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Addendum No. 1

JTVCC – S-1 Bldg. Shower Improvements
OMB/DFM/DOC
New Castle, Delaware
OMB/DFM Contract No.: MJ3804000090
Tt Project No. 200-26912-18004

Addendum No. 01
to
Drawings and Project Manual

March 27, 2020

To: ALL BIDDERS

This ADDENDUM forms a part of the BIDDING AND CONTRACT DOCUMENTS and modifies the following documents:

Original DRAWINGS dated March 25, 2020
PROJECT MANUAL dated March 25, 2020

Acknowledge receipt of the ADDENDUM in the space provided on the FORM OF PROPOSAL

This ADDENDUM consists of two (2) pages and the following:

1.1 **GENERAL ADMINISTRATIVE DISCUSSION**

- A. This is a mandatory Pre-Bid Meeting and prime bidders are limited to those in attendance. See attached sign in sheet for attendees.
- B. Attached is the Pre-Bid Sign-in Sheet. All attendees will receive Addendum number 1 (this document). Only plan holders will receive subsequent Addenda.
 - a. **The Tt Office is closed but we are operating remotely in response to COVID-19. For those who wish to purchase Bid Sets, please contact Pam Dennis at 302-635-4198 or pam.dennis@tetrattech.com to set up a time/place to purchase Bid Sets.**
- C. All questions and substitution requests must go to Pam Dennis of Tetra Tech (Tt): pam.dennis@tetrattech.com, via e-mail, and to Tt's administrative assistant team's e-mail address: ier.dedoc@tetrattech.com.
 - 1. Pam Dennis will be handling all Construction Management for this project.
- D. Critical Dates:
 - 1. **Bid Due Date: as advertised: Thursday, April 16, 2020 by 2:30pm.**
 - 2. Cut off for Substitutions: **April 5, 2020 (12pm /Noon)**
 - 3. **Cut off for Questions/Clarifications/or Interpretations: April 9, 2020**
 - 4. Last Addendum (for technical content): **April 10, 2020**

- E. Subcontractor List was discussed: all agreed to the list as shown.
- F. This Project is governed by State of Delaware Wage Rates.

1.2 **PROJECT MANUAL MODIFICATIONS**

- A. Section 00 01 10; Table of Content
 - 1. **ADD** Spec Section 01 29 00; Payment Procedures
- B. Section 00 41 13; Bid Form
 - 1. **REPLACE** Spec Section with **REVISED** Bid Form attached to this Addendum.
- C. Section 01 29 00; Payment Procedures
 - 1. **ADD** this Spec Section in its entirety. Attached to this addendum.

1.3 **DRAWING MODIFICATIONS: N/A**

1.4 **QUESTIONS/CLARIFICATIONS: N/A**

ATTACHMENTS

00 41 13; Bid Form (Revised)
01 29 00 Payment Procedures
Pre-Bid Meeting Record
Pre-Bid Sign-In Sheet
Bid Register

END OF ADDENDUM No. 1

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S1 BUILDING SHOWER IMPROVEMENTS
MJ3804000090

JAMES T. VAUGHN CORRECTIONAL CENTER
SMYRNA, DELAWARE

BID FORM

S1 BUILDING SHOWER IMPROVEMENTS
AT THE
JAMES T. VAUGHN CORRECTIONAL CENTER
1181 PADDOCK ROAD
SMYRNA, DE 19977
OMB/DFM PROJECT NO.: MJ3804000090

ALLOWANCES

Allowance Certification

We/I confirm that a Contingency Allowance in the amount of \$15,000.00 has been included in the Contractor's Base Bid price to be used at the Owners discretion.

\$ _____ (Date and Initial)

BID FORM

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SMYRNA, DE 19977
OMB/DFM PROJECT NO.: MJ3804000090

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: _____
(SEAL)

By: _____
(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)

BID FORM

S1 BUILDING SHOWER IMPROVEMENTS
AT THE
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OMB/DFM PROJECT NO.: MJ3804000090

SUBCONTRACTOR LIST

In accordance with Title 29, Chapter 69, Section 6962(d)(10)b of the Delaware Code, the following subcontractor listing must accompany any bid submittal. The bidder must list **in each category** the full name and address (City & State) of the sub-contractor that the bidder will be using to perform the work and provide material for that subcontractor category. Should the bidder's listed subcontractor intend to provide any of their subcontractor category of work through a third-tier contractor, the bidder shall list that third-tier contractor's full name and address (City & State). **If the bidder intends to perform any category of work itself, it must list its full name and address.** For clarification, if the bidder intends to perform the work themselves, the bidder **may not** insert "not applicable", "N/A", "self" or anything other than its own full name and address (City & State). To do so shall cause the bid to be rejected. In addition, the failure to produce a completed subcontractor list with the bid submittal shall cause the bid to be rejected. If you have more than three (3) third-tier contractors to report in any subcontractor category, print out additional page(s) containing the appropriate category, complete the rest of your list of third-tier contractors for that category, notate the addition in parentheses as (CONTINUATION) next to the subcontractor category and an asterisk (*) next to any additional third-tier contractors, and submit it with your bid.

<u>Subcontractor Category</u>	<u>Subcontractor</u>	<u>Address (City & State)</u>	<u>Subcontractors tax-payer ID # or Delaware Business license #</u>
1. Electrical	_____	_____	_____
A.	_____	_____	_____
B.	_____	_____	_____
C.	_____	_____	_____
2. Mechanical	_____	_____	_____
A.	_____	_____	_____
B.	_____	_____	_____
C.	_____	_____	_____

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BID FORM (Continued)

3.	Stainless Steel Installer	_____	_____	_____
	A.	_____	_____	_____
	B.	_____	_____	_____
	C.	_____	_____	_____
4.	Epoxy Floor	_____	_____	_____
	A.	_____	_____	_____
	B.	_____	_____	_____
	C.	_____	_____	_____
5.	Plumbing	_____	_____	_____
	A.	_____	_____	_____
	B.	_____	_____	_____
	C.	_____	_____	_____

BID FORM

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**AFFIDAVIT
OF
CONTRACTOR QUALIFICATIONS**

We hereby certify that we will abide by the contractor's qualifications outlined in the construction bid specifications for the duration of the contract term.

