

# ADDENDUM NO. 2 MAIN BUILDING TRANSFORMER REPLACEMENT AT THE

# DELAWARE HEALTH & SOCIAL SERVICES HERMAN HOLLOWAY CAMPUS 1901 N. DUPONT HIGHWAY, NEW CASTLE DE 19720 DHSS/DFM PROJECT NO.:MC3501000024

DATE OF ISSUE: OCTOBER 8, 2014

- 1.0 This Addendum, Addendum No. 2, shall be made part of the Project Manual and Drawings dated September 22, 2014 for the Delaware Health & Social Services Herman Holloway Campus, Main Building Transformer Replacement.
- 2.0 Any provision in any of the Contract Documents which may be in conflict or be inconsistent with the contents of this Addendum shall be void to the extent of such conflicts or inconsistency.
- 3.0 **Bid Date has not changed.** Sealed bids for OMB/DFM Contract No. MC3501000024 Holloway Campus Main Building Transformer Replacement, will be received by the State of Delaware, Office of Management and Budget, Division of Facilities Management, in the reception area of the Facilities Management Office in the Thomas Collins Building, 540 S. DuPont Highway, Suite 1 (Third Floor), Dover, DE 19901 until 2:00 p.m. local time on Wednesday, October 15, 2014, at which time they will be publicly opened and read aloud. Bidder bears the risk of late delivery. Any bids received after the stated time will be returned unopened.
- 4.0 Changes to prior Addenda
  - 4.1 Addendum #1: Section 00 41 13 Bid Form: **Replace** the Bid Form included with Addendum #1with the revised bid form which includes a corrected Subcontractor listing.
  - 4.2 Addendum #1: Article 12.0.I; Replace the current Article with the following: Excavated soils that are considered clean, select fill; free of rocks, concrete, vegetable matter (roots, grass, etc.) and any other debris may be stockpiled and then deposited at a suitable location designated by DHSS on site.
- 5.0 Changes to Specifications
  - 5.1 There are no changes to Specifications
- 6.0 Changes to Drawings:
  - 6.1 Drawing E-4, Detail 6/E-4; Both Cable Switching Stations shall be rotated 180° so that the loadbreak elbow side of each station is on the opposite side of the parking lot.



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## 7.0 Questions/Clarifications

7.1 There are no Questions/Clarifications. 1

Edward Fayda, P.E.

EF/ef

14-1152B Addendum No 2

Attachments: Specification Section 00 41 13 Bid Form

cc: All Registered Plan Holders

P File

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### **BID FORM**

For Bids Due: 2:00 p.m.; Wednesday, October 15, 2014 To: Mr. Richard Glazeski, Project Manager OMB/Division of Facilities Management Thomas Collins Building, Suite 1, 3<sup>rd</sup> Floor 540 S. DuPont Highway Dover, DE 19901 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.): \_\_\_\_\_ -\_\_\_\_\_ Fax No.: ( )\_\_\_\_\_-Phone 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: Provide all work identified on Contract Documents. **BASE BID:** ) Amount: **ALTERNATES** Alternate prices conform to applicable project specification section. Refer to specifications for a complete description of the following Alternates. An "ADD" or "DEDUCT" amount is indicated by the crossed out part that does not apply. Alternate #1: Omit all work in Main Annex Building shown on Drawing E-3. (\$ ) Alternate #2: Quick Ship Costs for Metal Enclosed 12kV Auto Source Transfer Switch for 8 week delivery, FOB Jobsite. ) Alternate #3: Ouick Ship Costs for Pad Mounted 12kV Transformer for 8 week delivery, FOB Jobsite. ) Alternate #4: Quick Ship Costs for 3000 A Secondary Switchboard for 8 week delivery, FOB Jobsite. ) Alternate #5A: Provide Temporary Transformer on an emergency basis. ) Alternate #5B: Transformer Rental costs after first month. Price is per month. Add: \_\_\_\_\_ (\$ )

DHSS Herman Holloway Campus Main Building

Main Building BID FORM Transformer Replacement 00 41 13-1

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## **BID FORM**

# **NOTES FOR ALTERNATES #2-4:**

- A. If manufacturer does not offer a quick ship program to the time frame identified, list "Not Available" in Alternate Amount.
- B. If equipment can be delivered under the normal delivery schedule in 8 weeks or less, list "\$0.00" in the Alternate Amount.

