

**Addendum
No. 1**

Meeting Date: September 23, 2026
Addendum Date: September 25, 2026
Project: HVAC Replacement at DSP Troop 5
DFM Project No: MC1002001141

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.

Pre-Bid Meeting Minutes / Clarifications:

1. Introductions:
 - a. State of DE OMB/DFM Project Manager – Dean Seely
joseph.seely@delaware.gov / 302-739-5644
 - b. Studio JAED Project Manager – Dan Shurina
shurinad@studiojaed.com / 302-832-1652
2. See attached pre-bid sign in sheets for reference.
3. Review of bidding timeline.
 - a. Bids will be received by the State of Delaware, Office of Management and Budget, Division of Facilities Management, by way of the Bonfire Portal at <https://DFM/bonfirehub.com> or bids may also be delivered in person to 122 Martin Luther King Jr Blvd South, Dover, DE 19901 no later than 1:00 PM, October 8, 2026. Bids will be read aloud in the conference room at 2:00 PM.
 - b. Bidders are to submit questions in writing by email to Dan Shurina at the e-mail address noted above. Responses will be issued by addendum.
 - c. Bidder questions will be accepted until 4:00 PM October 1, 2026.
4. All drawings must be purchased through RCI as noted in the bid advertisement. All information / addenda will be released through RCI for this bid. IT IS THE CONTRACTOR'S RESPONSIBILITY TO ENSURE THAT THEY HAVE RECEIVED ALL ADDENDA FOR THE PROJECT.
5. The contractor is responsible for obtaining all required building permits and trade permits for the project.
6. The bid form is reissued with this addendum to include listed subcontractor categories. Listed subcontractor categories exclusively include HVAC, Electrical, Masonry, Carpentry and Earthwork.
7. The existing BAS is JCI by Modern Controls. Modifications to existing BAS are to be performed by Modern Controls.

8. The project includes a \$30,000 allowance for unforeseen conditions which is to be included in contractor's base bid price and is to be used at the owner's discretion as project progresses. The allowance is not intended for any portion of work indicated in the bid documents. Any balance remaining in the allowance is to be returned to owner by credit change order at project conclusion.
9. Bid Form and Required Documents:
 - a. Bidders may not alter the bid form.
 - b. If bid form is reissued during the bidding process, the latest bid form is to be submitted.
 - c. Bidders are not to leave any blank lines on the bid form. Fill out bid form completely.
 - d. Bidders are to individually acknowledge receipt of each numbered addendum received on the bid form. Bidders must list themselves for any listed subcontractor scope of work if they intend to do the scope of work with their own work force.
 - e. Completed drug testing affidavit forms are required with each bid. The drug testing affidavit declares compliance with drug testing requirements for the bidder and all listed subcontractors.
 - f. A bid bond is required to be submitted with the bid. Bidders are to use the state bid bond form, a copy of which is attached to this addendum.
10. All shutdowns of any critical building system excluding emergency power (including but not limited to sprinkler, fire alarm, HVAC, water, sewer and electrical) are to be scheduled and approved in advance by the owner – and may be canceled by owner without notice. Work requiring the shutdown of building systems is to continue around the clock until the service is restored. See 01 10 00 Summary of Work sequence of work and shutdown limitations.
11. There are no sanitary facilities on site available for contractor use. The contractor is to provide temporary sanitary facilities as required and maintain in clean condition.
12. Immediately following the pre-bid meeting, a voluntary walkthrough was conducted at the project site.
13. In general, work is to be performed during normal business hours (Monday through Friday, 8:00 am through 4:30 pm with minor adjustments as needed to accommodate the owner's schedule unless noted otherwise in the documents – and the Contractor may begin the work once all materials to complete the project are in-hand and following Owner's approval of the Contractor's work schedule.

14. Work is to be sequenced seasonally such that the entire cooling system is operational between April 15th and October 15th, annually, with minor adjustments as required by the Owner to maintain building setpoints. Contractor shall provide temporary chiller with temporary electrical and chilled water connections and modifications as required in the event the chilled water system is not operational by the required date.
15. Background checks are required for contractors and subcontractors working at the facility. They are performed by Identigo and will cost \$20 per person.
16. The maximum number of AHU shutdowns permitted is four (4) and the maximum duration of each shutdown is eight (8) hours – to be seasonally coordinated in advance with the Owner to occur during moderate weather. Two shutdowns are expected to be associated with each AHU – one to disconnect existing AHU and stage and connect the temporary AHU – and a second to disconnect and remove the temporary AHU and make final connections to new permanent AHU.