In accordance with Title 29, Chapter 69, Section 6962(d)(10)b.3 of the Delaware Code, after a contract has been awarded the successful bidder shall not substitute another subcontractor whose name was submitted on the Subcontractor Form except for the reasons in the statute and not without written consent from the awarding agency. Failure to utilize the subcontractors on the list will subject the successful bidder to penalties as outlined in the General Requirements Section 5.2 of the contract.

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.

BID FORM

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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 MC3804000058 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.

BID FORM

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**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, including subcontractors 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.

END OF BID FORM

SECTION 01 29 00 - PAYMENT PROCEDURES

PART 1 - GENERAL

1.1 RELATED DOCUMENTS

- A. Drawings and general provisions of the Contract, including General and Supplementary Conditions and other Division 01 Specification Sections, apply to this Section.

1.2 SUMMARY

- A. Section includes administrative and procedural requirements necessary to prepare and process Applications for Payment.
- B. Related Requirements:
 - 1. Section 01 21 00 "Allowances" for procedural requirements governing the handling and processing of allowances.
 - 2. Section 01 22 00 "Unit Prices" for administrative requirements governing the use of unit prices.
 - 3. Section 01 26 00 "Contract Modification Procedures" for administrative procedures for handling changes to the Contract.
 - 4. Section 01 32 00 "Construction Progress Documentation" for administrative requirements governing the preparation and submittal of the Contractor's construction schedule.

1.3 DEFINITIONS

- A. Schedule of Values: A statement furnished by Contractor allocating portions of the Contract Sum to various portions of the Work and used as the basis for reviewing Contractor's Applications for Payment.

1.4 SCHEDULE OF VALUES

- A. Coordination: Coordinate preparation of the schedule of values with preparation of Contractor's construction schedule.
 - 1. Coordinate line items in the schedule of values with other required administrative forms and schedules, including the following:
 - a. Application for Payment forms with continuation sheets.
 - b. Submittal schedule.
 - c. Items required to be indicated as separate activities in Contractor's construction schedule.

2. Submit the schedule of values to Architect through Construction Manager at earliest possible date, but no later than seven days before the date scheduled for submittal of initial Applications for Payment.
 3. Subschedules for Phased Work: Where the Work is separated into phases requiring separately phased payments, provide subschedules showing values coordinated with each phase of payment.
 4. Subschedules for Separate Elements of Work: Where the Contractor's construction schedule defines separate elements of the Work, provide subschedules showing values coordinated with each element.
 5. Subschedules for Separate Design Contracts: Where the Owner has retained design professionals under separate contracts who will each provide certification of payment requests, provide subschedules showing values coordinated with the scope of each design services contract as described in Section 011000 "Summary."
- B. Format and Content: Use Project Manual table of contents as a guide to establish line items for the schedule of values. Provide at least one line item for each Specification Section.
1. Identification: Include the following Project identification on the schedule of values:
 - a. Project name and location.
 - b. Name of Architect.
 - c. Architect's project number.
 - d. Contractor's name and address.
 - e. Date of submittal.
 2. Arrange schedule of values consistent with format of AIA Document G703.
 3. Arrange the schedule of values in tabular form with separate columns to indicate the following for each item listed:
 - a. Related Specification Section or Division.
 - b. Description of the Work.
 - c. Name of subcontractor.
 - d. Name of manufacturer or fabricator.
 - e. Name of supplier.
 - f. Change Orders (numbers) that affect value.
 - g. Dollar value of the following, as a percentage of the Contract Sum to nearest one-hundredth percent, adjusted to total 100 percent.
 - 1) Labor.
 - 2) Materials.
 - 3) Equipment.
 4. Provide a breakdown of the Contract Sum in enough detail to facilitate continued evaluation of Applications for Payment and progress reports. Coordinate with Project Manual table of contents. Provide multiple line items for principal subcontract amounts in excess of five percent of the Contract Sum.
 - a. Include separate line items under Contractor and principal subcontracts for Project closeout requirements in an amount totaling five percent of the Contract Sum and subcontract amount.

5. Round amounts to nearest whole dollar; total shall equal the Contract Sum.
6. Provide a separate line item in the schedule of values for each part of the Work where Applications for Payment may include materials or equipment purchased or fabricated and stored, but not yet installed.
 - a. Differentiate between items stored on-site and items stored off-site. If required, include evidence of insurance.
7. Provide separate line items in the schedule of values for initial cost of materials, for each subsequent stage of completion, and for total installed value of that part of the Work.
8. Allowances: Provide a separate line item in the schedule of values for each allowance. Show line-item value of unit-cost allowances, as a product of the unit cost, multiplied by measured quantity. Use information indicated in the Contract Documents to determine quantities.
9. Purchase Contracts: Provide a separate line item in the schedule of values for each purchase contract. Show line-item value of purchase contract. Indicate owner payments or deposits, if any, and balance to be paid by Contractor.
10. Each item in the schedule of values and Applications for Payment shall be complete. Include total cost and proportionate share of general overhead and profit for each item.
 - a. Temporary facilities and other major cost items that are not direct cost of actual work-in-place may be shown either as separate line items in the schedule of values or distributed as general overhead expense, at Contractor's option.
11. Schedule Updating: Update and resubmit the schedule of values before the next Applications for Payment when Change Orders or Construction Change Directives result in a change in the Contract Sum.

