



DELAWARE STATE UNIVERSITY

OFFICE OF PLANNING & CONSTRUCTION

1200 N. DuPont Highway
Dover, Delaware 19901-2277

Addendum #01

Date: 2-14-2018

Project: Student Health Center Air Handling Unit Replacement

Contract: PC-16-046

The work herein shall be considered part of the bid documents for the referenced project and carried out in accordance with the following supplemental instructions issued in accordance with the Contract Documents without change in Contract Sum or Contract Time. Acknowledge receipt of addendum on the bid form as indicated.

Clarifications:

1. See attached revised Invitation to Bid
2. See attached revised Bid Form

Changes to Specifications:

3. None

Changes to Drawings:

1. None

General Information:

1. Pre-Bid Sign-in Sheet: Please see attached sheet for a list of the attendees at the mandatory pre-bid. **See attached.**
2. Pre-Bid Meeting Minutes: These minutes are now integral to the bidding documents. **See attached.**

1200 North DuPont Highway, Dover, Delaware 19901-2277
302.857.6060 / www.desu.edu

Questions and Answers:

1. **Question:**

Answer:

END

Student Health Center
1200 N. DuPont Highway
Dover, Delaware 19901

Project: PC-16-046 - Student Health Center Air Handling Unit Replacement

Pre-bid Meeting Minutes

MEETING DATE: 02/13/2018 **MEETING TIME:** 10:00 AM - 11:00 AM Eastern Time (US & Canada)

MEETING LOCATION: Facilities Management Building

OVERVIEW:

The pre-bid meeting serves the purpose to introduce the project to the prospective bidders, identify key components of the contract, and to discuss the bidding processes and procedures.

Project involves

It is the intent of Delaware State University to select a qualified contractor to provide services related to the Air Handling Unit Replacement at the Student Health Center as defined in the bid documents.

NOTES:

ATTACHMENTS:

ATTENDEES:

Name	Company	Phone Number	Email	Attendance
J. D. Bartlett	Delaware State University	Tel: (302) 857-7144	jbartlett@desu.edu	For Distribution Only
James Hayman	Delaware State University	Tel: (302) 857-6232	jhayman@desu.edu	For Distribution Only
Khalid Zerrad	Delaware State University	Tel: (302) 857-7085	kzerrad@desu.edu	Present
Dan Shurina	StudioJAED Architects & Engineers	Tel: (302) 832-1652	shurinad@studiojaed.com	Present

Attendee Sign-In

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
1.1	1	Sign-In Sheet				Open
	Description: Pre-bid meeting is mandatory. Sign-in sheet was circulated. All attendees are required to be signed in to validate attendance. Sign-in sheet will be distributed via addendum.					

Responsible Parties

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
2.1	1	Procurement Contacts				Open
	Description: 1. DSU: Zafar Chaudhry, Contract Coordinator 2. DSU: J.D. Bartlett, AVP of Capital Planning & Environmental Sustainability 3. DSU: Khalid Zerrad, Construction Project Manager 4. A/E of Record: Dan Shurina StudioJAED					

These meeting minutes are believed to be an accurate reflection of those items discussed and the conclusions that were reached during the referenced meeting.

Please contact Student Health Center if there are any discrepancies or questions with the content of these minutes.

Project Explanation						
No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
3.1	1	Bid Advertisement				Open
	Description: As outlined in the Bid Advertisement. All documents can be obtained through the state bidding system at http://bids.delaware.gov/ . Please contact ConstructionBid@desu.edu with any questions or concerns with obtaining bid documents.					
3.2	1	Construction Schedule				Open
	Description: 1. Earliest Start of Construction: 3/17/2018 2. Substantial Completion Date: 5/30/18					

Project Requirements						
No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
4.1	1	Bidding Laws				Open
	Description: This project shall comply with all applicable State bid laws including, but is not limited to requirements for Bid Bonds, Payment Bonds, and Performance Bonds.					
4.2	1	Prevailing Wage Regulations				Open
	Description: The State of Delaware Prevailing Wage Regulations apply to this project. Refer to the project manual for further information.					