Changes to Specifications:

1. Specification 00 41 13 – Bid Form
 - a. Reissued with subcontractor categories.
 - b. See attached updated bid form.
2. Specification 00 43 13 – Bid Bond
 - a. Reissued with revised language to clarify bond requirement for bid value of base bid and alternates.
 - b. See attached updated bid form.

Changes to Drawings:

1. Drawing M-102 – Attic Level Construction Plan
 - a. Add general HVAC Construction Note #7 to read “VAV-14 through VAV-21 are located above existing ACT ceilings. Contractor is to remove and reinstall ceiling materials as required for access – and temporarily suspend, clean and reinstall any ceiling-mounted devices as required to facilitate the work.”
 - b. Revised drawing or sketch is not included with addendum. Change will be reflected on future drawing issues.

Attachments:

1. Pre-Bid Sign-In Sheet (Scanned)
2. Pre-Bid Sign-In Sheet (Typed)
3. Specification 00 41 13 – Bid Form
4. Specification 00 43 13 – Bid Bond

END

**HEADQUARTERS**

2500 WRANGLE HILL ROAD
FOX RUN OFFICE PLAZA, SUITE 110
BEAR, DE 19701

302.832.1652 PHONE
302.832.1423 FAX

ARCHITECTS

ENGINEERS

FACILITIES SOLUTIONS

Project: HVAC Replacement at DSP Troop 5
Project No.: MC1002001141

Start Time:
End Time:

Pre-Bid Meeting
September 23, 2026

SIGN IN SHEET

ATTACH BUSINESS CARD

and WRITE: Name, Firm, Phone, Email, Signature, Time

Name:	Noel Pace
Firm:	EAST
Phone:	443-373-9001
Email:	n.pace@eastcontrols.com
Signature:	
Time:	
Name:	Bobby Stewart
Firm:	Statewide Mechanical Inc
Phone:	302-376-6117
Email:	Statewideinc8@gmail.com
Signature:	
Time:	1:18
Name:	Edward Welch
Firm:	Flow Mechanical LLC
Phone:	302-530-1030
Email:	Jamese@flowmechanical.com
Signature:	
Time:	1:19

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End Time:

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September 23, 2026
SIGN IN SHEET

ATTACH BUSINESS CARD

and WRITE: Name, Firm, Phone, Email, Signature, Time

Name:	Ralph Degli OBizzi
Firm:	
Phone:	302-652-3593
Email:	ralph3@degli.com
Signature:	Time:
WALT MORRIS	
Name:	Mark Flanagan
Firm:	Flanagan's Crane & Rigging
Phone:	302-561-1288
Email:	FlanagansRigging@yahoo.com
Signature:	Time:
[Signature]	1:15pm
Name:	Alyssa Serpico
Firm:	Joseph T. Richardson, Inc
Phone:	302-398-8101
Email:	Serpico@JTRmech.net
Signature:	Time:
AS	1:23

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SIGN IN SHEET

ATTACH BUSINESS CARD

and WRITE: Name, Firm, Phone, Email, Signature, Time

Name:	Michael Gibbs
Firm:	Facilities Management
Phone:	(302) 272-3779
Email:	michael.gibbs@delaware.gov
Signature:	Time: 1:00 PM
Name:	Vince Duobinis
Firm:	East Coast Plumbing & HVAC
Phone:	302-743-6803
Email:	Vince@ECPH.NET
Signature:	Time: 1:00 PM
Name:	Justin Dennis
Firm:	Schlusser & Associates
Phone:	302-738-7333
Email:	justin@schlusserandassociates.com
Signature:	Time: 1:26 PM

**HEADQUARTERS**

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BEAR, DE 19701

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302.832.1423 FAX

ARCHITECTS

ENGINEERS

FACILITIES SOLUTIONS

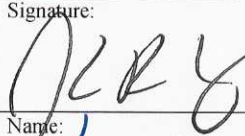
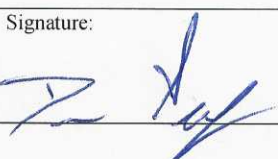
Project: HVAC Replacement at DSP Troop 5
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End Time:

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ATTACH BUSINESS CARD

and WRITE: Name, Firm, Phone, Email, Signature, Time

Name:	JOHN Klase
Firm:	ID Griffith
Phone:	302-593-0990
Email:	AMccracken@IDGriffith.com
Signature:	
Time:	1:30
Name:	Kim Lombardi
Firm:	AMAKOR Inc
Phone:	302-834-8664
Email:	AMAKOR@AOL.com
Signature:	
Time:	1:29
Name:	De Seely
Firm:	
Phone:	
Email:	
Signature:	
Time:	

