



ADDENDUM NO. 1

May 31, 2016

NCC Vocational Technical School District
Renovations to the Howard High School of Technology – Bid Package 'B'
Wilmington, Delaware 19801
Page 1

NOTICE: Attach this addendum to the project manual for this project. It modifies and becomes a part of the contract documents. Work or materials not specifically mentioned herein are to be described in the main body of the specifications and as shown on the drawings. Bidders shall acknowledge receipt of this addendum on the space provided on the Bid Form. Failure to do so may subject the bidder to disqualification.

Whenever this Addendum modifies a portion of the Project Manual added information is shown as **Bold** and deleted information is shown as ~~striethrough~~.

The contract documents for the above referenced project, dated April 14, 2016 are amended as follows:

GENERAL CLARIFICATIONS:

Delete Section 002113-2, Prequalification and replace with revised Section 002113-2.

QUESTIONS AND ANSWERS:

N/A

MODIFICATIONS TO SPECIFICATIONS:

1. Section 006216 – Certificate of Insurance, DELETE this section in its entirety and REPLACE with attached revised section.

MODIFICATIONS TO DRAWINGS:

N/A

End of Addendum No. 1



SECTION 002113-2 - PREQUALIFICATION

Please note that all subcontractor categories do not require prequalification in order to participate in the bidding process.

Bidders for Contract HHS-19 Mechanical and Plumbing must be prequalified on both an annual and supplemental basis and have been assigned a MAXIMUM CONTRACT DOLLAR VALUE of \$3,250,000 (three million two hundred fifty thousand dollars) or greater classified as either a mechanical/plumbing trade may submit bids on this project. However, certain other conditions as they relate to Maximum Contract Dollar Value may apply.

General contractors must submit applications for annual and supplemental prequalification, for this project, by June 7, 2016. Only those listed contractors prequalified both on an annual and supplemental basis will be allowed to submit bids. Those currently prequalified on an annual basis need only submit their supplemental application.

For information on annual or supplemental prequalification procedures, or to apply for Annual Prequalification, visit the Division of Facilities Management website at <http://dfm.delaware.gov/> or call (302) 739-5644.

Upon completion of the review of the prequalification information submitted by the contractor or subcontractor, a decision will be made to either approve or deny the prequalification. All contractors or subcontractors seeking prequalification will be notified of the decision, in writing, within five days of such determination.

A copy of the Application for Contractor/Subcontractor Supplemental Prequalification follows this section. You must be prequalified under general prequalification in order for the supplemental prequalification to be valid. An applicant may submit applications for both general and supplemental prequalification at the same time (note different addresses below).

Mail completed general prequalification applications to:

Division of Facilities Management
540 S. DuPont Highway, Suite 1
Dover, DE 19901

Mail completed supplemental prequalification applications to:

EDiS Company
ATTN: Kevin Lucas
Project: Renovations to Howard High School of Technology
110 S. Poplar St., Suite 400
Wilmington, DE 19801

Any contractor or subcontractor who holds a valid prequalification classification shall report any material changes which could adversely affect the prequalification to the Department within ten days of the material change. This notification should come in the form of a letter on the contractor's or subcontractor's letterhead and be signed by an officer of the organization.

New Castle County Vocational Technical School District
Major Capital Improvement Program

Application for Contractor/Subcontractor Supplemental Prequalification

Project: Renovations to Howard High School of Technology

General Information:

Submitted by: _____

Address: _____

Principal Office Location if other than that noted above: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____

Website Address: _____

Delaware Business License Number: _____

Federal E.I. Number: _____

Experience Modification Rating (EMR): _____

Have there been any material changes in your organization since you last submitted an application for general prequalification? (Changes would include things such as: change in organization name, leadership, claims/suits, suspensions/debarments, bankruptcy filings, change in bonding company or maximum bonding capacity)

No _____ Yes _____ (If yes, please explain in detail below)

This qualification statement must be signed by an officer/owner of the company certifying that all information provided is true and correct.

By: _____
(Printed Name)

(Title)

(Authorized Signature)

Date: _____

SECTION 002113-2 - PREQUALIFICATION

Please note that all subcontractor categories do not require prequalification in order to participate in the bidding process.

