

**COLUMBIA COUNTY, FLORIDA  
BOARD OF COUNTY COMMISSIONERS**

**REQUEST FOR QUALIFICATIONS  
2020-H  
CONFLICT COUNSEL TO THE COUNTY ATTORNEY**

The Board of County Commissioners (BCC) will receive sealed proposals at 135 NE Hernando Avenue, Suite 203, Lake City, Florida 32055, until **2:00 PM on Tuesday, June 30, 2020**, for the following:

**Conflict Counsel to the County Attorney**

To be eligible for consideration, Proposers must be licensed to practice law and in Florida and all attorneys with the Proposing firm must be in good standing with the Florida Bar. Proposers submitting an incomplete proposal as described herein will be considered non-responsive and will not be considered. Any supplemental Request for Qualifications (RFQ) information is available online at: <http://www.columbiacountyfla.com/PurchasingBids.asp>.

Proposals will be time stamped upon actual receipt at 135 NE Hernando Avenue, Suite 203, Lake City, Florida 32055 and will not be accepted as delivered at any other location. Proposers are fully responsible for the timely delivery of their proposal or proposals. Any proposal may be withdrawn at any time prior to opening. Late proposals will not be accepted. Proposals delivered in any other format other than as specified in the RFQ will not be accepted. All questions regarding this solicitation must be received in writing to Esther Chung at the address above, or by email to [echung@columbiacountyfla.com](mailto:echung@columbiacountyfla.com) no later than Tuesday, June 23, 2020, at 2:00 PM local time. Responses to those questions considered material to the solicitation shall be distributed via formal addenda.

Proposals will be publicly opened at 135 NE Hernando Avenue, Suite 203, at 2:00 PM on Tuesday, June 30, 2020, or as soon thereafter as practical.

The Board of County Commissioners welcomes your proposal. Responsive proposals will be evaluated as stated in the evaluation section of this document. The Board of County Commissioners reserves the right to waive any formalities where such waiver does not result in an unfair advantage to any proposer, to reject any or all proposals for any reason, or to re-advertise for proposals for these services as the Board of County Commissioners finds to be in its best interest. The Board of County Commissioners may withdraw all or part of this RFQ at any time to protect the interests of the County. All Proposers are asked to be thorough yet concise in their proposals. Failure to provide a proposal as prescribed herein will result in disqualification.

Pursuant to Chapter 119, Florida Statutes, all proposals submitted in response to the RFQ are public record and will be open to public inspection.

## **I. Overview**

The Board of County Commissioners for Columbia County, Florida (“BCC”) seeks a licensed Florida attorney or law firm (“Firm”) to act as conflict legal counsel to the BCC for all situations in which the County Attorney declares conflict or advises of his/her unavailability. It is anticipated that the successful proposal will demonstrate experience with representation of Florida public entities and boards.

**Conflict Counsel shall represent the BCC only in the event that the County Attorney is unable to provide representation due to a conflict or unavailability.**

## **II. Background**

Columbia County has a population 69,612. The County is primarily rural in nature. Columbia County is the only county in the State of Florida that elects its County Attorney.

## **III. Term**

It is anticipated that the successful proposal will result in the negotiation of an agreement for a three (3) year term to begin upon approval and execution by the Board of County Commissioners.

## **IV. Minimum Requirements**

The Proposer must have experience servicing municipal or other governmental agencies in the State of Florida and be properly licensed practice law in the State of Florida in good standing with the Florida Bar, and with no history of discipline for the five years preceding the date of the proposal. Proposers shall also indicate whether they are presently subject to any complaint now pending with the Florida Bar or any grievance committee. If a complaint is pending, Proposers should explain the circumstances of such complaint and why the County should not consider such complaint as disqualifying the Proposer from consideration. The Proposer shall provide proof of the above minimum qualification by furnishing documentation of said qualifications, which may be verified as part of the proposal review process. Failure to provide said documentation with your proposal, or failure to produce documentation that can be verified through the Florida Bar, shall be grounds for rejecting a proposal as unresponsive and removing it from further consideration. This is a non-negotiable item.