1.5 APPLICATIONS FOR PAYMENT

- A. Each Application for Payment following the initial Application for Payment shall be consistent with previous applications and payments as certified by Architect and Construction Manager and paid for by Owner.
 1. Initial Application for Payment, Application for Payment at time of Substantial Completion, and final Application for Payment involve additional requirements.
- B. Payment Application Times: The date for each progress payment is indicated in the Agreement between Owner and Contractor. The period of construction work covered by each Application for Payment is the period indicated in the Agreement.
- C. Payment Application Times: Submit Application for Payment to Architect by the of the month. The period covered by each Application for Payment is one month, ending on the last day of the month.
 1. Submit draft copy of Application for Payment seven days prior to due date for review by Architect.
- D. Application for Payment Forms: Use AIA Document G702 and AIA Document G703 as form for Applications for Payment.

- E. Application for Payment Forms: Use forms provided by Owner for Applications for Payment. Sample copies are included in Project Manual.
- F. Application for Payment Forms: Use forms acceptable to Architect Construction Manager and Owner for Applications for Payment. Submit forms for approval with initial submittal of schedule of values.
- G. Application Preparation: Complete every entry on form. Notarize and execute by a person authorized to sign legal documents on behalf of Contractor. Architect Construction Manager will return incomplete applications without action.
 - 1. Entries shall match data on the schedule of values and Contractor's construction schedule. Use updated schedules if revisions were made.
 - 2. Include amounts for work completed following previous Application for Payment, whether or not payment has been received. Include only amounts for work completed at time of Application for Payment.
 - 3. Include amounts of Change Orders and Construction Change Directives issued before last day of construction period covered by application.
 - 4. Indicate separate amounts for work being carried out under Owner-requested project acceleration.
- H. Stored Materials: Include in Application for Payment amounts applied for materials or equipment purchased or fabricated and stored, but not yet installed. Differentiate between items stored on-site and items stored off-site.
 - 1. Provide certificate of insurance, evidence of transfer of title to Owner, and consent of surety to payment, for stored materials.
 - 2. Provide supporting documentation that verifies amount requested, such as paid invoices. Match amount requested with amounts indicated on documentation; do not include overhead and profit on stored materials.
 - 3. Provide summary documentation for stored materials indicating the following:
 - a. Value of materials previously stored and remaining stored as of date of previous Applications for Payment.
 - b. Value of previously stored materials put in place after date of previous Application for Payment and on or before date of current Application for Payment.
 - c. Value of materials stored since date of previous Application for Payment and remaining stored as of date of current Application for Payment.
- I. Transmittal: Submit three signed and notarized original copies of each Application for Payment to Architect by a method ensuring receipt within 24 hours. One copy shall include waivers of lien and similar attachments if required.
 - 1. Transmit each copy with a transmittal form listing attachments and recording appropriate information about application.
- J. Waivers of Mechanic's Lien: With each Application for Payment, submit waivers of mechanic's lien from entities lawfully entitled to file a mechanic's lien arising out of the Contract and related to the Work covered by the payment.

1. Submit partial waivers on each item for amount requested in previous application, after deduction for retainage, on each item.
 2. When an application shows completion of an item, submit conditional final or full waivers.
 3. Owner reserves the right to designate which entities involved in the Work must submit waivers.
 4. Waiver Forms: Submit executed waivers of lien on forms acceptable to Owner.
- K. Waivers of Mechanic's Lien: With each Application for Payment, submit waivers of mechanic's liens from subcontractors, sub-subcontractors, and suppliers for construction period covered by the previous application.
1. Submit partial waivers on each item for amount requested in previous application, after deduction for retainage, on each item.
 2. When an application shows completion of an item, submit conditional final or full waivers.
 3. Owner reserves the right to designate which entities involved in the Work must submit waivers.
 4. Submit final Application for Payment with or preceded by conditional final waivers from every entity involved with performance of the Work covered by the application who is lawfully entitled to a lien.
 5. Waiver Forms: Submit executed waivers of lien on forms, acceptable to Owner.
- L. Initial Application for Payment: Administrative actions and submittals that must precede or coincide with submittal of first Application for Payment include the following:
1. List of subcontractors.
 2. Schedule of values.
 3. Sustainable design submittal for project materials cost data.
 4. Contractor's construction schedule (preliminary if not final).
 5. Combined Contractor's construction schedule (preliminary if not final) incorporating Work of multiple contracts, with indication of acceptance of schedule by each Contractor.
 6. Products list (preliminary if not final).
 7. Sustainable design action plans.
 8. Schedule of unit prices.
 9. Submittal schedule (preliminary if not final).
 10. List of Contractor's staff assignments.
 11. List of Contractor's principal consultants.
 12. Copies of building permits.
 13. Copies of authorizations and licenses from authorities having jurisdiction for performance of the Work.
 14. Initial progress report.
 15. Report of preconstruction conference.
 16. Certificates of insurance and insurance policies.
 17. Performance and payment bonds.
 18. Data needed to acquire Owner's insurance.
- M. Application for Payment at Substantial Completion: After Architect issues the Certificate of Substantial Completion, submit an Application for Payment showing 100 percent completion for portion of the Work claimed as substantially complete.

1. Include documentation supporting claim that the Work is substantially complete and a statement showing an accounting of changes to the Contract Sum.
 2. This application shall reflect Certificate(s) of Substantial Completion issued previously for Owner occupancy of designated portions of the Work.
- N. Final Payment Application: After completing Project closeout requirements, submit final Application for Payment with releases and supporting documentation not previously submitted and accepted, including, but not limited, to the following:
1. Evidence of completion of Project closeout requirements.
 2. Insurance certificates for products and completed operations where required and proof that taxes, fees, and similar obligations were paid.
 3. Updated final statement, accounting for final changes to the Contract Sum.
 4. AIA Document G706, "Contractor's Affidavit of Payment of Debts and Claims."
 5. AIA Document G706A, "Contractor's Affidavit of Release of Liens."
 6. AIA Document G707, "Consent of Surety to Final Payment."
 7. Evidence that claims have been settled.
 8. Final meter readings for utilities, a measured record of stored fuel, and similar data as of date of Substantial Completion or when Owner took possession of and assumed responsibility for corresponding elements of the Work.
 9. Final liquidated damages settlement statement.

