TEVEBAUGH
ARCHITECTURE

NOVEMBER 24, 2026

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PHILADELPHIA

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NOTICE TO BIDDERS
ADDENDUM 03

Delaware Technical Community College
Owens Campus Dental Health Center
25040

Addendum #03

A. This Addendum is issued to all registered plan holders pursuant to the Conditions of the Contract. This Addendum serves to clarify, revise, and supplement the information in the Project Manual, Drawings, and previously issued Addenda. Portions of the Addendum affecting the Contract Documents shall be incorporated into the Contract by enumeration of the Addendum in the Owner/Contractor Agreement.

B. The Bidder shall acknowledge receipt of this Addendum to the Architect / Owner.

C. The date for receipt of bids is **UNCHANGED** by this Addendum.

REVISIONS TO PREVIOUS ADDENDA

1) No changes to previous addenda.

REVISIONS TO THE SPECIFICATIONS

1) Revised Bid Form to change 2022 to 2026.

REVISIONS TO THE DRAWINGS

1) ASK-01
    a. Revised door frame type for doors #101-1 and 105-1.

BIDDERS QUESTIONS

1) *Ref dwgs MD101 and M101. A main 24" round supply air duct fed from plan east scheduled for demo and replacement, runs through the proposed fit out area and turns out into the existing corridor tying into an existing 18" round duct feeding VAV 3-25 and 8" round duct feeding VAV 3-19. Since the old duct and the new duct occupy the same pathway, the old duct can't remain in service while the new duct is being installed. What, if any, means are required by the contractor to provide temporary services to the existing duct runs in the corridor and units served by this duct during construction?*
   Response: Owner to confirm, but the VAV boxes that will be offline serve a lobby/corridor. Do not believe temporary heating/cooling would be required (critical). Adjacent corridor VAV box would still be operational and could temper the space.

2) *Location of SPD identified on the panel schedule*
   Response: SPD shall be located adjacent to panel PC-5.

3) *Is MC acceptable for locations not called out for Conduit?*
Response: *MC cable is acceptable as defined under 260519-3.2.*

4) *Who is the current fire alarm vendor for the building?*
Response: *Existing fire alarm system is Gamewell FCI by Honeywell as indicated on Sheet E502.*

5) *Drawing S003 lists Special Inspections, are these inspections for the Unistrut?*
Response: the structural special inspections are not for the Unistrut. They are just for the angle framing where the angles will be getting welded in the field.

6) *Will the owner be responsible on all the cost related for the commissioning for all MEP related work?*
Response: Commissioning will not be required as part of this project.

7) *Specifications have section 033543 Polished Concrete Finishing, please advise where this is used.*
Response: Polished concrete system will have a densifier and low gloss sealer. This will be installed in the dental mechanical room.

8) *On pages 004113 -6/7/8, the bid form notes "2022", is the contractor to strike through and note "2026" or will revised sheets be provided in future addendum?*
Response: A new bid form has been reissued as part of this addedndum.

9) *Dental vacuum pump dvp-01 and dental air compressor dac-01 are furnished by the dental equipment vendor. plumbing bid includes setting the equipment and making the piping connections shown. confirm responsibility for factory startup and any vendor-supplied connection kits.*
Response: Factory startup and vendor supplied connection kits to be by dental equipment vendor.

10) *For DAC-01 and DVP-01, identify which accessories come with the equipment and which the plumbing contractor must furnish. Clarify housekeeping pads, vibration isolation, flexible connectors, valves, filters, drains, and any required amalgam separator. Confirm who handles control wiring, factory startup,*
Response:
    a. Dental air compressor installed by contractors. Plumber to provide all piping noted on mechanical drawings.
    b. Dental vacuum pump (dry) installed by contractor. Plumber to provide all piping noted on mechanical drawings. Plumber to exhaust pump to outside. Drain by plumber. Final connections by contractor(s). Plumber to provide water line with shut-off valve near unit for tank wash-out,
    c. Amalgam separator to be provided by vendor and installed by the contractor and connected to vacuum lines from the treatment room.
    d. Housekeeping pads are located P304.

e. A mechanical room control panel will be supplied by vendor and installed by electrician. Electrician to supply and install 24v control wiring from panel to each compressor, vacuum and/or solenoid per manufacturers specifications. See keynote #14 on E301.
f. Factory startup will be completed by vendor.

11) *A902 lists vacuum and compressed air for EQ-45 and EQ-46. P403 identifies EQ-46 for vacuum. Please confirm the required vacuum and air connections for each unit and whether EQ-46.1 needs a separate air rough-in.*
Response: Provide compressed air for all devices in the sterilization room. EQ-46.1 will require a 1/2" air line with 3/8" angle valve

12) *A902 shows cold water only for EQ-16, while P401 calls for hot and cold. Confirm which water services to carry and where the trimmer discharges.*
Response: P401 keynote #4 calls for cold water line to EQ-16. The trimmer should discharge directly to the sink drain line below the countertop via a drain hose.

13) *Will the owner be responsible on all the cost related for the commissioning for all MEP related work?*
Response: See response to question number 6 above.

14) *Can the bid date be extended given the Thanksgiving Holiday falling in the bid period?*
Response: Due to the limited time available to approve the bid, the bid date cannot be extended at this time.

