



TETRA TECH

240 Continental Drive, Suite 200
Newark, DE 19713
Tel: 302-738-7551
Fax: 302-454-5989

Addendum No. 1

Delaware Heath & Social Services
Public Health Laboratory
Fire Alarm System Replacement
OMB/DFM/DHSS Contract No: MC3505000025

Tt Project No. 200-26912-17001

Addendum No. 1
to
Drawings and Project Manual

October 30, 2017

To: ALL BIDDERS

This ADDENDUM forms a part of the BIDDING AND CONTRACT DOCUMENTS and modifies the following documents:

Original DRAWINGS dated October 25, 2017,
PROJECT MANUAL dated October 25, 2017 and

Acknowledge receipt of the ADDENDUM in the space provided on the FORM OF PROPOSAL

This ADDENDUM consists of two (2) pages and the following:

1.0 CHANGES TO PROJECT MANUAL

A. Spec Section 00 22 13; Supplementary Instructions to Bidders:

1. Article 1.05; Contract Time:

a. Paragraph B; **DELETE** in its entirety.

B. Spec Section 00 41 13; Bid Form

1. **REPLACE** Bid Form in its entirety, with the "Revised Bid Form" attached.

C. Spec Section 00 82 13; Additional General Requirements:

1. Article 1.03:

a. Paragraph A; Subparagraph 3; **CHANGE** "All" to read "25% of the."

D. Spec Section 01 21 00; Allowances

1. Article 3.3; Schedule of Allowances:
 - a. **CHANGE** Contingency Allowance from “\$10,000.00” to read “\$25,000.00.”
- E. Spec Section 01 74 19; Construction Waste Management and Disposal:
 1. Article 3.1; Construction Waste Management, General:
 - a. **ADD** the following subparagraph “G. Use the Facilities Re-cycle Containers.”

2.0 CHANGES TO DRAWINGS

A. Sheet FA001; Electrical General

1. Note #8:
 - a. **CHANGE** “\$10,000.00” to read as “\$25,000.00.”
 - b. **ADD** “Unsecured” after “all.”

B. Sheet FA101:

1. **RETAIN** existing floor mounted Battery Box in the lobby for re-use with the new system.

C. Sheet FA102:

1. Electrical Demolition Note #1; **ADD** “Patch all holes” after “Demolition of Devices.”

D. Sheet FA103:

1. **RETAIN** existing floor mounted Battery Box in the lobby for re-use with the new system.

E. Sheet FA104:

1. **ADD** New Work Note #3 “Install all Duct Detectors on the side of the Ductwork.”

END OF ADDENDUM 01

Attachments:

Pre-bid Meeting Report

Pre-bid sign in sheet

Bid register

Pre-Bid Meeting Record

Meeting Date: Wednesday, October 25, 2017 @ 10:00 a.m.

Publication Date: October 30, 2017

Prepared By: Clint Lasana

Tt Project No.: 200-26912-17001

Regarding: Fire Alarm System Replacement
At the Public Health Laboratory
Delaware Health & Social Services
Smyrna, DE.
OMB/DFM/DHSS Contract No: MC3505000025

Attendees

Patrick McKenna	OMB/DFM/DHSS Project Manager	302-739-5644	patrick.mckenna@state.de.us
John Bell	DHCI Maintenance Supervisor	302-223-1582	johns.bell@state.de.us
Debra Rutledge	DHSS Public Health Lab	302-223-1520	debra.rutledge@state.de.us
Christina Pleasanton	DHSS Public Health Lab	302-223-1520	christina.pleasanton@state.de.us
Issac Henry	DHCI Maintenance Forman		isaac.henry@state.de.us
Pete Grable	DHCI Maintenance	302-223-1496	pete.grable@state.de.us
Jim Wescott	Wescott Electric, Inc.	610-358-1100	jp.wescott@wescottelectric.com
Chuck Arnott	Diamond Electric, Inc.	302-697-3296	chuck@diamondelec.org
Matt Bailey	Power Plus Electric Contracting, Inc.	302-736-5070	mattb337@gmail.com
Neil Newhall	Security Instrument, Inc.	302-633-5621	nnewhall@securityinstrument.com
Robert Hansley	Tetra Tech, Inc.	302-738-7551	robert.hansley@tetrattech.com
Clint Lasana	Tetra Tech, Inc.	302-738-7551	clint.lasana@tetrattech.com

Additional Distribution

Scott D. Parlow PE	Tetra Tech, Inc.	302-738-7551	scott.parlow@tetratedch.com
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Item Number