**UNIT PRICES:** There Are No Unit Prices.

#### ALLOWANCE ACKNOWLEDGEMENT:

| We have included an allowance of time in our schedule for the Owner to complete brick stabilization and finishes in the electric room. We also have included an allowance equal to \$10,000 for interior finishes of the electric room. Work to be further identified during construction. |
|--|
| Acknowledged by:   |
| SELF-PERFORMING WORK ACKNOWLEDGEMENT:  |
| Pursuant to Title 29 Chapter 69, 6962(d)(10)b5 we shall complete 50% of the project work with our own forces, exclusive of material, general conditions, profit and overhead.  |
| Acknowledged By:   |
| ADDENDA ACKNOWLEGEMENT:  |
| I/We acknowledge Addenda numbered 1,2 and the price(s) submitted includes any cost/schedule impact they may have.  |

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# **BID FORM**

This bid shall remain valid and cannot be withdrawn for 60 days from the date of opening of bids, and the undersigned shall abide by the Bid Security forfeiture provisions. Bid Security is attached to this Bid.

The Owner shall have the right to reject any or all bids, and to waive any informality or irregularity in any bid received.

This bid is based upon work being accomplished by the Sub-Contractors named on the list attached to this bid.

Should I/We be awarded this contract, I/We pledge to achieve substantial completion of all the work within <u>120</u> calendar days of the Notice to Proceed.

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.

| Ву                                     |               | Trading as             |  |
|--|---------------|------------------------|--|
| (Individual's / General Partner's / Co | rporate Name) |                        |  |
| (State of Corporation)                 |               | _                      |  |
| Business Address:                      |               |                        |  |
|  |               |                        |  |
| Witness:                               | By:           | (Authorized Signature) |  |
| (SEAL)                                 |               | (Authorized Signature) |  |
|  | _             | (Title)                |  |
| A TOTAL CANALITY OF                    | Date: _       |                        |  |
| ATTACHMENTS Sub-Contractor List        |               |                        |  |
| Non Collusion Statement                |               |                        |  |

Sub-Contractor List Non-Collusion Statement Bid Security Delaware Business License Bidders Qualifications Addendum No. 2
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# **BID FORM**

#### **SUBCONTRACTOR LIST**

In accordance with Title 29, Chapter 6962 (d)(10)b <u>Delaware Code</u>, 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.

| Subcontractor Category |                | <u>Subcontractor</u> | Address (City & State) | Subcontractors tax payer ID #<br>or Delaware Business license # |  |
|------------------------|----------------|----------------------|------------------------|---|--|
| 1.                     | Electrical     |                      |                        | or Delaware Dusiness needse n                                   |  |
| 2.                     | Concrete pads  |                      |                        |   |  |
| 3.                     | Asphalt paving |                      |                        |   |  |
| 4.                     | Carpentry      |                      |                        |   |  |
| 5.                     | <u>Fencing</u> |                      |                        |   |  |
| 6.                     | Excavation     |                      |                        |   |  |
| 7.                     |                |                      |                        |   |  |

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# BID FORM 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 DHSS/DFM CONTRACT NO. MC3501000024 have been thoroughly examined and are

| My Commission expires                  | . NOTARY PUBLIC |    |
|--|-----------------|----|
| Sworn to and Subscribed before me this | day of          | 20 |
| EMAIL: PHONE NUMBER:                   |                 |    |
|  |                 |    |
| ADDRESS OF BIDDER:                     |                 |    |
| TITLE:                                 |                 |    |
| AUTHORIZED REPRESENTATIVE (SIGNATURE): |                 |    |
| AUTHORIZED REPRESENTATIVE (TYPED):     |                 |    |
| NAME OF BIDDER:                        |                 |    |
| understood.                            |                 |    |

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