

**Renovation and OCR Compliance Project
DeIDOT Administration Building
Dover, Delaware
MC 5511000014**

UNIT PRICES

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

Unit Prices for Fire Alarm Devices: (Note all devices include installation and programming)

UNIT PRICE #1: Provide one (1) photoelectric smoke detector with base.	<u>ADD</u> \$ <u>350.00</u>
UNIT PRICE #2: Provide one (1) photoelectric smoke detector with base (under floor).	<u>ADD</u> \$ <u>350.00</u>
UNIT PRICE #3: Provide one (1) duct smoke detector with head and sampling tube.	<u>ADD</u> \$ <u>755.00</u>
UNIT PRICE #4: Provide one (1) wall-mounted, magnetic door holder.	<u>ADD</u> \$ <u>285.00</u>
UNIT PRICE #5: Provide one (1) heat detector with base.	<u>ADD</u> \$ <u>365.00</u>
UNIT PRICE #6: Provide one (1) manual pull station.	<u>ADD</u> \$ <u>255.00</u>
UNIT PRICE #7: Provide one (1) combination speaker / strobe with expander plate.	<u>ADD</u> \$ <u>350.00</u>
UNIT PRICE #8: Provide one (1) strobe.	<u>ADD</u> \$ <u>215.00</u>
UNIT PRICE #9: Provide one (1) linear foot of fire alarm MC cable.	<u>ADD</u> \$ <u>1.50</u>

ALLOWANCES

The following allowance is set aside for unpredicted scope on the project, to be verified and billed as the project conditions dictate. Allowance is to be included in Base Bid. Allowance shall be utilized at the Owner's discretion and shall be returned to the Owner if not used.

ALLOWANCE #1: \$10,000

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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This bid shall remain valid and cannot be withdrawn for thirty (30) days from the date of opening of bids and the undersigned shall abide by the Bid Security forfeiture provisions.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
- Copy of Business License
- (Others as Required by Project Manuals)

Dover, Delaware
December 8, 2016

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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 *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. DEMOLITION	_____	_____	_____
2. CONCRETE	_____	_____	_____
3. STRUCTURAL STEEL	_____	_____	_____
4. CARPENTRY	_____	_____	_____
5. PAINTING	_____	_____	_____
6. ELECTRICAL	_____	_____	_____
7. PLUMBING	_____	_____	_____
8. MECHANICAL	_____	_____	_____
9. FIRE ALARM	_____	_____	_____
10. INFORMATION TECH.	_____	_____	_____
11. FIRE PROTECTION	_____	_____	_____

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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 DeIDOT Administration Building OCR Compliance Project MC 5511000014 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.

**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.