Item

1. A Mandatory Pre-Bid Meeting for the above referenced project was held in the Public Health Laboratory, in Smyrna, Delaware on Wednesday, October 25, 2017 at 9:30 am. Those in attendance are noted above.
2. Sealed bids for this project will be received by the State of Delaware, Office of Management & Budget, Division of Facilities Management, in the reception area of DFM at the Thomas Collins Building, 540 South DuPont Highway, Dover, Delaware, until 2:00 p.m. local time on Thursday, November 9, 2017, at which time they will be publically opened, read aloud, and recorded. Bidders bear the risk of late delivery. Any bids received after the stated time will be returned unopened.
3. This is a mandatory Pre-Bid Meeting and Prime Bidders are limited to those in attendance.
4. An Additional Site Walk Through has been scheduled for Tuesday, October 31, 2017 at 9:00 am at the Public Health Lab.

5. For further bidding information relating to the bid and signature forms, the Contractors are directed to contact Patrick McKenna, OMB/DFM/DHSS Project Manager at patrick.mckenna@state.de.us.
6. The Wage Rates for this project shall be as determined by the Delaware Department of Labor and Division of Industrial Affairs for Kent County. A certified copy has been included in the Project Manual. However, Contractors are responsible to contact the Delaware Department of Labor to receive verification of the most current Wage Rate Scale.
7. A general review of the Project Manual was performed. The following specification sections were reviewed.

<u>Section</u>	<u>Article</u>	<u>Title</u>
00 11 13	--	Advertisement for Bids
00 21 13	1.1	Definitions
	1.10	Addenda
	2.0	Bidder's Representation
	2.1	Pre-Bid Meeting
	3.0	Bidding Documents
	3.1	Copies of Bid Documents
	3.2	Interpretation or Correction of Bidding Documents
	3.3	Substitutions
	3.4	Addenda
	4.0	Bidding Procedures
	4.1	Preparation of Bids
	4.2	Bid Security
	4.3	Subcontractor List
	4.5	Prevailing Wage Requirements
	4.6	Submission of Bids
	7.0	Performance Bond & Payment Bond
	7.1	Bond Requirements
00 22 13a	1.2	Qualification of Bidders
	1.4	Bid Form
	1.5	Contract Time
	1.6	Representation of Bidders
	1.7	Interpretations
	1.8	Substitutions
	1.9	Wage Rates
	1.10	Start of Work
00 30 00	--	Bid Form
00 41 13	--	Bid Bond Form
00 52 13	AIA 101-2007	Standard Form of Agreement Between Owner & Contractor
00 61 13.13	--	Performance Bond Form
00 61 13.16	--	Payment Bond Form
00 62 76	AIA G-702	Application & Certification for Payment
	AIA G-703	Continuation Sheet
	AIA G-701	Change Order Form
	AIA G-704	Certificate of Substantial Completion
	AIA G-706	Contractor's Affidavit of Payment of Debt and Claims

	AIA G-706A	Contractor's Affidavit of Release of Liens
	AIA G-707	Consent of Surety to Final Payment
00 72 13	AIA 201-2007	General Conditions for the Contract for Construction
00 73 13	1.0	Supplementary General Conditions A201-2007- General Provisions
	1.1	Basic Definitions
	1.2	Correlation and Intent of the Contract Documents
	3.5	Warranty
	3.11	Documents and Samples at the Site
	9.2	Schedule of Values
	9.3	Applications for Payment
00 73 14	1.0	Additional Supplementary General Conditions – General
	1.7	Time
00 73 46	--	State of Delaware Wage Rate Schedule
00 81 13	1.0	General Requirements – General
	3.0	Contractor
	5.1	Subcontracting Requirements
	7.0	Changes in the Work
00 81 14	0.0	Employee Drug Testing Report Form
00 82 13	1.1	Additional General Contracting Requirements-General
	1.3	Work Included
	1.4	Work Not Included
	1.7	Drawings and Specification
	1.8	Continuity of Services
	1.10	Responsibility of Damage and Care of State Property
	1.16	Guarantee
	1.17	As-Built Drawings
01 31 20	1.0	Payroll Reports-General
	1.4	Payroll Reports
01 33 00	1.1	Submittal Procedures – General
	1.4	Submittal Schedule
	2.2	Electronic Submittal Procedures
	2.3	Non-Electronic Submittal Procedures
01 74 19	1.0	Construction Waste Management - General
	1.3	Submittals
	1.5	Waste Management Plan
01 77 00	1.0	Closeout Procedures-General
	1.6	Substantial Completion
	1.7	Final Completion
	3.3	Summary of Closeout Documents

8. Only plan holders who purchased bid document sets from Tetra Tech will receive ADDENDA.

9. The following items were discussed in greater detail.

- A. Contractors may copy the Bid Form; submit in triplicate (three (3) copies).
- B. Only one (1) copy of the Drug Testing Affidavit from each Contractor or Subcontractor is required.
- C. Contractors shall identify the time of construction in their Bid Form. It is the intent of the project to be completed within six (6) months.
- D. All discrepancies, questions or requests for clarifications or interpretations must be submitted

to the Engineers office at least seven (7) days prior to bid due date (Thursday, November 2, 2017 by COB).