Bidders for Contract HHS-20 Electrical and IT Infrastructure must be prequalified on both an annual and supplemental basis and have been assigned a MAXIMUM CONTRACT DOLLAR VALUE of \$2,500,000 (two million five hundred thousand dollars) or greater classified as either a electrical trade may submit bids on this project. However, certain other conditions as they relate to Maximum Contract Dollar Value may apply.

General contractors must submit applications for annual and supplemental prequalification, for this project, by June 7, 2016. Only those listed contractors prequalified both on an annual and supplemental basis will be allowed to submit bids. Those currently prequalified on an annual basis need only submit their supplemental application.

For information on annual or supplemental prequalification procedures, or to apply for Annual Prequalification, visit the Division of Facilities Management website at <http://dfm.delaware.gov/> or call (302) 739-5644.

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Major Capital Improvement Program

Application for Contractor/Subcontractor Supplemental Prequalification

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No _____ Yes _____ (If yes, please explain in detail below)

This qualification statement must be signed by an officer/owner of the company certifying that all information provided is true and correct.

By: _____
(Printed Name)

(Title)

(Authorized Signature)

Date: _____

SECTION 006216 – CERTIFICATE OF INSURANCE

In conjunction with Insurance Requirements AIA General Conditions, Article 11, the Contractor shall be bound by the following limits of liability insurance (for Contracts under this Bid Pack). The Contractor shall use the standard "ACORD" for titled "Certificate of Insurance" in submitting his liability insurance limits. The required limits to be inserted in accordance with the sample "ACORD" form in this section:

GENERAL NOTES

1. Other Insurance
 - A. Contractor shall carry any necessary insurance required to cover Owned and Rental equipment that may be necessary for them to use in the performance of the Work.
2. Contractor shall have the following additional items added to his required "ACCORD" form Certificate of Insurance:
 - A. Name and Address of Insured (Contractor).
 - B. Description of Operations/Locations -
3. Added Insured – NCC Vocational Technical School District and EDiS Company
4. Certificate Holder – New Castle County Vocational Technical School District
1417 Newport Road
Wilmington, Delaware 19804

Contractors shall note that although not a part of AIA Document A232 - 2009 Edition, these additional articles apply as noted to this Project.

A sample certificate is bound into the Project Manual immediately following this Document.

END OF SECTION

ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YY)
XX/XX/XX

PRODUCER
 PRODUCER INSURANCE AGENCY
 PO BOX
 PRODUCER STREET ADDRESS
 PRODUCER CITY, ST PROD ZIP

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURED
 SAMPLE SUBCONTRACTOR CERTIFICATE
 (REQUIRED MINIMUM INSURANCE)

INSURER A: XXXXXX
 INSURED B: XXXXXX
 INSURER C: XXXXXX
 INSURER D:
 INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	DATE (MM/YY)	LIMITS	
X	GENERAL LIABILITY	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	EACH OCCURRENCE	\$ 1,000,000
	COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 300,000
	CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/>				MED EXP (Any one person)	\$ 10,000
	GENL AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/>				PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
X	AUTOMOBILE LIABILITY	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO				BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	HIREDAUTOS				AUTO ONLY - EA ACCIDENT	\$
X	NON-OWNED AUTOS				OTHER THAN: AUTO EA ACC ONLY: AGG	\$
X	GARAGE LIABILITY	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	EACH OCCURRENCE	\$ 5,000,000
	ANY AUTO				AGGREGATE	\$ 5,000,000
X	EXCESS LIABILITY	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	DEDUCTIBLE	\$
	OCCUR <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/>				RETENTION \$	\$
X	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	WC STATUTORY LIMITS	\$
					E.L. EACH ACCIDENT	\$ 500,000
					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
					E.L. DISEASE - POLICY LIMIT	\$ 500,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
Project: Renovations to Howard High School of Technology - New Castle County Vocational Technical School District and EDiS Company shall be named as Additional Insureds for both ongoing and completed operations. The endorsements providing the Additional Insured status for ongoing and completed operations must be attached to the Certificate of Insurance.

CERTIFICATE HOLDER ADDITIONAL INSURED; INSURER LETTER: _____ CANCELLATION

New Castle County Vocational Technical School District
 1417 Newport Road
 Wilmington, DE 19804

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE