

**ADDENDUM NO. 2**

**STOCKLEY CENTER CAMPUS – WILLIAMS COTTAGES ELECTRIC RELOCATION**

**OMB/DFM PROJECT #: MC3511000030**

**DATE OF ISSUE: SEPTEMBER 1, 2017**

**FE&ES Comm. No.: 16-1278**

- 1.0 This addendum, Addendum No. 2, shall be made part of the Project Manual and Drawings dated August 14, 2017 for the Williams Cottages Electric Relocation at the Stockley Center.
- 2.0 Sealed bids for OMB/DFM Contract No. MC3511000030 – Stockley Center Campus – Williams Cottages Electric Relocation, 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 **1:30 p.m. local time on Tuesday, September 12, 2017**, 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.
- 3.0 Bid opening time has moved to 1:30 p.m., the date remains unchanged.
- 4.0 Changes to Specifications
  - 4.1 Specification Section 00 41 13 Bid Form
    1. **DELETE** current Bid Form. **REPLACE** with new bid form that identifies the revised time bids are due.
- 5.0 Changes to Drawings
  - 5.1 There are no Changes to Drawings
- 6.0 Questions/Clarifications
  - 6.1 There are no Questions/Clarifications.

**ORIGINAL ON FILE**

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Edward Fayda, P.E.

EF/ef  
16-1278 Addendum #2

Attachments: Bid Form

cc: All Registered Plan Holders  
P-File

DHSS STOCKLEY CENTER CAMPUS  
AUGUST 2017

WILLIAMS COTTAGES DEMOLITION-ELECTRIC RELOCATION  
DFM PROJECT #: MC3511000030

**BID FORM**

**For Bids Due:** 1:30 p.m., Tuesday, September 12, 2017

**To:** Ms. Terri McCall  
OMB/Division of Facilities Management  
Thomas Collins Building  
540 S. DuPont Highway, Suite 1- 3<sup>rd</sup> Floor  
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:

**BASE BID:** Provide all work identified on the contract documents.

Amount: \_\_\_\_\_ (\$ \_\_\_\_\_ )

**ALTERNATES**

Alternate prices conform to applicable project specification section. Refer to Specification Section 01 23 00 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 No. 1: Deduct costs for primary extension from pole C8 to existing PMH-9 S&C Switch.

DEDUCT: \_\_\_\_\_ (\$ \_\_\_\_\_ )

Alternate No. 2: Deduct costs for replacement of existing S&C PMH-9 Switch.

DEDUCT: \_\_\_\_\_ (\$ \_\_\_\_\_ )

**ALLOWANCE ACKNOWLEDGEMENT**

ALLOWANCE #1: We have included an allowance amount equal to \$10,000.00 for miscellaneous costs not identified on the bid documents. I/We have reviewed and familiarized ourselves with the requirements contained in Specification Section 01 21 00 Allowances.

Acknowledged by: \_\_\_\_\_

**UNIT PRICES:**

There are no Unit Prices.

WILLIAMS COTTAGES DEMOLITION-ELECTRIC RELOCATION  
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**BID FORM**

I/We acknowledge Addenda numbered \_\_\_\_\_ and the price(s) submitted includes 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  
Bidders Qualifications (Others as Required by Project Manuals)

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**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 *Division of Facilities Management*, 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 &amp; State)</u> | <u>Subcontractors tax payer ID #<br/>or Delaware Business license #</u> |
|-------------------------------|----------------------|-----------------------------------|---|
| 1. <u>Electrical</u>          | _____                | _____                             | _____   |
| 2. <u>Concrete Paving</u>     | _____                | _____                             | _____   |
| 3. <u>Asphalt Paving</u>      | _____                | _____                             | _____   |
| 4. <u>Excavation</u>          | _____                | _____                             | _____   |

**END OF SUBCONTRACTOR LISTING**

WILLIAMS COTTAGES DEMOLITION-ELECTRIC RELOCATION  
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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 **OMB/DFM PROJECT: MC3511000030** have been thoroughly examined and are understood.

**NAME OF BIDDER:**

\_\_\_\_\_

**AUTHORIZED REPRESENTATIVE  
(TYPED):**

\_\_\_\_\_

**AUTHORIZED REPRESENTATIVE  
(SIGNATURE):**

\_\_\_\_\_

**TITLE:**

\_\_\_\_\_

**ADDRESS OF BIDDER:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMAIL:**

\_\_\_\_\_

**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.**

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WILLIAMS COTTAGES DEMOLITION-ELECTRIC RELOCATION  
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**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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