Bid Form Review						
No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
5.1	1	Bid Form				Open
	Description: <ul style="list-style-type: none"> The Bid Form was briefly outlined. It is essential that bid be submitted in its entirety including required forms & attachments, as indicated in the specifications. Submitted bid shall be lump sum. Submitted bid shall include pricing for each alternate and unit price (if applicable). 					
5.2	1	List of Subcontractors				Open
	Description: Subcontractors List section of the bid form shall not be left blank for any reason. Noncompliance may result in a rejection of submitted bid. If bidding contractor is doing the work in the place of a subcontractor, indicate accordingly on said form. The following subcontractor categories have been established and shall be reflected in each bid.					

Bid Submission						
No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
6.1	1	Submission Deadline				Open
	Description:					

These meeting minutes are believed to be an accurate reflection of those items discussed and the conclusions that were reached during the referenced meeting.

Please contact Student Health Center if there are any discrepancies or questions with the content of these minutes.

Bids will be accepted until **3:00 pm** local time on **Wednesday, February 28, 2018**, at Delaware State University, Facilities Management Building, Room 101, Dover Campus. Bids will be publicly opened and read immediately.

Document Interpretations and Questions

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
7.1	1	Deadline for Questions				Open
Description: Submit all requests and questions, in writing via email, no later than 2/21/2018 (4:00PM EST)						
7.2	1	Inquiries				Open
Description: All bidding related questions should be submitted in writing to ConstructionBid@desu.edu . Questions, answers to questions, and clarifications will be provided via addendum.						

Addenda

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
8.1	1	Deadline for Final Addendum				Open
Description: The final addendum will be issued on, or before, 2/26/2018 .						

Questions and Answers

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
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Uncategorized Items

No	Meeting Origin	Title	Assignment	Due Date	Priority	Status
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These meeting minutes are believed to be an accurate reflection of those items discussed and the conclusions that were reached during the referenced meeting.

Please contact Student Health Center if there are any discrepancies or questions with the content of these minutes.



BID FORM

Project: PC-16-046 – Student Health Center Air Handling Unit Replacement

Location: Delaware State University
Student Health Center, Main Campus
1200 North DuPont Hwy
Dover, Delaware

For Bids Due: Wednesday, February 28, 2018 at 3:00 pm local time

To: Delaware State University
Facilities Building,
Office 101
1200 N. DuPont Highway
Dover, DE 19901-2277
Attn: Zafar Chaudhrey
Associate Vice President

Name of Bidder: _____

Delaware Business License No.: _____ **Taxpayer ID No.:** _____
(A copy of Bidder's Delaware Business License must be attached to this form.)

(Other License Nos.): _____

Phone No.: () _____ - _____ **Fax No.:** () _____ - _____

The undersigned, representing that he has read and understands the Bidding Documents and that this bid is made in accordance therewith, that he has visited the site and has familiarized himself with the local conditions under which the Work is to be performed, and that his bid is based upon the materials, systems and equipment described in the Bidding Documents without exception, hereby proposes and agrees to provide all labor, materials, plant, equipment, supplies, transport and other facilities required to execute the work described by the aforesaid documents for the lump sum itemized below:

\$ _____ (Written Out).

(\$ _____) (Figures).

[This price includes all allowances as documented within the project manual.]

A. ALTERNATES (Note: project is subject to prevailing wages)

1. Alternates: Alternate prices conform to applicable project specification section. Refer to the drawing specifications for a complete description of the following Alternates. An "ADD" or "DEDUCT" amount is indicated by the crossing out the part that does not apply.

a. **Alternate #1:** _____ Net - ADD / DEDUCT

- _____ (Figures).
- _____ (Written Out).

b. **Alternate #2:** Net - ADD / DEDUCT

- _____ (Figures).
- _____ (Written Out).

c. **Alternate #3:** Net - ADD / DEDUCT

- _____ (Figures).
- _____ (Written Out).

