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JAMES T. VAUGHN CORRECTIONAL CENTER
HIGH VOLTAGE LOOP REPAIRS
OMB/DFM CONTRACT # MC3804000029
ADDENDUM #2

ITEMS DISCUSSED:

A. Clarifications

1. The contractor shall account for the testing of 76 sets (3 in each set) of lightning arresters in their base bid. Testing of these arresters shall be in accordance with the maintenance procedure identified on page 42 of Appendix "A" in the specifications. The actual locations of these arresters are currently unknown and are not numbered or referenced on the single lines. The successful contractor will include all locations where these tests were performed on the as-built drawings.
2. The Maintenance procedure of testing a set of (3) lightning arresters will also be added as a unit price (add or deduct) on the revised bid form which is attached to this addendum.

Summarized By: DEDC, LLC
David Barton
Date: June 14, 2013

UNIT PRICES

Unit prices conform to applicable project specification section. Refer to the specifications for a complete description of the following Unit Prices:

	<u>ADD</u>	<u>DEDUCT</u>
UNIT PRICE No. 1: Provide a unit cost for replacing a stress cone on 1/0 Cu.	\$ _____	\$ _____
UNIT PRICE No. 2: Provide a unit cost for replacing a stress cone on 4/0 Cu.	\$ _____	\$ _____
UNIT PRICE No. 3: Provide a unit cost for replacing a 15kV 200 A LB elbow on 4/0 Cu.	\$ _____	\$ _____
UNIT PRICE No. 4: Provide a unit cost for replacing a 15kV 200 A LB elbow on 1/0 Cu.	\$ _____	\$ _____
UNIT PRICE No. 5: Provide a unit cost for resetting breakers or relays and testing a LV power circuit breaker with electronic trip.	\$ _____	\$ _____
UNIT PRICE No. 6: Provide a unit cost to replace an auto-transfer PMH-9 unit with (6) power fuses.	\$ _____	\$ _____
UNIT PRICE No. 7: Provide a unit cost to replace an auto-transfer PMH-6 unit with (3) power fuses.	\$ _____	\$ _____
UNIT PRICE No. 8: Provide a unit cost to replace a manual PMH-13 unit.	\$ _____	\$ _____
UNIT PRICE No. 9: Provide a Maintenance racking tool.	\$ _____	\$ _____
UNIT PRICE No. 10: Provide a cost to test a set of (3) lightning arresters.	\$ _____	\$ _____

JAMES T. VAUGHN CORRECTIONAL CENTER HI VOLTAGE REPAIRS
SMYRNA DELAWARE
OMB/DFM# MC380400029

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This bid shall remain valid and cannot be withdrawn for sixty (60) days from the date of opening of bids, and the undersigned shall abide by the Bid Security forfeiture provisions.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 _____ 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
- Bid Security
- (Others as Required by Project Manuals)

JAMES T. VAUGHN CORRECTIONAL CENTER HI VOLTAGE REPAIRS
SMYRNA DELAWARE
OMB/DFM# MC3804000029

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.**

<u>Subcontractor Category</u>	<u>Subcontractor</u>	<u>Address (City & State)</u>	<u>Subcontractors tax payer ID # or Delaware Business license #</u>
1. ELECTRICAL	_____	_____	_____
2. ELECTRICAL TESTING AGENCY	_____	_____	_____

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# MC3804000029 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.