- E. Requests for Substitutions must be submitted to the Engineer's Office at least ten (10) days prior to the bid due date (Tuesday, October 31, 2017 COB)
 - F. Contractor must list themselves as the Subcontractor for all work which they propose to accomplish.
 - G. It was noted that for this Public Works Contracts, the Prime Contractor must perform at least 10% of the total bid price with their own forces, exclusive of administrative costs, purchasing of equipment, overhead or profit.
 - H. A Bid Security, in the amount of ten percent (10%) of the total amount of the Base Bid plus all additive alternates is required. As of now, there are no Alternates.
 - I. Facility restrooms are available and must be kept clean.
 - J. Normal working hours are between 7:00 a.m. to 3:00 p.m., Monday thru Friday. Additional hours must be arranged in advance. Contractors must Sign-in and Sign-Out daily. ID Badges will be issued Daily. Contractors will require Facility Escorts.
 - K. Gang boxes will be allowed to be stored in designated areas at the job site.
 - L. Proper construction clothing is required. Short pants, open-toed shoes, and/or bare chests are not permitted.
 - M. No dumping will be allowed on the project site. Trash, debris and waste must be removed from the compound daily and from the site as required or directed. Dumpster location to be coordinated at the Pre-Construction Meeting. The Owner re-cycling containers may be used. Clean-up shall occur daily as the building will be occupied during the work and/or for the Day Shift to start.
 - N. The successful Contractor must submit certified weekly payroll receipts directly to the Delaware Department of Labor as required.
 - O. The State of Delaware Front End Specifications requires a two (2) year Warranty and Guarantee Period after acceptance by the Owner.
 - P. Under the State of Delaware Front End Specifications, the Performance and Labor & Material Payment Bonds shall be maintained in full force (warranty bond) for a period of two (2) years after the date of the Certificate for Final Payment.
 - Q. Contractors are responsible for all permits.
10. The Project Manual was reviewed in further detail. The following items were discussed:
- A. No Addenda will be issued later than four (4) days prior to the date for receipt of Bids except an Addendum withdrawing the request for Bids or one which extends the time or changes the location for the opening of bids.
 - B. Each Bidder shall ascertain prior to submitting their Bid that they have received all Addenda issued, and shall acknowledge their receipt in the Bid in the appropriate space.
 - C. The Schedule of Values shall include a line item for the submission of the Project Closeout Documents. The value of this item shall be no less than 1% of the initial contract amount.
 - D. All utility shutdowns must be coordinated with DHSS/DHCI Maintenance.
 - E. Contract time was discussed. Project must be completed within six (6) months.
11. The drawings were generally reviewed to present the intent of the Contract Documents. The following items were discussed in greater detail:
- A. All sheets were reviewed and briefly discussed.

12. A Site Review of the work area was performed.

A. An additional site visit has been scheduled for Tuesday, October 31, 2017 at 9:00 am.

13. Job Site Requirements

A. Contractors are required to Sign-in and Sign-out daily.

B. Contractors must wear the ID Badge provided daily.

C. Contractors are required to sign waivers prior to entering any of the Hazardous substances Laboratories.

D. Contractors must take a short Safety Briefing and follow all procedures while working in the building.

E. As discussed, per the Owner, Contractors should allow 75% of the work to be performed during Normal working hours and 25% of the work to be performed After Hours, included in their Bids.

