

**Addendum
No. 2**

Date: July 5, 2018
Project: MC 3512000012
Hudson State Service Center – Elevator Renovation

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.

Questions and Answers

1. **Question:** Is one copy of the Bid Form acceptable to submit on bid day?
Answer: *Three copies of the bid shall be submitted. Each copy shall include all required forms and attachments.*
2. **Question:** Considering the nature of the work that has to be done in the pit (Concrete cutting, breaking, removal, dirt excavation, concrete replacement) and the sensitive location of the lower floor for access to the pit, will you require any or all of the following: special containment, negative air, temp protection, maintenance of pedestrian traffic, additional safety, off hours operations, etc? Will you create a doc stating exactly what the requirements will be so we can price accordingly?
Answer: *Refer to SK-A.1 (attached).*
3. **Question:** Section 104400 Signage, specify the signage dimensions.
Answer: *Elevator landing signs shall be approximately 8" wide by 12" high, with pictographic, text and braille messaging.*
4. **Question:** Sheet A4.1 Elevator General Requirements, Item 10.c specifies to provide fire extinguisher in machine rooms. The machine rooms are not indicated on the drawings. Please provide clarification.
Answer: *Provide fire extinguisher at new closet adjacent to elevator at lower level. See elevation 4/A4.1.*

Clarifications

1. Provide sprinkler coverage at new Controls Closet.

Changes to Specifications

1. Section 00 41 13 – BID FORM
Revised Bid Form to include Alternate 3.
Revised Subcontractor List.
2. Section 01 23 00 – ALTERNATES
Revised spec section 01 23 00 to include Alternate 3.

Changes to Drawings**1. SK-A.1 – ALTERNATE 3 AND WORK AREA PROTECTION PLAN**

Add SK-A.1 to the Contract Document.

Sketch includes scope and notes for Bid Alternate 3.

Sketch includes scope and notes for temporary partitions, protection of finishes and adjacent work, building use and occupancy during construction, after hours work requirements.

End

**Elevator Renovation
Floyd I. Hudson State Service Center
MC3512000012**

BID FORM

For Bids Due: _____ (DATE)

To: State of Delaware
Office of Management & Budget
Division of Health and Social Services

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:

\$ _____
(\$ _____)

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.

ADD ALTERNATE #1 – CAB ENCLOSURE - REPLACEMENT. Refer to Specification Section 01 23 00 – Alternates.

\$ _____
(\$ _____)

ADD ALTERNATE #2 – CAB ENCLOSURE – UPGRADE ONLY. Refer to Specification Section 01 23 00 – Alternates.

\$ _____
(\$ _____)

ADD ALTERNATE #3 – SALVAGE CASEWORK. Refer to Specification Section 01 23 00 – Alternates.

\$ _____
(\$ _____)

UNIT PRICES

Not Applicable

ALLOWANCES

The following allowance is set aside for unpredicted scope on the project, to be verified and billed as the project conditions dictate:

ALLOWANCE #1 \$10,000

**Elevator Renovation
Floyd I. Hudson State Service Center
MC3512000012****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)

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. CARPENTRY	_____	_____	_____
2. ELECTRICAL	_____	_____	_____
3. ELEVATOR	_____	_____	_____

**Elevator Renovation
Floyd I. Hudson State Service Center
MC3512000012**

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 (*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.

Elevator Renovation

**Floyd I. Hudson State Service Center
MC3512000012****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.

SECTION 01 23 00**ALTERNATES****PART 1 GENERAL****1.01 SECTION INCLUDES**

- A. Description of Alternates.

1.02 RELATED REQUIREMENTS

- A. Document 00 21 13 - Instructions to Bidders: Instructions for preparation of pricing for Alternates.

1.03 ACCEPTANCE OF ALTERNATES

- A. Alternates quoted on Bid Forms will be reviewed and accepted or rejected at Owner's option. Accepted Alternates will be identified in the Owner-Contractor Agreement.
- B. Coordinate related work and modify surrounding work to integrate the Work of each Alternate.

1.04 SCHEDULE OF ALTERNATES

- A. Alternate No. 1 - Cab Enclosure - Replacement
1. Remove complete cab enclosure assembly. Remove cab door and frame and hall door and frame. Remove cab door sills.
 2. Provide complete cab enclosure assembly to coordinate with existing car sling and platform length and width. Provide new cab door, frame, hardware and controls. Provide new hall door, frame and hardware. Install new ceiling, finishes, handrails and lighting.
- B. Alternate No. 2 - Cab Enclosure - Upgrade Only:
1. Remove sheet vinyl flooring and base. Remove light fixtures.
 2. Clean, prepare and paint car walls and ceiling. Install new car lights, install new egg crate suspended ceiling. Install new hanking wall panels with coordinated handrails. Clean and prepare sub-floor and install new flooring. Clean all stainless steel components.
- C. Alternate No. 3 - Salvage Casework:
1. Carefully remove existing casework sections and wood trims. Clean casework and reinstall as indicated in drawings 2/SK-A1. Provide new wood trims between casework units, at top edge of casework and at each side. Scribe trim pieces to wall. Provide new wing wall at left side of unit. Wing wall shall be 3-5/8" steel studs at 16" O.C. with 5/8" GWB each side, primed with two coats paint. Extend wing wall to ceiling grid. Ceiling grid and tile shall remain in place over top of casework.

PART 2 PRODUCTS - NOT USED**PART 3 EXECUTION - NOT USED****END OF SECTION**