PART 2 - PRODUCTS (Not Used)

PART 3 - EXECUTION (Not Used)

END OF SECTION 01 29 00



Pre-Bid Meeting Record

Meeting Date: Wednesday, March 25, 2020 @ 9:00am

Publication Date: March 26, 2020

Prepared By: Pam Dennis

Tt Project No.: 200-26912-18004

Regarding: S-1 Bldg. Shower Improvements
James T. Vaughn Correctional Center
New Castle, Delaware
OMB/DFM/DOC Contract No: MJ3804000090

Attendees

J. Dean Seely	OMB/DFM/DOC Project Manager	302-739-5644	joseph.seely@state.de.us
Ernest Kulhanek	JTVCC Maintenance	302-653-9261	Ernest.kulhanek@delaware.de.us
Ashlie Stanley	OMB/DFM	302-739-5644	Ashlie.stanley@delaware.de.us
Ryan Jackson	Amakor	302-834-8664	amakor@aol.com
Bill Booth	Commonwealth Const. Co	302-654-6611	bbooth@itscommonwealth.com
Cory Nichols	Delmarva Veteran Builders	443-736-1584	cory@delmarvaveteranbuilders.com
Dan Palese	Ventresca Bros, Inc.	302-658-6436	tony@venstrescabros.com
Andrea DiFabio	BSS Contractors, Inc.	610-345-1316	bsmith@bsscontractor.com
James Selinka	Tetra Tech	302-738-7551	James.selinka@tetrattech.com
Pam Dennis	Tetra Tech	302-738-7551	Pam.dennis@tetrattech.com

Additional Distribution

Greg Christian	DOC Facilities Maint. Manager	302-739-5601	greg.christian@state.de.us
Eric Smeltzer	DOC Capital Programs Admin	302-857-5261	eric.smeltzer@delaware.gov

Item Number

Item

1. Project involves the modification and upgrades to eight existing shower rooms, including but not limited to: plumbing upgrades, selected wall and floor modifications, finish upgrades, ventilation upgrades, and electrical upgrades.
2. This was a **MANDATORY** Pre-Bid Meeting held on Wednesday, March 25, 2020, at 9:00 a.m. at Division of Facilities Management conference room in the Thomas Collins Building, 540 S. DuPont Highway, Suite 1 (Third Floor), Dover, Delaware, for the purpose of establishing the list of subcontractors and to answer questions. Representative of each party to any Joint Venture must attend this meeting. **ATTENDANCE OF THIS MEETING IS A PREREQUISITE FOR BIDDING ON THIS CONTRACT.**

3. Project documents can be purchased at Tetra Tech's office for a non-refundable handling fee of \$100 per set.
4. Sealed bids for **OMB/DFM Contract No. MJ3804000090 – James T. Vaughn Correctional Center – S1 Building Shower Renovations** will be received by the State of Delaware, Office of Management and Budget, Division of Facilities Management, in the reception area of the Facilities Management Office in the Thomas Collins Building, 540 S. DuPont Highway, Suite 1 (Third Floor), Dover, DE 19901 until 2:30 p.m. local time on Thursday, April 16, 2020, at which time they will be publicly opened and read aloud in the Conference Room. Bidder bears the risk of late delivery. Any bids received after the stated time will be returned unopened.
5. The Wage Rates for this project shall be as determined by the Delaware Department of Labor and Division of Industrial Affairs for New Castle County. A certified copy has been included in the Project Manual. However, Contractors are responsible to contact the Delaware Department of Labor to receive verification of the most current Wage Rate Scale. Change order requests will be based upon these rates and the actual number of hours required to complete the work.
6. Only plan holders who purchased bid document sets from Tetra Tech will receive the ADDENDAS.
7. All discrepancies, questions or requests for clarifications or interpretations must be submitted to the Architects office at least seven (7) days prior to bid due date, Thursday, April 9, 2020. Submit e-mails to Pam Dennis attention at pam.dennis@tetrattech.com and ier.dedoc@atetrattech.com Requests for substitutions must be submitted to the Architects office at least ten (10) days prior to bid due date, Monday April 5, 2020. Submit e-mails to Pam Dennis attention at pam.dennis@tetrattech.com. and ier.dedoc@atetrattech.com
8. Insurance requirements are listed in Section 00 81 13 General Contracting Requirements.
9. Contractor must list themselves as the Subcontractor for all work which they propose to accomplish. All subcontractors doing work on this project will need to be listed on the bid form.
10. A Bid Security, in the amount of ten percent (10%) of the total amount of the Base Bid plus all additive alternates is required.
11. No Addenda will be issued later than four (4) days prior to the date for receipt of Bids except an Addendum withdrawing the request for Bids or one which extends the time or changes the location for the opening of bids. The last Addenda will be issued on Friday, April 10, 2020 at C.O.B.
12. Each Bidder shall ascertain prior to submitting their Bid that they have received all Addenda issued and shall acknowledge their receipt of each addenda in the Bid in the appropriate space. On the Bid Form the Contractor shall list each Addendum separately (i.e.: 1, 2, and etc.). Contractor's shall fill out the Bid Form completely, do not leave any blanks. Please be sure to read the updated Bid Form's Subcontractor List verbiage, OMB/DFM recently updated this section.