## **V. Scope of Services**

The Proposer shall be prepared to provide the following services as requested from time to time:

- Advise the Board regarding how the law may affect business and policy decisions of the BCC.
- Provide legal opinions, advice, and assistance to the BCC.
- Assist the BCC, when requested, in reviewing proposals and contracts for services.

- Prior to any Board meeting at which the Proposer is requested to provide counsel, review the Board's agenda and anticipate and prepare responses to legal issues.
- When requested, draft Board resolutions or proposals relating to policies or procedures.
- Afford availability to County staff through the County Manager, including telephonic or in-office meetings and written responses to letters or email.
- Handle litigation, either directly as trial counsel or as liaison, to insurance-retained counsel for matters covered by insurance.

## **VI. Submission Requirements**

- Proposers must submit one (1) original response, marked "Original", four (4) copies marked "Copy", and one (1) thumb or flash drive, all in a sealed envelope clearly marked on the outside with the Proposer's name and "**Sealed Proposal for RFQ 2020-H Conflict Counsel Legal Services**" addressed and delivered in-hand on or before the deadline provided above to:

**Columbia County Board of County Commissioners  
135 NE Hernando Ave, Room 203  
Lake City, FL 32055**

- Interested Firms or individuals shall include the following information in their submittals in the exact order listed here with separating page tabs in an 8.5 by 11-page format. The proposals shall be bound, or in a three-ring binder or equivalent folder. The Proposer should not withhold any information from the written response in anticipation of presenting the information orally or in a demonstration. Each Proposer shall submit adequate documentation to certify the Proposer's compliance with the BCC's requirements. Submissions shall be clear and concise and provide the information requested herein.

Tab 1: Letter of Interest including the following elements:

1. A statement of the Proposer's interest in providing the services herein solicited, signed by the person who will have contract authority to enter into an agreement with the County.
2. A statement signed by the Proposer affirming that all contents of the submittal are true and accurate.
3. A summary of the Proposer's strengths as to the requirements of this solicitation, and the Proposer's argument as to why the Firm should be selected.
4. The Letter of Interest shall not exceed two (2) pages in length.

**Tab 2: Qualifications and Background of Firm**

1. Detail the strengths of the Firm and how it believes that the Firm could best assist the BCC as conflict counsel.
2. State whether your Firm or any of its members represents or has represented or performed legal services for Columbia County, any of Columbia County's agencies or municipalities, or any public officer, including Constitutional Officers. Also indicate whether the Firm has experience representing any local or regional authorities or special districts.
3. The Firm must confirm that it is free of conflict of interest or the appearance of a conflict in rendering services to the BCC. If a conflict may exist, the Firm may explain whether such conflict would preclude the Firm from providing services and what circumstances may be necessary to allow for engagement.
4. Provide a minimum of three professional references, including at least one previous or current governmental client, for which the Proposer has performed work similar in scope and magnitude including the contact name, address, email address, telephone number, and date of the contract.
5. Provide any unique capability, experience, or expertise of the Firm in the area of local government.

**Tab 3: Qualifications of Staff**

1. Provide an organizational chart that lists all support staff expected to be assigned to provide the required services, together with comprehensive resumes for each describing experience, training, and education.
2. Identify staff-level experience working with governmental entities and list those projects.
3. Provide the name, Florida Bar number, and comprehensive resume for each of the attorneys who may attend BCC meetings or be responsible for completion of the BCC's work.
4. Disclose ALL past or pending disciplinary proceedings against any attorney who may be assigned to BCC matters. Include any complaints filed to the Florida Bar or any other state bar organization where a finding of probable cause was made. Include all such proceedings regardless of disposition. Disclose the final disposition of any complaint for which probable cause was found or, if unknown, the current procedural posture of such complaints.

**Tab 4: Technical Approach**

1. Provide a brief description of the Proposer's approach with respect to providing representation to public entities, particularly elected boards.
2. Confirm the Proposer's agreement to meet the minimum requirements of this Request for Qualifications and the Scope of Services.
3. Provide a statement indicating how your Firm will deploy resources or otherwise handle the conflict or absence of the County Attorney.