15) *Note 9 on S101 says "CONTRACTOR TO PERFORM COST ESTIMATE ANALYSIS FOR REMOVAL AND REPLACEMENT OF ENTIRE SLAB ON GRADE". Is this going to be a line item on the bid form for full slab removal?*
Response: This will not be a line item for the bid. Please select the most cost effective solution for the slab, whether it is removing the entire slab or trenching the slab for the underground utilities.

16) *The drawing list on CS01 lists drawing M403 but it is not included in the set. Also P305 is not on the drawing list but included in the set. Please confirm.*
Response: M403 and P305 are not part of the set and the cover sheet will be revised to reflect that.

17) *Will coordinated drawings be required to be submitted for the HVAC and plumbing trades?*
Response: Yes per Section 250300 Article 3.16 installation and coordination drawings are required.

18) *Section 23 09 00 – Instrumentation and Controls of HVAC and Plumbing Systems, paragraph 1.12, "Training," page 9, contains two different training durations: Paragraph 1.12.C: Requires instruction of the Owner's representative on operation of the control system "for a period of not less than four (4) hours. "Paragraph 1.12.D.2:*

Requires operator training on system functions and includes "a minimum of 40 hours' dedicated instructor time on-site. "Please clarify whether the required BMS/ATC training is four hours, 40 hours, or whether these are separate requirements totaling 44 hours. Please confirm the total training duration to included.
Response: 4 hour training is required.

19) *Is there a designated laydown area for the general contractor to use?*
Response: A designated laydown area can be determined on the start of construction mobilization.

20) *A902 calls for Schedule 40 PVC for dental equipment connections. Section 22 62 13 describes copper or Schedule 80 PVC, while P305 includes notes addressing below-slab brazed copper vacuum piping and insulation. Please identify the required dental vacuum piping material and schedule above and below slab, permitted transitions at equipment, and insulation/protection requirements. Please distinguish equipment connection tubing from distribution mains and branches.*
Response: Dental vacuum and compressed air piping is specified under Sections 216113 and 226213.

21) *M102 Keynote 2 refers to 'detail' without reference. Confirm that disconnect support at DSOU-1 and DSOU-2 is per M301/9 and E703/1 (extended equipment curb), not E703/9 (free-standing support on separate curbs).*
Response: Correct, details are M301/9 and E703/1.

22) *Are the DOAS getting installed on rails or a curb?*
Response: There are no Dedicated Outdoor Air Systems on this project.

23) *Do you know the height of the windows for the blinds?*
Response: (7) windows are 6'-0" high by 6'-0" wide. (2) windows are 8'-0" high by 5'-8" wide. (1) Window is 8'-0" high by 12'-5" wide.

24) *Height of the new corner guards?*
Response: 4'-0" for the corner guards.

25) *Do you have model numbers for EQ23 and Eq27?*
Response: All towel dispensers and soap dispensers will be provided and installed by facilities. Contractors should provide blocking.

26) *Can you provide a signage schedule?*
Response: Signage will be a separate contract.

End of Addendum No.3

21225 College Drive, Georgetown, DE 19947
Delaware Technical Community College
Dental Health Center At Carter Partnership Center Georgetown Campus
DTCC # C9004020007

BID FORM

For Bids Due: December 3, 2026 **To:** Delaware Technical Community College

21179 College Drive
Georgetown, Delaware 19947

Name of Bidder: _____

Delaware Business License No.: _____ **Taxpayer ID No.:** _____

(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:

$_____

ALLOWANCE

Sum above should include a contingency allowance of $20,000 for unforeseen conditions.

UNIT PRICES

This contract does not contain any unit price items.

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.

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Alternate #1 – ATC System by Siemens Controls

Base Bid: Provide ATC system and integration by any listed ATC vendor/manufacturer as specified in Specification Section 230900 "Instrumentation and Controls of HVAC and Plumbing Systems".

Base Bid ATC Vendor.
Alternate: ATC system by Siemens Controls

Add: _____
($)

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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 (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:** _____
(Authorized Signature)

(SEAL)

_____
(Title)

Date: _____

ATTACHMENTS

Sub-Contractor List
Non-Collusion Statement
Affidavit of Employee Drug Testing Program
Affidavit of Contractor Qualifications
Bid Security
(Others as Required by Project Manuals)

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BID FORM

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.

Subcontractor Category	Subcontractor	Address (City & State)	Subcontractors tax-payer ID # or Delaware Business license #
1. Mechanical			
2. Electrical			

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3. Carpentry/General			
4. Plumbing			

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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 DTCC Contract No. DTCC_22C900404-CYD 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 _____ 2026.

My Commission expires _____. NOTARY PUBLIC _____.

THIS PAGE MUST BE SIGNED AND NOTARIZED FOR YOUR BID TO BE CONSIDERED.

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BID FORM

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 _____ 2026.

My Commission expires _____. NOTARY PUBLIC _____.

THIS PAGE MUST BE SIGNED AND NOTARIZED FOR YOUR BID TO BE CONSIDERED.

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BID FORM

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 _____ 2026.

My Commission expires _____. NOTARY PUBLIC _____.

THIS PAGE MUST BE SIGNED AND NOTARIZED FOR YOUR BID TO BE CONSIDERED.