End of Pre-Bid Meeting Report

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TETRA TECH

240 Continental Drive, Suite 200, Newark, Delaware 19713

PREBID MEETING SIGN-IN SHEET

DELAWARE HEALTH & SOCIAL SERVICES
PUBLIC HEALTH LAB - FIRE ALARM SYSTEM REPLACEMENT

PROJECT NO.: 200-26912-17001
DATE: 10/25/17

Name	Company	Physical Address	Telephone	Fax	e-mail
1 Jim Wescott	WESCOTT ELECTRIC	1600 LEBLANC RD ASTORIA PA 19014	610-358 1100	610 358 1104	Jim.Wescott@WescottElectric.com
2 Chuck Huesty	Diamond Elec.	3566 PEARCEERS RUN	302-697-3290	-	chuck@diamondelec.com
3 Matt Belos	Power Plus Electrical Co	4988 N. Poplar Hwy. Dover	302 736-5070	302 736-5120	Mat4337@gmail.com
4 Neil Newhall	SECURITY INST.	309 W. NEWPORT AVE	302-633-5621	302-998-2718	NEWHALL & SECURITY INSTRUMENT
5 Patrick McKern	State of Del	540 S DuPont Hwy Dover	302-900-1001		Patrick.C.McKern@state.del.us
6 Debra Rutledge	LAB	---	203-1520		debra.rutledge@state.de.us
7 Isaac Henry	DMS	100 Sunny Side Rd	223-1586		Isaac.Henry@state.de.us
8 John Bell	DMS	11 " "	11		John.S.Bell@state.de.us
9 Christina Pearson	lab	---	223 150		Christina.Pearson@state.de.us
10 Pete Grubel	DMS	240 Continental Dr. DE	302-283-2225		Pete.Grubel@state.de.us
11 Robert Hensley	TE	TE	302-283-2225		Robert.Hensley@tetratech.com
12 Cliff Laserna	Tetra tech	240 Continental Drive Newark DE	(602) 363-2578		Cliff.Laserna@tetratech.com
13					

Public Health Laboratory - Fire Alarm System Replacement
Delaware Health & Social Services

26912-17001

Bids Due: **2:00 p.m., November 9, 2017 at**
Office of Management & Budget/Div. of Facilities Management
Thomas Collins Building
540 South Dupont Hwy.
Dover, DE 19901

REGISTER OF BID DOCUMENTS
PLEASE PRINT CLEARLY

\$ 100.00 per set

#01	Name of Company: <u>Tetra Tech</u> Physical Address: _____ City, State: _____ Contact: <u>Scott Parlow</u> GC: YES <input type="checkbox"/> NO <input type="checkbox"/> Phone: _____ Fax: _____ Date: _____ E-Mail: _____
#02	Name of Company: <u>OMB/OFM</u> Physical Address: _____ City, State: _____ Contact: _____ GC: YES <input type="checkbox"/> NO <input type="checkbox"/> Phone: _____ Fax: _____ Date: _____ E-Mail: _____
#03	Name of Company: <u>DHSS</u> Physical Address: _____ City, State: _____ Contact: _____ GC: YES <input type="checkbox"/> NO <input type="checkbox"/> Phone: _____ Fax: _____ Date: _____ E-Mail: _____

Bids Due: 2:00 p.m., November 9, 2017 at
Office of Management & Budget/Div. of Facilities Management
Thomas Collins Building
540 South Dupont Hwy.
Dover, DE 19901

REGISTER OF BID DOCUMENTS
PLEASE PRINT CLEARLY

\$ 100.00 per set

#04	<p>Name of Company: <u>Wescott Electric</u></p> <p>Physical Address: <u>P.O. Box 278</u> City, State: <u>Glen Riddle, Pa 19037</u></p> <p>Contact: <u>J. Giuliani</u> GC: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: <u>610-358-1100 ext. 34</u></p> <p>Fax: _____ Date: <u>10/18/17</u></p> <p>E-Mail: <u>j.giuliani@wescottelectric.com</u></p>
#05	<p>Name of Company: <u>SECURITY INSTRUMENT</u></p> <p>Physical Address: <u>309 West Newpork</u> City, State: _____</p> <p>Contact: <u>NEIL NEWHALL</u> GC: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: <u>302-633-5621</u></p> <p>Fax: <u>302-998-2718</u> Date: <u>10/25/17</u></p> <p>E-Mail: <u>NNEWHALL@SECURITYINSTRUMENT.COM</u></p>
#06	<p>Name of Company: <u>DIAMOND ELECTRIC INC.</u></p> <p>Physical Address: <u>3566 PEACH TREE RUN</u> City, State: <u>DOVER DE 19901</u></p> <p><u>PICKED UP BY: STEVE HILL</u></p> <p>Contact: <u>CHUCK ARNOTT</u> GC: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: <u>302-697-3296</u></p> <p>Fax: <u>302-697-1328</u> Date: <u>10/26/17</u></p> <p>E-Mail: <u>CHUCK@DIAMONDELECTRIC.ORG</u></p>

Public Health Laboratory - Fire Alarm System Replacement
Delaware Health & Social Services

26912-17001

Bids Due: 2:00 p.m., November 9, 2017 at
Office of Management & Budget/Div. of Facilities Management
Thomas Collins Building
540 South Dupont Hwy.
Dover, DE 19901

