

**Addendum  
No. 5**

Addendum Date: December 5, 2018

Project: DelDOT Administration Building –  
Phase II Renovation & OCR Compliance

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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.

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**General:**

1. The Bid Form has been revised. See attached revised document.

**Clarifications:**

1. Delete all references to Acrylic paint, Duroplex or Plexture by Dryvit in Bid Documents. Replace with paint as referenced in Specifications section 09 90 00-Painting and Coating. No drawings will be issued.

**Questions and Answers**

1. Addendum 3 question 3 answer states that work in the east wing lobby will be performed during off hours and weekends, Addendum 1 line item 11 stated all work is intended during normal business hours. Is this the Area on sheet A3.0? This is labeled as the South Lobby Commons. Please clarify. This will impact the project cost tremendously.

**Answer: No, the area is not on sheet A3.0. Work in East Wing Lobby (Atrium) – Drawings A2.4 & A3.2, will be performed during off hours & weekends. All other work is to be done during regular business hours.**

**Changes to Specifications:**

1. *Specification 09 96 00 – Delete Section “Textured Acrylic Coating for Interior Wall Finishes.*

END

# BID FORM

**To:** OMB/Division of Facilities Management  
540 S. DuPont Highway, Suite 1  
Dover, DE 19901  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Phone No.:** (        ) \_\_\_\_\_ - \_\_\_\_\_      **Fax No.:** (        ) \_\_\_\_\_ - \_\_\_\_\_

\$ \_\_\_\_\_  
(\$ \_\_\_\_\_)

Add \_\_\_\_\_  
(\$ \_\_\_\_\_)

**Phase II Renovation and OCR Compliance  
800 South Bay Road  
Dover, DE 19901  
Contract No. MC5511000018**

**BID FORM**

ALTERNATE No. 4: Ice Melt System

Add \_\_\_\_\_  
(\$ \_\_\_\_\_ )

**UNIT PRICES**

There are no Unit Prices.

**ALLOWANCES**

Allowances are included as follows:

ALLOWANCE No. 1: \$30,000 for general contingencies and repairs, to be used for unforeseen conditions only. The balance of the allowance is to be returned to the owner by credit change order at project conclusion.

ALLOWANCE No. 2: \$10,000 for perimeter heating investigation, troubleshooting, and correction. The balance of the allowance is to be returned to the owner by credit change order at project conclusion.

ALLOWANCE No. 3: \$120,000 for signage package which includes: (1) product and installation of all interior wall mounted room / ADA signs; (2) product and installation of all interior branded corporate / wayfinding signage and associated brackets / hardware; (3) removal of existing, select replacement if needed, and installation of the interior wall mounted "Excellence in Transportation" plus tagline pin letters in commons corridor; and (4) product and installation of exterior mounted dimensional characters/pin letters at the North and South entrances. (5) Vinyl wall wrap. The balance of the allowance is to be returned to the owner by credit change order at the project conclusion.

ALLOWANCE No. 4: \$15,000 for traffic control, material and labor.

**Phase II Renovation and OCR Compliance**  
**800 South Bay Road**  
**Dover, DE 19901**  
**Contract No. MC5511000018**

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

**Phase II Renovation and OCR Compliance  
800 South Bay Road  
Dover, DE 19901  
Contract No. MC5511000018**

**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.

<u>Subcontractor Category</u>	<u>Subcontractor</u> <u>Subcontractors tax payer ID #</u> <u>or Delaware Business license #</u>	<u>Address (City &amp; State)</u>
1. Carpentry	_____	_____
2. Concrete	_____	_____
3. Electrical	_____	_____
4. Fire Protection	_____	_____
5. Masonry	_____	_____
6. Mechanical	_____	_____
7. Plumbing	_____	_____
8. Signage	_____	_____
9. Structured Cabling	_____	_____

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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 MC5511000018 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.**

**Phase II Renovation and OCR Compliance  
800 South Bay Road  
Dover, DE 19901  
Contract No. MC5511000018**

**AFFIDAVIT  
OF  
EMPLOYEE DRUG TESTING PROGRAM**

4104 Regulations for the Drug Testing of Contractor Employees Working on Large Public Works Projects requires that Contractors 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 Name:** \_\_\_\_\_

**Contractor 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.**

**END OF SECTION**