**Tab 5: Response Forms**

Proposers shall complete and execute the response forms specified below and found at the designated pages in this RFQ, and shall include them at Tab 5:

Vendor Information and Signature Form  
Non-Collusion Affidavit  
Public Entity Crimes Form  
Drug-Free Workplace Certificate  
Conflict of Interest Disclosure Statement  
Certificates of Insurance  
W-9 Form

**Tab 6: Proposed Contract**

Proposer shall provide a sample or form contract for consideration. Any proposed contract shall be subject to further negotiation in the event the Proposer is selected for negotiations.

**Tab 7: Additional Materials**

Each Proposer may, but is not required to, include any other materials deemed necessary but not provided otherwise (such as promotional literature, white papers, etc.). They should be clearly marked "Additional Materials". Note that these materials may or may not be reviewed by all evaluators and will not be part of the official evaluation except to the extent they support qualification and experience.

**VII. Indemnification Requirements**

1. If selected, the Proposer shall be required by contract to defend, indemnify, and hold harmless the BCC and all County staff from any and all claims for bodily injury (including death), personal injury, and property damage (including property owned by the BCC) and any other losses, damages, and expenses (including Proposer or any of its employees, agents, or assigns), occasioned by the negligence, errors, or other wrongful act of omission of the Proposer, its employees, agents, or assigns.

2. The first ten dollars (\$10.00) of remuneration paid to the Proposer under any contract will be for the indemnification provided for above.
3. The successful Proposer shall be obligated to maintain, on a primary basis and at its sole expense, at all times during the life of any resulting contract the following insurance coverage, limits, including endorsements described herein. The requirements contained herein, as well as the BCC's review or acceptance of insurance maintained by the Proposer is not intended to and shall not in any manner limit or qualify the liabilities or obligations assumed by Proposer under any resulting contract.
  - a. Professional Liability and Errors or Omissions insurance as appropriate for the type of business engaged, purchased and maintained by the Proposer with minimum limits of not less than \$1,000,000 combined single limit.
  - b. Commercial General Liability insurance on an "occurrence" basis in an amount not less than \$1,000,000 combined single limit Bodily Injury and Property Damage Liability.
  - c. Workers' Compensation insurance applicable to its employees, if any, for statutory coverage limits in compliance with Florida Laws including Employers' Liability which meets all state and federal laws.

All policies must be endorsed to provide the County with written thirty (30) days' notice of cancellation or restriction except for nonpayment of premium. The Firm shall provide the County with certificates of insurance showing the existence of coverage required by this RFQ.

#### **VIII. Evaluation Criteria**

Letter of Interest	0-10
Qualifications and Background of Firm	0-25
Qualifications of Staff	0-30
Technical Approach	0-25
Response Forms	0-10
<b>TOTAL</b>	<b>0-100</b>

**Vendor Information and Signature Form**

Vendor Name	
Trade License (If applicable)	
Contact Person(s)	
Street Address with City, State and Zip Code	
Mailing Address (if different from above)	
Phone Number	
Fax Number	
E-Mail	
Proposer will do the work as	<input type="checkbox"/> Individual <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC
Date and State of Incorporation	DATE: _____ STATE: _____
Name of partnership or joint venture	

By signing below, the submission of qualifications shall be deemed a representation and certification by the Proposing Firm that you have investigated all aspects of the RFQ, have read and understand the RFQ, and acknowledge all addenda.

Authorized Signature:
Printed Name:
Title:
Date:

**Non-Collusion Affidavit**

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

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

I state that I \_\_\_\_\_ of \_\_\_\_\_,  
(Name and Title) (Name of Firm)

am authorized to make this affidavit on behalf of my firm and its owner, directors and officers. I am the person responsible in my firm for the price(s) and amount(s) of this Response, and the preparation of the Response. I state that:

