

**ADDENDUM NO. 6
DHSS HERMAN HOLLOWAY PHASE 1 PRIMARY UPGRADES AND
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
1901 N. DUPONT HIGHWAY, NEW CASTLE DE 19720
OMB/DFM PROJECT: MJ350100007
DATE OF ISSUE: June 17, 2016**

- 1.0 This Addendum, Addendum No. 6, shall be made part of the Project Manual and Drawings dated May 23, 2016 for the DHSS Herman Holloway Phase 1 Primary Upgrades and Emergency Generator At Kent/Sussex Building; OMB/DFM Project: MJ350100007. **Bid Date and time remains unchanged and bids are due at 2:00 p.m. local time on Thursday, June 23, 2016** at the Thomas Collins Building, 540 S. DuPont Highway Suite 1-3rd Floor, Dover DE 19901
- 2.0 Any provision in any of the Contract Documents which may be in conflict or be inconsistent with the contents of this Addendum shall be void to the extent of such conflicts or inconsistency.
- 3.0 Changes to Specifications:
- 3.1 Section 00 41 13 Bid Form: Replace Bid Form issued with Addendum #5 with new Bid Form. This Bid Form eliminates the pre-filled # of Addenda issued and Construction Completion Date. Contractors to ensure this is filled in manually when preparing your bid.
- 4.0 Changes to Drawings:
- 4.1 There are no Changes to Drawings.
- 5.0 Questions/Clarifications:
- 5.1 There are no Questions/Clarifications.

End of Addendum #6

EF/ef
15-1177 Addendum #6

cc: All Registered Plan Holders

Attachments: Specification Section 00 41 13-Bid Form

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ350100007**

BID FORM

For Bids Due: 2:00 p.m. June 23, 2016 _____

To: Mr. Joseph D. Seely
OMB/Division of Facilities Management
Thomas Collins Building, Suite 1- 3rd Floor
540 South DuPont Highway
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 #1: Provide all work identified on Contract Documents.

Amount: _____ (\$ _____)

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.

Alternate No. 1: Lewis Building 12kV & 480VAC Services

DEDUCT: _____ (\$ _____)

Alternate No. 2: Biggs Building Data Center 12kV Services

DEDUCT: _____ (\$ _____)

Alternate No. 3: Biggs Building #2 12kV & 208VAC Services

DEDUCT: _____ (\$ _____)

Alternate No. 4: Springer Building 12kV & 208V Services

DEDUCT: _____ (\$ _____)

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ350100007**

Alternate No. 5: Carvel Building 12kV Services

DEDUCT: _____ (\$ _____)

Alternate No. 6: North West Loop 12kV & 208V Services

DEDUCT: _____ (\$ _____)

Alternate No. 7: Garden Café 12kv & 208V Services

DEDUCT: _____ (\$ _____)

Alternate No. 8: Powerhouse/Main Substation Switchgear Life Cycle Extension

DEDUCT: _____ (\$ _____)

ALLOWANCE ACKNOWLEDGEMENT

ALLOWANCE #1: We have included an allowance amount equal to \$50,000.00 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: _____

ALLOWANCE #2: We have included an allowance amount equal to \$10,000.00 for BAS System modifications in the Kent/Sussex Building by the resident Controls Contractor. I/We have reviewed and familiarized ourselves with the requirements contained in Specification Section 01 21 00 Allowances.

Acknowledged by: _____

ALLOWANCE #3: We have included an allowance amount equal to \$15,000.00 for Utility Company Costs associated with work under Alternate #8. 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.

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ350100007**

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)

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ350100007**

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. <u>Electrical</u>	_____	_____	_____
2. <u>Asphalt Paving</u>	_____	_____	_____
3. <u>Concrete Paving</u>	_____	_____	_____
4. <u>Excavation</u>	_____	_____	_____
5. <u>Stormwater Site Work</u>	_____	_____	_____

END OF SUBCONTRACTOR LISTING

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ3501000007**

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: MJ3501000007** 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.

**DELAWARE HEALTH & SOCIAL SERVICES
HERMAN HOLLOWAY SR. CAMPUS
PHASE 1 PRIMARY UPGRADES &
EMERGENCY GENERATOR AT KENT/SUSSEX BUILDING
OMB/DFM PROJECT NO.: MJ350100007**

**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.