"In accordance with Title 29, Chapter 69, Section 6962(d)(10)b of the Delaware Code, the following subcontractor listing must accompany any bid submittal. The bidder must list **in each category** the full name and address (City & State) of the sub-contractor that the bidder will be using to perform the work and provide material for that subcontractor category. Should the bidder's listed subcontractor intend to provide any of their subcontractor category of work through a third-tier contractor, the bidder shall list that third-tier contractor's full name and address (City & State). **If the bidder intends to perform any category of work itself, it must list its full name and address.** For clarification, if the bidder intends to perform the work themselves, the bidder **may not** insert "not applicable", "N/A", "self" or anything other than its own full name and address (City & State). To do so shall cause the bid to be rejected. In addition, the failure to produce a completed subcontractor list with the bid submittal shall cause the bid to be rejected. If you have more than three (3) third-tier contractors to report in any subcontractor category, print out additional page(s) containing the appropriate category, complete the rest of your list of third-tier contractors for that category, notate the addition in parentheses as (CONTINUATION) next to the subcontractor category and an asterisk (*) next to any additional third-tier contractors, and submit it with your bid.

13. The Schedule of Values shall include a line item for the submission of the Project Closeout Documents. The value of this item shall be no less than 1.5% of the initial contract amount.
14. The Contractor must submit certified weekly payroll receipts directly to the Delaware Department of Labor as required.
15. The Front End Specifications requires a two (2) year Warranty and Guarantee Period after acceptance by the Owner.
16. The Front End Specifications, the Performance and Labor & Material Payment Bonds shall be maintained in full force (warranty bond) for a period of two (2) years after the date of the Certificate for Final Payment.
17. All potential change orders need to be immediately brought to the attention of the Architect. Change orders must be approved prior to any work being done.
18. Facility Staff restrooms will be available for Contractor use.
19. No mingling with inmates.
20. Contractors shall not bring glass or metal containers into the Facility. Plastic Only.
21. Proper construction clothing is required. Short pants, open-toed shoes, and/or bare chests are not permitted.
22. Employee/Contractor/Subcontractor lunch breaks during normal working hours shall occur at the job site.
23. Cells phones, if allowed, cannot have cameras in them. Special/written permission will be required for the Job Foreman to carry a cell phone at the discretion of the Warden.
24. Contractors are required to sign in at the Main Entrance each morning before driving through the gate. All Contractors shall enter and leave as a group with an escort (Maintenance Personnel or Correctional Officer). Allow 30 minutes to one (1) hour to enter or leave the Facility. Gather at service entrance at 7:15am.
25. No dumping will be allowed on the project site. Trash, debris and waste must be removed from the compound daily and from the site as required or directed. Dumpster location to be coordinated at the Pre-Construction Meeting.
26. James T. Vaughn Correctional Center (JTVCC) is a 24/7 prison Contractors are advised that only limited movement will be permitted while inside the compound.
27. All utility shutdowns must be coordinated with DOC Maintenance.
28. The contingency allowance of \$10,000.00 is to be included in your base bid.
29. The Pre-Bid walk-through for this project is scheduled for Tuesday, April 7, 2020 at 9:00 a.m. Meet up front at Gatehouse.

Contractors must submit background checks for those employees that wish to attend the Site Walk through and submit by email directly to Ernest Kulhanek at ernest.kulhanek@delaware.gov by Wednesday, April 1, 2020, close of business (COB), to allow time for the security clearance process. In addition, provide Pam Dennis pam.dennis@tetrattech.com and Dean Seely joseph.seely@delaware.gov the list of employees you plan on having attend the site visit by Friday, April 3, 2020 COB. **Do not send security clearances to DFM or Tetra Tech.** All contractors are to be at the site by 9:00 a.m., if you are not there by then, you will not be permitted into the facility.

30. The Bid Form – Subcontractor List were determined during the meeting.

Subcontractors:

Electrical
Mechanical
Stainless Steel installer
Epoxy Floor
Plumbing

31. Contractors are required by the State of Delaware, as of the beginning of 2016 to have a Drug Testing Program that must comply with the State of Delaware's requirements and sign the Bid Form – Affidavit of Employee Drug Testing Program in acknowledgement. The Prime Contractor and all Sub-Contractor's shall be required to fill-out and sign the Bid Form – Affidavit of Employee Drug Testing Program in acknowledgement. Time of Bid, Prime Contractor only.
32. Only the Prime Contractor is required to submit a copy of their Delaware Business License at the time of Bid Opening.
33. Contractor, all their Subcontractors and Manufacturer's Representatives shall follow all Department of Corrections (DOC) rules and regulations. While on site the Contractor shall follow all instructions provided by the DOC's Correctional Officer or Maintenance Department Escort.
34. The Project is jurisdiction of New Castle County for both Building Inspection and Fire Marshal. Tetra Tech has met with both agencies and they are aware of this Project. The Contractor's shall be responsible for all Permits and Inspections as required by the Authorities Having Jurisdiction.
35. Scope of work involves installation of a stainless-steel wall covering and epoxy flooring. New shower heads, lighting and exhaust fans.
36. The Drawings were reviewed. At the present time it is expected to shutdown one (1) wing at a time (two floors). This may change depending on the Corona Virus (COVID-19) status.
37. The Shower and Fire Alarm projects will be run concurrently. Contractors for both projects shall coordinate with each other.
38. The Shower Project will be the lead project timewise, since it is more involved.
39. The Contractor to provide time frame.

Attachments:

DOC JTVCC Guidelines
JTVCC Security Forms

J:\IER\26912\200-26912-18004\ProjMgmt\Meetings\Pre-Bid Meeting\200-26912-18004 JTVCC S-1 Shower - Pre-bid Meeting.doc



State of Delaware
Department of Correction
"Our Top Priority Is To Ensure Public Safety"

Guideline to working inside the fence line at JTVCC

James T. Vaughn Correctional Center (JTVCC) is a maximum security facility and working inside our fence line creates a different working environment with specific rules and regulations. While this list is not all inclusive of those regulations it will provide you with an understanding of our expectations from you and your employees.

All contractors and sub-contractors are to notify the JTVCC Maintenance Superintendent 24 hours prior to any work scheduled inside the fence line of JTVCC property. Contractors are expected to follow the directives of any DOC security personnel.