B. UNIT PRICES

1. Unit prices conform to applicable project specification section. Refer to the specifications for a complete description of the following Unit Prices:

	<u>ADD</u>	<u>DEDUCT</u>
UNIT PRICE No. 1: _____ (BRIEF DESCRIPTION) \$ _____	\$ _____	\$ _____
UNIT PRICE No. 2: _____ (BRIEF DESCRIPTION) \$ _____	\$ _____	\$ _____
UNIT PRICE No. 3: _____ (BRIEF DESCRIPTION) \$ _____	\$ _____	\$ _____

C. WORK SCHEDULE

1. We understand that this contract is governed by liquidated damages and that submission of this bid is acceptance of the proposed contract completion date. Our proposed detailed project schedule shows more fully the sequence of activities necessary to meet the specified schedule. The project schedule is a required attachment of a complete bid and **failure to submit a viable schedule will be a justifiable reason to deem the bid as incomplete**. Bid schedule shall be submitted in Gantt Chart format (Microsoft Project preferred) to be deemed as an adequate project schedule.
 - a. Schedule should be detailed by trade and show manpower, or provide narrative explaining planned crews.
 - b. Include milestones, phasing, critical path, etc.
 - c. Document any weather contingency built into schedule.
2. Should I/We be awarded this contract, I/We pledge to achieve substantial completion of all the work within _____ calendar days of the Notice to Proceed.
3. Alternative Work Hours

Work during "regular hours" at this site is being performed on a single shift, eight hours per day, 7:30 AM to 4:30 PM, and five days per week, Monday through Friday. To meet the schedule established on the basis of Item 1 above, our proposed work hours will be _____ hours per day, _____ AM to _____ PM, and _____ days per week, _____ through _____ the cost of

which is reflected in our lump sum price. Our lump sum price also includes any mandatory off-hours work required per special conditions.

D. SITE SUPERINTENDANT

We propose to use _____ as our site superintendent. A resume of his/her qualifications is attached.

We understand that DSU reserves the right to interview him/her prior to contract award/prior to start of work and to reject him/her if not considered acceptable. If rejected, we will propose alternate personnel for the position who will be subject to the same review and acceptance procedure, at no increase in our lump sum proposal.

We also understand DSU reserves the right to reject our bid if we are unable to provide a site supervisor acceptable to DSU within thirty (30) calendar days after submission of this bid.

E. REMARKS

1. I/We acknowledge Addendums numbered _____ and the price(s) submitted include any cost/schedule impact they may have.
2. This bid shall remain valid and cannot be withdrawn for thirty (30) days from the date of opening of bids (60 days for School Districts and Department of Education), and the undersigned shall abide by the Bid Security forfeiture provisions. Bid Security is attached to this Bid.
3. The Owner shall have the right to reject any or all bids, and to waive any informality or irregularity in any bid received.
4. This bid is based upon work being accomplished by the Sub-Contractors named on the list attached to this bid.
5. Our Bid Price(s) are firm based on contract award within thirty (30) calendar days of the date of submittal of this bid.
6. I/We understand that we will not be compensated at a later date for claimed additional costs based on any information received during the bid period, but which is not identified in our proposal and subsequently accepted in writing by DSU.

The undersigned represents and warrants that he has complied and shall comply with all requirements of local, state, and national laws; that no legal requirement has been or shall be violated in making or accepting this bid, in awarding the contract to him or in the prosecution of the work required; that the bid is legal and firm; that he has not, directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken action in restraint of free competitive bidding.

Upon receipt of written notice of the acceptance of this Bid, the Bidder shall, within twenty (20) calendar days, execute the agreement in the required form and deliver the Contract Bonds, and Insurance Certificates, required by the Contract Documents.

I am / We are an Individual / a Partnership / a Corporation

By _____ Trading as _____
(Individual's / General Partner's / Corporate Name)

(State of Corporation)

Business Address: _____

Witness: _____ By: _____
(SEAL) (Authorized Signature)

(Title)

Date: _____

ATTACHMENTS

Sub-Contractor List
Non-Collusion Statement
Bid Security
Construction Schedule
Resume of Site Superintendent
(Others as Required by Project Manuals)

END OF SECTION 00 41 13

STATE OF DELAWARE
OFFICE OF MANAGEMENT AND BUDGET

BID BOND

TO ACCOMPANY PROPOSAL
(Not necessary if security is used)

KNOW ALL MEN BY THESE PRESENTS That: _____
_____ of _____ in the County of _____
and State of _____ as **Principal**, and _____
_____ of _____ in the County of _____ and State of _____
as **Surety**, legally authorized to do business in the State of Delaware ("**State**"), are held and firmly unto the **State**
in the sum of _____ Dollars (\$_____),
or _____ percent not to exceed _____
_____ Dollars (\$_____) of amount of bid on Contract No. _____, to be
paid to the **State** for the use and benefit of _____ (*insert State agency
name*) for which payment well and truly to be made, we do bind ourselves, our and each of our heirs, executors,
administrators, and successors, jointly and severally for and in the whole firmly by these presents.