1. The price(s) and amount(s) of this Response have been arrived at independently and without consultation, communication or agreement with any other Provider, potential provider, Proposal, or potential Proposal.
2. Neither the price(s) nor the amount(s) of this Response, and neither the approximate price(s) nor approximate amount(s) of this Response, have been disclosed to any other firm or person who is a Provider, potential Provider, Proposal, or potential Proposal, and they will not be disclosed before Proposal opening.
3. No attempt has been made or will be made to induce any firm or persons to refrain from submitting a Response for this contract, or to submit a price(s) higher than the prices in this Response, or to submit any intentionally high or noncompetitive price(s) or other form of complementary Response.
4. The Response of my firm is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive Response.
5. \_\_\_\_\_, its affiliates, subsidiaries, officers, director, and employees  
(Name of Firm) are not currently under investigation, by any governmental agency and have not in the last three years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to Proposal, on any public contract, except as follows:

I state that I and the named firm understand and acknowledge that the above representations are material and important, and will be relied on by the Board of County Commissioners of Columbia County, Florida for which this Response is submitted. I understand and my firm understands that any misstatement in this affidavit is, and shall be treated as, fraudulent concealment from the State of Florida of the true facts relating to the submission of responses for this contract.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name of Organization: \_\_\_\_\_

Signed by: \_\_\_\_\_

Print Name: \_\_\_\_\_

Being duly sworn deposes and says that the information herein is true and sufficiently complete so as not to be misleading.

The foregoing instrument was executed before me this day \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_ as \_\_\_\_\_ of \_\_\_\_\_, who personally swore or affirmed that he/she is authorized to execute this document and thereby bind the Corporation, and who is personally known to me OR has produced \_\_\_\_\_ as identification.

(stamp)

\_\_\_\_\_  
NOTARY PUBLIC, State of \_\_\_\_\_

**Public Entity Crimes Statement**

SWORN STATEMENT UNDER SECTION 287.133(3) (a), FLORIDA STATUTES: THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted with Proposal, ITN, or Contract Number **RFQ 2020-H**, for **“Conflict Counsel Legal Services.”**
2. This sworn statement is submitted by \_\_\_\_\_  
[Name of entity submitting sworn statement]  
whose business address is \_\_\_\_\_ and (if applicable) its Federal Employer Identification Number (FEIN) is \_\_\_\_\_  
(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: \_\_\_\_\_).
3. My name is \_\_\_\_\_ and my relationship to the above is \_\_\_\_\_  
[Please print name of individual signing]
4. I understand that a "public entity crime" as defined in section 287.133(l)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity in Florida or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any proposal or contract for goods or services to be provided to any public entity or an agency or political subdivision and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that "convicted" or "conviction" as defined in section 287.133(l) (b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.
6. I understand that "affiliate" as defined in section 287.133(l) (a), Florida Statutes, means:
  - a. A predecessor or successor of a person convicted of a public entity crime; or
  - b. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been

convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.

7. I understand that a "person" as defined in section 287.133(1) (e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids/proposals or applies to bids/proposals on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
8. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. **[Please indicate which statement applies].**

\_\_\_\_\_ Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who is active in the management of the entity, nor any affiliate of the entity have been convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND **[Please indicate which additional statement applies].**

\_\_\_\_\_ There has been a proceeding concerning the conviction before a judge or hearing officer of the State of Florida, Division of Administrative Hearings, or a court of law having proper jurisdiction. The final order entered by the hearing officer or judge did not place the person or affiliate on the convicted Contractor list. **[Please attach a copy of the final order.]**

\_\_\_\_\_ The person or affiliate was placed on the convicted Contractor list. There has been a subsequent proceeding before a court of law having proper jurisdiction or a judge or hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the judge or hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted Contractor list. **[Please attach a copy of the final order.]**

\_\_\_\_\_ The person or affiliate has not been placed on any convicted vendor list. [Please describe any action taken by or pending with the State of Florida, Department of Management Services.]

By the signature(s) below, I/we, the undersigned, as authorized signatory to commit the firm, certify that the information as provided in Attachment "C", Public Entity Crimes, is truthful and correct at the time of submission.

\_\_\_\_\_  
AFFIANT

\_\_\_\_\_  
Typed Name of AFFIANT

\_\_\_\_\_  
Title

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

County OF \_\_\_\_\_

The foregoing instrument was executed before me this day \_\_\_\_\_ of \_\_\_\_\_  
20\_\_\_\_, by \_\_\_\_\_ as \_\_\_\_\_ of  
\_\_\_\_\_, who personally swore or affirmed that  
he/she is authorized to execute this document and thereby bind the Corporation, and who is  
personally known to me OR has produced \_\_\_\_\_ as identification.

