispanic Leadership Forum, North Central Texas Regional Certification Agency (NCTRCA, etc.).

Good Faith Effort: The following criterion has been established as a Good Faith Effort by the District for Goods and Services and Construction.

Goods & Services: As a good faith effort to implement this policy, Parkland has a goal of 25% for WMBE participation for goods and services. The achievement of this goal will be measured based on the availability of opportunities to contract with WMBEs. Therefore, a purchase that provides no opportunity to contract with WMBEs (e.g., purchase from group purchasing organizations, large capital equipment purchase, pharmaceutical purchases, etc.) will not be included in the calculation of total goods/services available for purchases.

Construction: As a good faith effort to implement this policy, Parkland has a goal of 30% for WMBE participation for construction. The achievement of this goal will be measured based on the availability of opportunities to contract with WMBE businesses.

WMBE Policy Compliance: In engaging associates or subcontractors, Bidder or Proposer shall make good effort to utilize Woman and Minority Business Enterprise in accordance with Parkland's policies as set forth herein, and shall document those efforts. Supplier shall provide such documentation to Parkland. Supplier will be required to demonstrate that good faith efforts have been and will be extended to WMBEs to become secondary suppliers. Parkland, its primary suppliers and secondary suppliers, shall not discriminate on the basis of race, color, religion, national origin, sex, age, or physical handicap in the award and/ or performance of contracts.

Establishing a Good Faith Effort: As part of any contract award, primary tier providers, suppliers, and contractors must identify a "good faith effort" to secure Woman/Minority Business Enterprises (WMBE) as associates, sub-providers, sub-suppliers, and subcontractors. Documentation of your company's processes to actively pursue the fulfillment of a good faith effort may be required at any time from the point of award, through contract completion

M. Reference Documents

The following reference documents are posted at www.parklandhospital.com/replacement.

1. Parkland Site Master Plan, Skidmore Owings, Merrill (SOM)
2. Aerial Photographs of the Site

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