NOW THE CONDITION OF THIS OBLIGATION IS SUCH That if the above bonded **Principal** who has
submitted to the _____ (*insert State agency name*) a certain proposal to
enter into this contract for the furnishing of certain material and/or services within the **State**, shall be awarded this
Contract, and if said **Principal** shall well and truly enter into and execute this Contract as may be required by the
terms of this Contract and approved by the _____ (*insert State
agency name*) this Contract to be entered into within twenty days after the date of official notice of the award
thereof in accordance with the terms of said proposal, then this obligation shall be void or else to be and remain in
full force and virtue.

Sealed with _____ seal and dated this _____ day of _____ in the year of our Lord two
thousand and _____ (20____).

SEALED, AND DELIVERED IN THE
Presence of

Corporate
Seal

By:

Name of Bidder (Organization)

Authorized Signature

Attest _____

Title

Name of Surety

Witness: _____

By:

Title

SUBCONTRACTOR LIST

In accordance with Title 29, Chapter 6962 (d)(10)b Delaware Code, the following sub-contractor listing must accompany the bid submittal. The name and address of the sub-contractor **must be listed for each category** where the bidder intends to use a sub-contractor to perform that category of work. In order to provide full disclosure and acceptance of the bid by the *Owner*, it is **required that bidders list themselves as being the sub-contractor for all categories where he/she is qualified and intends to perform such work.**

<u>Subcontractor Category</u>	<u>Subcontractor</u>	<u>Address (City & State)</u>	<u>Subcontractors tax payer ID # or Delaware Business license #</u>
1. <u>Mechanical</u>	_____	_____	_____
2. <u>Electrical</u>	_____	_____	_____
3. <u>Masonry</u>	_____	_____	_____
4. <u>Fencing</u>	_____	_____	_____
5. <u>Sheet Metal</u>	_____	_____	_____
6. <u>Finishes</u>	_____	_____	_____
7. <u>General Trades</u>	_____	_____	_____
8. <u>Landscaping</u>	_____	_____	_____
9. _____	_____	_____	_____

NON-COLLUSION STATEMENT

This is to certify that the undersigned bidder has neither directly nor indirectly, entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this proposal submitted this date *(to the Office of Management and Budget, Division of Facilities Management)*.

All the terms and conditions of *(Project or Contract Number)* have been thoroughly examined and are understood.

NAME OF BIDDER: _____

**AUTHORIZED REPRESENTATIVE
(TYPED):** _____

**AUTHORIZED REPRESENTATIVE
(SIGNATURE):** _____

TITLE: _____

ADDRESS OF BIDDER: _____

E-MAIL: _____

PHONE NUMBER: _____

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

My Commission expires _____. NOTARY PUBLIC _____.

THIS PAGE MUST BE SIGNED AND NOTARIZED FOR YOUR BID TO BE CONSIDERED.

AFFIDAVIT OF EMPLOYEE DRUG TESTING PROGRAM

OMB Regulation 4104 for the Drug Testing of Contractor and Subcontractor Employees Working on Large Public Works Projects requires that Contractors and Subcontractors implement a program of mandatory drug testing for Employees who work on Large Public Works Contracts funded all or in part with public funds.

For more information, please refer to the following link for the full regulation:

<http://regulations.delaware.gov/register/september2015/final/19%20DE%20Reg%20207%2009-01-15.pdf>

All the terms and conditions of *OMB Regulation 4104* have been thoroughly examined and are understood. We hereby certify that we have in place or will implement during the entire term of the contract a Mandatory Drug Testing Program for our employees on the jobsite that complies with this regulation:

Contractor/Subcontractor Name:

Contractor/Subcontractor Address:

Authorized Representative (typed or printed):

Authorized Representative (signature):

Title:

Sworn to and Subscribed before me this _____ day of _____ 20_____.