(stamp)

NOTARY PUBLIC, State of \_\_\_\_\_

### **Drug-Free Workplace Certification**

The drug-free certification form below must be signed and returned with the solicitation response.

In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business' policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid/proposal a copy of the statement specified in the first paragraph.
4. In the statement specified in the first paragraph, notify the employees that, as a condition of working on the commodities or contractual services that are under bid/proposal, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893, Florida Statutes, or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) Days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in, a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of the foregoing provisions.

By the signature(s) below, I/we, the undersigned, as authorized signatory to commit the firm, certify that the information as provided in this Drug-Free Workplace Certification, is truthful and correct at the time of submission.

\_\_\_\_\_  
AFFIANT

\_\_\_\_\_  
Typed Name of AFFIANT

\_\_\_\_\_  
Title

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

County OF \_\_\_\_\_

The foregoing instrument was executed before me this day \_\_\_\_\_ of \_\_\_\_\_  
20\_\_\_\_, by \_\_\_\_\_ as \_\_\_\_\_ of  
\_\_\_\_\_, who personally swore or affirmed that  
he/she is authorized to execute this document and thereby bind the Corporation, and who is  
personally known to me OR has produced \_\_\_\_\_ as identification.

(stamp)

NOTARY PUBLIC, State of \_\_\_\_\_

### Conflict of Interest Statement

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

County OF \_\_\_\_\_

Before me, the undersigned authority, personally appeared \_\_\_\_\_, who was duly sworn, deposes, and states:

I am the \_\_\_\_\_ of \_\_\_\_\_ with a local office  
(Insert Title) (Insert Company Name)

in \_\_\_\_\_ and principal office in \_\_\_\_\_. Said entity is submitting this proposal/offer to RFQ 2020-H, titled "Conflict Counsel Legal Services."

1. The AFFIANT has made diligent inquiry and provided the information in this statement affidavit based upon its full knowledge.
2. The AFFIANT states that only one submittal for this solicitation has been submitted and tendered by the appropriate date and time and that said above stated entity has no financial interest in other entities submitting a proposal for the work contemplated hereby.
3. Neither the AFFIANT nor the above named entity has directly or indirectly entered into any agreement, participated in any collusion or collusive activity, or otherwise taken any action which in any way restricts or restrains the competitive nature of this solicitation, including but not limited to the prior discussion of terms, conditions, pricing, or other offer parameters required by this solicitation.
4. Neither the entity nor its affiliates, nor anyone associated with them, is presently suspended or otherwise prohibited from participation in this solicitation or any contract to follow thereafter by any government entity.
5. Neither the entity nor its affiliates, nor anyone associated with them, have any potential conflict of interest because and due to any other clients, contracts, or property interests in this solicitation or the resulting project.
6. I hereby also certify that no member of the entity's ownership or management or staff has a vested interest in any County Office or Department.
7. I certify that no member of the entity's ownership or management is presently applying, actively seeking, or has been selected for an elected position within Columbia County government.
8. In the event that a conflict of interest is identified in the provision of services, I, the undersigned will immediately notify the County in writing.

\_\_\_\_\_  
AFFIANT

\_\_\_\_\_  
Typed Name of AFFIANT

\_\_\_\_\_  
Title

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

County OF \_\_\_\_\_

The foregoing instrument was executed before me this day \_\_\_\_\_ of \_\_\_\_\_  
20\_\_\_\_, by \_\_\_\_\_ as \_\_\_\_\_ of  
\_\_\_\_\_, who personally swore or affirmed that  
he/she is authorized to execute this document and thereby bind the Corporation, and who is  
personally known to me OR has produced \_\_\_\_\_ as identification.

(stamp)

NOTARY PUBLIC, State of \_\_\_\_\_

**Certificates of Insurance**

Please attach proof of insurance.

**W-9 Form**

Please attach W-9 form.