REGISTER OF BID DOCUMENTS
PLEASE PRINT CLEARLY

\$ 100.00 per set

#07	<p>Name of Company: <u>Power Plus Electrical Contracting, Inc.</u></p> <p>Physical Address: <u>4985 N. Dupont Highway</u></p> <p>City, State: <u>Dover, DE 19901</u></p> <p>Contact: <u>Matt Bailes</u> GC: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: <u>302 736-5070</u></p> <p>Fax: <u>302 736-5120</u> Date: <u>10-26-17</u></p> <p>E-Mail: <u>Mattb337@gmail.com</u></p>
#08	<p>Name of Company: _____</p> <p>Physical Address: _____</p> <p>City, State: _____</p> <p>Contact: _____ GC: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: _____</p> <p>Fax: _____ Date: _____</p> <p>E-Mail: _____</p>
#09	<p>Name of Company: _____</p> <p>Physical Address: _____</p> <p>City, State: _____</p> <p>Contact: _____ GC: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Phone: _____</p> <p>Fax: _____ Date: _____</p> <p>E-Mail: _____</p>

STATE OF DELAWARE
OFFICE OF MANAGEMENT & BUDGET/ DIVISION OF FACILITIES MANAGEMENT
OMB/DFM CONTRACT NO.: MC3505000025
FIRE ALARM SYSTEM REPLACEMENT
AT THE
DELAWARE PUBLIC HEALTH LABORATORY
DELAWARE HEALTH AND SOCIAL SERVICES
SMYRNA, DE

BID FORM

For Bids Due: _____ (DATE) _____

To: State of Delaware
Office of Management and Budget
Division of Facilities Management
Thomas Collins Building, 3rd Floor, Suite 1
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.): _____

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:

\$ _____ (\$ _____)

ALLOWANCE CERTIFICATION

Allowance # 1 Certification

We/I confirm that an allowance in the amount of \$ 25,000.00 has been include in the Contractor's Base Bid price for contingency items.

\$ _____ (Date and Initial)

STATE OF DELAWARE
OFFICE OF MANAGEMENT & BUDGET/ DIVISION OF FACILITIES MANAGEMENT
OMB/DFM CONTRACT NO.: MC3505000025
FIRE ALARM SYSTEM REPLACEMENT
AT THE
DELAWARE PUBLIC HEALTH LABORATORY
DELAWARE HEALTH AND SOCIAL SERVICES
SMYRNA, DE

BID FORM

I/We acknowledge Addendums numbered _____ and the price(s) submitted include any cost/schedule impact they may have.

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.

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 _____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.

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
Affidavit(s) of Employee Drug Testing Program
Bid Security
(Others as Required by Project Manuals)

STATE OF DELAWARE
OFFICE OF MANAGEMENT & BUDGET/ DIVISION OF FACILITIES MANAGEMENT
OMB/DFM CONTRACT NO.: MC3505000025
FIRE ALARM SYSTEM REPLACEMENT
AT THE
DELAWARE PUBLIC HEALTH LABORATORY
DELAWARE HEALTH AND SOCIAL SERVICES
SMYRNA, DE

BID FORM

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.** This form must be filled out completely with no additions or deletions. **Note that all subcontractors listed below must have a signed Affidavit of Employee Drug Testing Program included with this bid.**

<u>Subcontractor Category</u>	<u>Subcontractor</u>	<u>Address (City & State)</u>	<u>Subcontractors tax payer ID # or Delaware Business license #</u>
1. Fire Alarm Vendor	_____	_____	_____
2. Electrical	_____	_____	_____

STATE OF DELAWARE
OFFICE OF MANAGEMENT & BUDGET/ DIVISION OF FACILITIES MANAGEMENT
OMB/DFM CONTRACT NO.: MC3505000025
FIRE ALARM SYSTEM REPLACEMENT
AT THE
DELAWARE PUBLIC HEALTH LABORATORY
DELAWARE HEALTH AND SOCIAL SERVICES
SMYRNA, DE

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 OMB/DFM Project No.: MC3505000025 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 _____ 2017.

My Commission expires _____. NOTARY PUBLIC _____.

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

STATE OF DELAWARE
OFFICE OF MANAGEMENT & BUDGET/ DIVISION OF FACILITIES MANAGEMENT
OMB/DFM CONTRACT NO.: MC3505000025
FIRE ALARM SYSTEM REPLACEMENT
AT THE
DELAWARE PUBLIC HEALTH LABORATORY
DELAWARE HEALTH AND SOCIAL SERVICES
SMYRNA, DE

AFFIDAVIT
OF
EMPLOYEE DRUG TESTING PROGRAM

4104 Regulations 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.

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 _____.

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

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