Firearms, alcohol, and drugs are prohibited while on the grounds of JTVCC. The use of all tobacco products is prohibited while on the grounds of JTVCC, this includes while operating equipment in a closed cab or inside personal vehicles.

All equipment and vehicles on the grounds must be locked or disabled while not in use. All tool boxes, job boxes and storage containers must be locked at all times.

No tools, power tools, hand tools, chains, straps, ladders, scaffolding will be left out and unsecured. If ladders and scaffolding must be stored or in the designated secured storage area it must be chained and padlocked secured to an unmovable object. All ladders stored on ladder racks on vehicles must be locked down or a chain and padlock securing the ladders to the vehicle.

Contractors are encouraged to don and wear a Hi-Visibility vest. Contractors are not permitted to wear solid white, yellow, red, and orange clothing. No camouflage material of any kind is permitted.

Contractors are to remain at the work site. Do not make any movement towards the fence line. If a contractor requires movement the JTVCC Maintenance escort, Foreman, or Superintendent must be notified and they will coordinate all movement.

A tool count will be conducted at the beginning of the work day and at the end of the work day. Any tools, saw blades, welding tips that become missing must be reported to the JTVCC

Maintenance Superintendent immediately. JTVCC maintenance personnel must be present during the tool counts.

Contractors are not permitted to block the service entrance or perimeter road around JTVCC.

Contractors will not engage any inmates in a conversation, nor will they give or accept anything from an inmate.

All persons and vehicles on JTVCC properties are subject to search by security staff.

The JTVCC maintenance staff will be your contact and if you have any questions seek the advice from JTVCC maintenance staff or JTVCC maintenance Foreman and Superintendent. In the event of an institutional lockdown, there will be no movement in or out of the institution. Follow the directives given to by security and maintenance personnel when an institutional lockdown is called. Depending on the situation contractor working inside the fence line may be asked to stop working, perform a tool count and leave JTVCC grounds, these occurrences are rare, but contractors are to comply with no questions asked in the event of an institutional lockdown.

No personal cooler are allowed inside the fence, lunches will be placed in clear plastic bags and 1 large cooler (contractor provided) will be allowed to enter with the contractors, No aluminum foil, aluminum cans, glass containers, glass bottles are permitted. No microwave ovens permitted. Clear plastic bottles and coffee cups with removable lids are authorized.

No cash over \$20.00 is allowed on your persons. No Cell phones, notepads, laptops, fit bits, cameras, or any personal electronic devices are allowed.

All contractor vehicles must have a tool inventory of all tools assigned to the vehicle, all tool boxes and compartments attached to the vehicle must have the ability to be locked.

When in doubt ALWAYS contact your JTVCC maintenance escort or the Maintenance foreman or Superintendent.

SECURITY CLEARANCE APPLICATION
DELAWARE DEPARTMENT OF CORRECTION

PLEASE PRINT CLEARLY

WHO SHOULD COMPLETE THIS FORM:

- i. Applicants requesting one-time access or occasional access (whether for one facility or multiple facilities)
- ii. Applicants requesting a badge for access to one or more facilities (frequent access for period of 1 year or more)
Note: These applicants will be directed to Human Resources after this form is approved
- iii. Individuals requesting to schedule an offender visit may be asked to complete this form.

Volunteers, interns and professional service visitors must attach a letter from their sponsoring organization. Letter must be on agency letterhead, signed by the agency's director and include the name and title/role of the applicant and the name of the program.

WHO SHOULD NOT COMPLETE THIS FORM:

- (1) Attorneys
- (2) Employees of DOC's contracted medical/behavioral health provider (please contact DOC's Human Resources directly)

SECTION: PERSONAL INFORMATION & CRIMINAL HISTORY

NAME: _____
(LAST) (FIRST) (MIDDLE)

PLEASE LIST ALL OTHER NAMES YOU HAVE USED INCLUDING MAIDEN, NICKNAMES AND RELIGIOUS NAMES:

DOB: _____ PLACE OF BIRTH: _____ SSN#: _____

SEX: MALE / FEMALE RACE: _____ DRIVER'S LICENSE #: _____ STATE: _____

ADDRESS: _____ APT #: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: HOME: (_____) _____ WORK: (_____) _____

EMAIL: _____

PLEASE LIST WHICH FACILITY(IES) YOU ARE REQUESTING ACCESS TO:

PLEASE SELECT TYPE OF ACCESS REQUESTED

- ____ Offender Visit
____ One Time Access (i.e. single event) *No badge issued
____ Occasional Volunteer or Service Provision (Less than 3 days per week or less than 165 days per year for a period of one year or less) * No badge issued
____ Frequent/Long Term Volunteer or Service Provision (At least 3 days per week or 165 days per year for a period of one year or more) * You will be directed to HR to fill out a badge application packet after this form has been approved by the respective DOC Bureau Chief

DO YOU HAVE ANY ARRESTS FOR CHARGES OTHER THAN TRAFFIC TICKETS (WHETHER CONVICTED, DISMISSED, NOLLE PROSSED, OR PARDONED)? NO/YES (IF YES, COMPLETE BELOW). IF YOU NEED MORE ROOM, PLEASE ATTACH A SEPARATE SHEET.

COUNTRY: _____ DATE: _____

OFFENSE: _____

HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE OTHER THAN A TRAFFIC TICKET? NO /YES (IF YES, COMPLETE BELOW). IF YOU NEED MORE ROOM, PLEASE ATTACH A SEPARATE SHEET.