My Commission expires _____. NOTARY PUBLIC _____.

AN AFFIDAVIT SHALL BE PROVIDED BY THE BIDDER AND ALL SUBCONTRACTORS IDENTIFIED IN ATTACHED SUBCONTRACTOR LIST. STATEMENT(S) MUST BE SIGNED AND NOTARIZED FOR YOUR BID TO BE CONSIDERED.

INVITATION TO BID

Sealed bids for Delaware State University Contract No. **PC-16-046 – Student Health Center Air Handling Unit Replacement** will be received by the Delaware State University, in the Office of Planning & Construction Room 101 in the Facilities Management Building, 1200 N. DuPont Highway, Dover, DE 19901-2277, until **3:00 pm** local time on **Wednesday, February 28, 2018**, at which time they will be publicly opened and read aloud in the Conference Room. Bidder bears the risk of late delivery. Any bids received after the stated time will be returned unopened.

Project involves

It is the intent of Delaware State University to select a qualified contractor to provide services related to the Air Handling Unit Replacement at the Student Health Center as defined in the bid documents.

A **MANDATORY** Pre-Bid Meeting will be held on **Tuesday, February 13, 2018**, at **10:00 am** at **The Facilities Management Building** for the purpose of establishing the listing of subcontractors and to answer questions. Representatives of each party to any Joint Venture must attend this meeting. **ATTENDANCE OF THIS MEETING IS A PREREQUISITE FOR BIDDING ON THIS CONTRACT.**

Sealed bids shall be addressed to the Delaware State University c/o the Office of Planning & Construction, Facilities Management Building, Room 101, Dover, DE 19901-2277, Attn: Zafar Chaudhry, Associate Vice President of Contract & Procurement. The outer envelope should clearly indicate: "**DSU CONTRACT NO. PC-16-046 – Student Health Center Air Handling Unit Replacement - SEALED BID - DO NOT OPEN.**"

Contract documents may be obtained or reviewed at the office of StudioJAED, 2500 Wrangle Hill Rd, Bear, DE 19701 upon receipt of \$500.00 per set/non-refundable, starting on the day of the mandatory pre-bid. Checks are to be made payable to StudioJAED. Alternatively, in consideration of our environment, and in alignment with the University's sustainability initiatives, bidders may request an electronic copy of the bidding documents by submitting a written request to constructionbid@desu.edu. Delaware State University will track all bidders and ensure plan holder receive all addenda.

Summary of Events and Dates:

2/13/2018	Mandatory Site Visit at Facilities Building (10:00AM EST)
2/21/2018	Deadline for Questions (4:00PM EST)
2/26/2018	Final Date for Addendums
2/28/2018	Proposals Due (3:00 PM EST)
3/7/2018	Contractor Selection Date
3/17/2018	Anticipated Start of Construction Date (subject to change)
3/31/2018	Latest Date for Contract Award
5/30/18	Substantial Completion

Bidders will not be subject to discrimination on the basis of race, creed, color, sex, sexual orientation, gender identity or national origin in consideration of this award, and Minority Business Enterprises, Disadvantaged Business Enterprises, Women-Owned Business Enterprises and Veteran-Owned Business Enterprises will be afforded full opportunity to submit bids on this contract. Each bid must be accompanied by a bid security equivalent to ten percent of the bid amount and all additive alternates. The successful bidder must post a performance bond and payment bond in a sum equal to 100 percent

of the contract price upon execution of the contract. Delaware State University reserves the right to reject any or all bids and to waive any informalities therein. Delaware State University may extend the time and place for the opening of the bids from that described in the advertisement, with not less than two calendar days' notice by certified delivery, facsimile machine or other electronic means to those bidders receiving plans.