COUNTRY: _____ **DATE:** _____

OFFENSE: _____ **SENTENCE:** _____

ARE YOU PRESENTLY UNDER DEPT. of CORRECTION SUPERVISION: NO/YES (IF YES, WHAT): _____

ARE YOU RELATED TO OR KNOW ANYONE INCARCERATED AT A DOC FACILITY: NO/ YES

IF YES, NAME OF INMATE AND YOUR RELATIONSHIP TO THEM: _____

SECTION 2: JUSTIFICATION FOR SECURITY CLEARANCE REQUEST DO NOT COMPLETE THIS SECTION IF APPLYING FOR AN OFFENDER VISIT. IF REQUESTING ONE-TIME PRISON ACCESS FOR A SINGLE EVENT, ONLY ANSWER THE QUESTIONS MARKED WITH AN ASTERISK (*).

***REASON FOR CLEARANCE:** _____

***DATE(S) OF ACTIVITY:** _____ ***ORGANIZATION:** _____

***PROGRAM NAME:** _____

***JOB TITLE:** _____ ***HOW LONG EMPLOYED/VOLUNTEERING:** _____

ORGANIZATION ADDRESS, PHONE NUMBER, AND EMAIL:

WHAT TYPE OF VOLUNTEER OR PROFESSIONAL SERVICES WILL YOU BE PROVIDING?

DESCRIBE YOUR QUALIFICATIONS FOR PROVIDING PROFESSIONAL OR VOLUNTEER SERVICES:

LIST ANY PAST OR PRESENT PROFESSIONAL OR VOLUNTEER ORGANIZATIONS YOU PARTICIPATED IN (INCLUDE NAME, LENGTH OF SERVICE, CONTACT PERSON, AND PHONE NUMBER OR EMAIL):

SECTION 3: PLEASE READ AND SIGN ALL APPLICANTS MUST COMPLETE THIS SECTION

I understand that DOC authorities will verify my criminal record information. I also understand that my application may be rejected for any reason.

SIGNATURE: _____ DATE: _____

DOC USE ONLY:

The following is the result of the DELJIS and NCIC records checks:

DELAWARE WANTS/WARRANTS _____ DELWARE CRIMINAL HISTORY _____

NCIC WANTS/WARRANTS _____ NCIC CRIMINAL HISTORY _____

DELJIS/NCIC INVESTIGATOR _____ SIGNATURE _____ DATE _____

APPROVED _____ APPROVAL EXPIRES ON: _____

DENIED _____

IF DENIED, PLEASE INDICATE REASON BELOW:

- (1) Dishonest/incomplete application;
- (2) Active pending charges/warrants/capiases;
- (3) Any criminal conviction within the past two years;
- (4) Any incarceration in a Delaware correctional facility within the past three years;
- (5) Pending litigation against DOC involving applicant, arrest for escape, conviction for smuggling prison contraband, affiliation with confirmed security threat group, or previous institutional misconduct relating to the security, life, safety, and health of the facility while incarcerated;
- (6) Other (See Investigation for info).

REVIEWER'S SIGNATURE: _____ DATE: _____

A GUIDE TO THE PREVENTION AND REPORTING OF SEXUAL ABUSE AND MISCONDUCT WITH OFFENDERS

PREA Information for Contractors, Vendors, and Volunteers with Limited Contact with Offenders

Please Read, Sign, and Return this Acknowledgement Form with the Security Clearance Application

Staff Sexual Misconduct

Delaware Department of Correction (DDOC) policy 8.60 specifically forbids any activity associated with or that promotes acts of sexual conduct, including sexual harassment between offenders and DOC staff. In this definition, "staff" includes: contractors, vendors and volunteers of the DOC. An "offender" means someone incarcerated in a correctional facility or under supervision in the community. DDOC policy 8.60 contains detailed descriptions of what constitutes sexual misconduct and staff misconduct of a sexual nature (Policy 8.60 is available on the DDOC website at: http://www.doc.delaware.gov/downloads/policies/policy_8-60.pdf)

Forms of sexual misconduct include, but are not limited to:

1. Any behavior of a sexual nature directed toward an offender by a Department staff, contract staff, or volunteer.
2. Inappropriate touching between offenders and staff.
3. All completed, attempted, threatened, or requested sexual acts between Department staff and the offender.
4. Sexual comments and conversations with sexually suggestive innuendos or double meanings.
5. Display or transmittal of sexually suggestive posters, objects, or messages.

Depending on the investigation findings of an alleged incident, the outcome may result in the loss of your job/assignment and the possibility of criminal charges. In addition, persons accused of sexual harassment in civil or criminal proceedings may be held personally liable for damages to the person harassed.

An Abuse of Power

Due to the imbalance of power between offenders and staff in correctional settings, sexual interactions between staff (who have power) and offenders (who lack power) are unprofessional, unethical and illegal. Some offenders who lack power may become sexually involved with staff in an effort to equalize the imbalance of power. Occasionally an offender may try to use sex to improve his/her standing or circumstances (e.g., better job, avoid disciplinary action, affect a release plan, gain privileges, etc.). As a DOC contractor, vendor or volunteer, your designated assignments place you in a position of authority over the offenders with whom you interact in a professional capacity. It is not possible to have a relationship as equals because you have a responsibility to maintain custody, evaluate work performance, and/or provide input to issues that affect release dates, return to prison, or other sanctions.

Because of the imbalance of power between offenders and staff, vendors, contractors and volunteers, there can never be a consensual relationship between staff and offenders. In fact, the law states "consent" is not a defense to prosecution. Here are some factors to consider.

Some staff don't think of offenders as 'victims' of staff sexual misconduct, especially when the offender appears to be a willing participant or even initiated the sexual or 'romantic' interactions with a staff member. The offender is always the victim because of the imbalance of power. The consent or willingness of an offender to participate may be a survival strategy or a learned response to previous or current victimization. Many offenders have a history of victimization (physical and/or sexual abuse), which may make them especially vulnerable to the sexual overtures of persons in positions of authority. Their perception of affection/love may be skewed by this background of abuse, making it impossible for them to refuse advances of a staff member.

In some instances, particularly for female offenders, their survival in the community has been directly related to using their sexuality to obtain the means to survive. Coupled with low self-esteem, this carries over into their conduct in prison and while under community supervision.

As the person in authority, it is your responsibility to discourage, refuse and report any overtures as well as maintain professional boundaries at all times. Boundaries in relationships can be difficult. If you question your professional boundaries with an offender or feel uncomfortable with his/her actions or advances toward you, talk to another person you respect and/or bring this matter to the attention of a DOC employee before it gets out of control.

Red Flags:

The following are behaviors or 'red flags' that may signal you or someone you work with is in danger of engaging in sexual misconduct with an offender:

- Spending a lot of time with a particular offender
- Change in appearance of an offender or staff member
- Deviating from agency policy for the benefit of a particular offender
- Sharing personal information with an offender
- Horseplay
- Overlooking infractions of a particular offender
- Doing favors for an offender
- Consistently volunteering for a particular assignment or shift
- Coming to work early/staying at work late
- Flirting with an offender

Some Other Things to Consider:

Amorous or sexual relationships with an offender are seldom a secret. Such behavior will subject you to disrespect and manipulation from other offenders that may be aware of your situation. Once in a relationship, professional judgment becomes clouded and the normal defenses that exist to protect you will be compromised. When acting on emotions, you may take actions that would otherwise be considered inappropriate in a correctional environment (either in custody or in the community).

Amorous or sexual relationships are inappropriate and illegal when they occur between an offender and any staff member, contractor, vendor or volunteer. Offenders depend upon staff to provide for their board and care, ensure their safety, address their health care needs, supervise their work and conduct, and act as role models for socially acceptable conduct. Your conduct and the decisions you make reflect not only on your own reputation, but also on that of your peers and the agency you represent.

How to Maintain Appropriate Boundaries:

Most staff/offender sexual misconduct occurs only after seemingly innocent professional boundaries have been crossed. The following behaviors will assist you in maintaining appropriate boundaries:

- Maintain professional distance
- Focus behavior on duties and assignments
- Do not become overly close with offenders
- Do not share your own or other staff person's personal information with or around offenders
- When speaking to offenders about other staff, refer to the staff by their title or as Ms. or Mr.
- When speaking to offenders refer to them as Ms. or Mr. and their last name
- Do not accept gifts or favors from offenders
- Be knowledgeable of Departmental policy and procedure, rules of conduct and laws regarding sexual misconduct and sexual harassment.

A Duty to Report

Staff must report any inappropriate staff/offender behavior immediately. The presence of illegal and unethical behavior by staff compromises the security and safety of the agency. Staff that fail to report such behavior will be held accountable and sanctioned through dismissal. All efforts will be made to ensure the confidentiality of the reporting staff member.

I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED IN THIS DOCUMENT.

SIGNATURE: _____

DATE: _____

PRINTED NAME: _____

ORGANIZATION / COMPANY _____

PROGRAM NAME: _____





TETRA TECH

240 Continental Drive, Suite 200, Newark, Delaware 19713

PREBID MEETING SIGN-IN SHEET

OMB/DFM/DOC – James T. Vaughn Correctional Center
S1 Shower Improvements

Tt PROJECT NO.: 200-26912-18004
DATE: March 25, 2020

Name	Company	Physical Address	Telephone	e-mail
1 James Selinka	Tetra Tech, Inc.	240 Continental Dr. Ste 200 Newark, DE 19713	302-283-2247	James.selinka@tetratech.com
2 Ryan Jackson	Amaker Inc	72 Clinton St Delaware DE	302-834-8664	Amaker@Aol.com
3 Bill Booth	Commonwealth Cons Co.	2317 Pennsylvania Ave Wilmington DE 19806	302-654-6611	booth@commonwealth.com
4 DAN PALESE	VENTRESCA BROS	2300 N DUANT HWY NEW CASTLE DE 19720	302-655- 6436	TONY@VENTRESCA6105.COM
5 COREY NICHOLS	DELMARA VETERAN BUILDERS	120 E MARKET ST SALESWAY MD	410-736-1584	COREY@DELMARAVETERANBUILDERS.COM
6 ANDREA DIFABIO	BSS CONTRACTORS	281 E. EVERGREEN WEST GROVE PA	610-345-1316	BSMITH@BSSCONTRACTOR.COM
7 Pam Dennis	Tetra Tech			
8 Pat Seely	OMB/DFM			
9 Ashlie Stankey	OMB/DFM			ashlie.stankey@delaware.gov
10 Ernest Kucharek	JVCC MAINT	1181 Padlock Rd Smyrna, DE 19977	302-653-9261 ext 2338	ernest.kucharek@delaware.gov
11				
12				
13				

James T. Vaughn Correctional Center - S1 Shower Improvement

Bids Due: 9:00 a.m., March 25, 2020 at

Office of Management & Budget/Division of Facilities Management
DFM Conference Room
Thomas Collins Building
540 S. Dupont Highway, Suite 1 (3rd Floor)
Dover, DE 19901

REGISTER OF BID DOCUMENTS
PLEASE PRINT CLEARLY

\$ 100.00 per set

#01	Name of Company: <u>Amakor</u> Physical Address: <u>72 Clinton St</u> City, State: <u>Delaware City DE</u> Contact: <u>Ryan Jackson</u> GC: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Phone: <u>302-834-8664</u> Fax: _____ Date: _____ E-Mail: <u>amakor@aol.com</u>
#02	Name of Company: _____ Physical Address: _____ City, State: _____ Contact: _____ GC: <input type="checkbox"/> YES <input type="checkbox"/> NO Phone: _____ Fax: _____ Date: _____ E-Mail: _____
#03	Name of Company: _____ Physical Address: _____ City, State: _____ Contact: _____ GC: <input type="checkbox"/> YES <input type="checkbox"/> NO Phone: _____ Fax: _____ Date: _____ E-Mail: _____