DRUG TESTING REQUIREMENTS FOR LARGE PUBLIC WORKS

Pursuant to 29 Del.C. §6908(a)(6), effective as of January 1, 2016, OMB has established regulations that require Contractors and Subcontractors to implement a program of mandatory drug testing for Employees who work on Large Public Works Contracts funded all or in part with public funds. The regulations establish the mechanism, standards and requirements of a Mandatory Drug Testing Program that will be incorporated by reference into all Large Public Works Contracts awarded pursuant to 29 Del.C. §6962. Final publication of the identified regulations can be found at the following: [4104 Regulations for the Drug Testing of Contractor and Subcontractor Employees Working on Large Public Works Projects](#)

END OF ADVERTISEMENT FOR BIDS

PC-16-046 - Student Health Center Air Handling Unit Replacement Pre-Bid Meeting Sign-in
Tue 2/13/2018 @ 10:00 AM

Printed Name: <u>Larry Wall</u> Signature: <u>[Signature]</u> Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Primary Contact: _____	Company: <u>Joseph T. Richardson, Inc</u> Email: <u>Larry@JTRMECH.NET</u> Phone: <u>(302) 398-8101</u> Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Printed Name: <u>DOUG DOHERTY</u> Signature: <u>[Signature]</u> Primary Contact: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Primary Contact: <u>KEN VANDEGRIET</u>	Company: <u>C4D Contractors</u> Email: <u>KVANDGRIET@VERIZON.NET</u> Phone: <u>302 420 2164</u> Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Printed Name: <u>Rob Rettig</u> Signature: <u>[Signature]</u> Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Primary Contact: <u>Rob Rettig</u>	Company: <u>Merit Mechanical</u> Email: <u>TRettig@MeritMech.com</u> Phone: <u>302-366-8601</u> Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Attendee	Company Information	Attach Business Card
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PC-16-046 - Student Health Center Air Handling Unit Replacement Pre-Bid Meeting Sign-in
Tue 2/13/2018 @ 10:00 AM

<p>Printed Name: <u>Andy Baker</u></p> <p>Signature: <u>[Signature]</u></p> <p>Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Primary Contact: _____</p>	<p>Company: <u>SCHLOSSER + Assoc.</u></p> <p>Email: <u>ABAKERSA@HOTMAIL.COM</u></p> <p>Phone: <u>302 738-7333</u></p> <p>Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>Printed Name: <u>DAVE RAGOLIA</u></p> <p>Signature: <u>[Signature]</u></p> <p>Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Primary Contact: _____</p>	<p>Company: <u>CHEROKEE NATION MECH</u></p> <p>Email: <u>DAVID.RAGOLIA@CHEROKEE-CNCES.COM</u></p> <p>Phone: <u>302-833-3104</u></p> <p>Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>Printed Name: <u>B. Scott Schurman</u></p> <p>Signature: <u>[Signature]</u></p> <p>Primary Contact: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>Primary Contact: <u>Robin Schurman</u></p>	<p>Company: <u>BRS Consulting Inc.</u></p> <p>Email: <u>robin@brsconinc.com</u></p> <p>Phone: <u>302 786 2326</u></p> <p>Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	

Attendee	Company Information	Attach Business Card
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PC-16-046 - Student Health Center Air Handling Unit Replacement Pre-Bid Meeting Sign-in
Tue 2/13/2018 @ 10:00 AM

Printed Name: <u>Ryan Jackson</u> Signature: <u>[Signature]</u> Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Primary Contact: <u>Ryan Jackson</u>	Company: <u>Amaker Inc</u> Email: <u>Amaker@AOL.com</u> Phone: <u>(302) 834-8664</u> Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Printed Name: <u>Dan Shurina</u> Signature: <u>[Signature]</u> Primary Contact: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Primary Contact: _____	Company: <u>Studio JAED</u> Email: <u>shurina@studiojaed.com</u> Phone: <u>302-832-1652</u> Email Bid Updates: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Printed Name: <u>Jacob Meyer</u> Signature: <u>[Signature]</u> Primary Contact: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Primary Contact: <u>Dan Shurina</u>	Company: <u>Studio JAED</u> Email: <u>meyerj@studiojaed.com</u> Phone: <u>484-948-5124</u> Email Bid Updates: <input type="checkbox"/> YES <input type="checkbox"/> NO	

Attendee	Company Information	Attach Business Card
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