HEADQUARTERS

2500 WRANGLE HILL ROAD
FOX RUN OFFICE PLAZA, SUITE 110
BEAR, DE 19701

302.832.1652 **PHONE**302.832.1423 **FAX**

ARCHITECTS

ENGINEERS

FACILITIES SOLUTIONS

Project: HVAC Replacement at DSP Troop 5
Project No.: MC1002001141
Date: September 23, 2026

Start Time: 1:30 PM
End Time: 2:00 PM

**PRE-BID
SIGN IN SHEET**

1. Dan Shurina Studio JAED
302-832-1652
shurinad@studiojaed.com

2. Walt Morris Ralph Degli Obizzi
302-652-3593
ralph3@degli.com

3. Edward Welch FLO Mechanical LLC
302-530-1030
jamese@flomechanical.com

4. Noel Pace EASI
443-373-9001
n.pace@easicontrols.com

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End Time: 2:00 PM

**PRE-BID
SIGN IN SHEET**

5. Bobby Stewart Statewide Mechanical, Inc
302-376-6117
statewideinc8@gmail.com

6. Alyssa Serpico Joseph T. Richardson
302-398-8101
serpico@jtrmech.net

7. Mark Flanagan Flanagan's Crane & Rigging
302-561-1288
flanagansrigging@yahoo.com

8. Michael Gibbs State of DE OMB / DFM
302-272-3779
michael.gibbs@delaware.gov

HEADQUARTERS2500 WRANGLE HILL ROAD
FOX RUN OFFICE PLAZA, SUITE 110
BEAR, DE 19701302.832.1652 **PHONE**302.832.1423 **FAX****ARCHITECTS****ENGINEERS****FACILITIES SOLUTIONS**

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**PRE-BID
SIGN IN SHEET**

9. Vince Duobinis East Coast Plumbing & Heating
302-743-6803
vince@ecph.net

10. Justin Dennis Schlosser & Associates
302-738-7333
justin@schlosserandassociates.com

11. John Klase ID Griffith
302-593-0990
amccracken@idgriffith.com

12. Kim Lombardi Amakor, Inc
302-834-8664
amakor@aol.com



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PRE-BID
SIGN IN SHEET

13. Dean Seely State of DE OMB / DFM
302-739-5644
joseph.seely@delaware.gov

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

BID FORM
00 41 13 - 1

BID FORM

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

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: Provide temporary air handling units to provide comfort heating and cooling.

Add/Deduct: _____
(\$ _____)

BID FORM

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

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
Affidavit of Contractor Qualifications
Bid Security
(Others as Required by Project Manuals)

BID FORM

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

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. HVAC			
A.			
B.			
C.			
2. Electrical			
A.			
B.			
C.			

BID FORM

EAST SIDE CHILLER REPLACEMENT
SUSSEX COUNTY COURTHOUSE
1 THE CIRCLE, GEORGETOWN, DE 19947
CONTRACT # MC1002001123

SUBCONTRACTOR LIST CONTINUED

<u>Subcontractor Category</u>	<u>Subcontractor</u>	<u>Address (City & State)</u>	<u>Subcontractors tax-payer ID # or Delaware Business license #</u>
3. Masonry			
A.			
B.			
C.			
4. Carpentry			
A.			
B.			
C.			
5. Earthwork			
A.			
B.			
C.			

BID FORM

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

**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

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

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 MC1002001141 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

HVAC REPLACEMENT
DELAWARE STATE POLICE – TROOP 5
9265 PUBLIC SAFETY WAY, BRIDGEVILLE, DE 19933
CONTRACT # MC1002001141

**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

STATE OF DELAWARE
OFFICE OF MANAGEMENT AND BUDGET

BID BOND

TO ACCOMPANY PROPOSAL
(Not necessary if security is used)

KNOW ALL MEN BY THESE PRESENTS That: _____
_____ of _____ in the County of _____
_____ and State of _____ as **Principal**, and _____
_____ of _____ in the County of _____
and State of _____ as **Surety**, legally authorized to do business in the State of Delaware
("State"), are held and firmly unto the **State** in the sum of ten percent (10%) of the total amount of the base
bid plus ten percent (10%) of the total amount of all additive alternates not to exceed _____
_____ Dollars (\$ _____) of
amount of bid on Contract No. _____, to be paid to the **State** for the use and benefit of
_____ (*insert State agency name*) for which payment well and
truly to be made, we do bind ourselves, our and each of our heirs, executors, administrators, and successors,
jointly and severally for and in the whole firmly by these presents.

NOW THE CONDITION OF THIS OBLIGATION IS SUCH That if the above bonded **Principal**
who has submitted to the _____ (*insert State agency name*) a
certain proposal to enter into this contract for the furnishing of certain material and/or services within the
State, shall be awarded this Contract, and if said **Principal** shall well and truly enter into and execute this
Contract as may be required by the terms of this Contract and approved by the _____
_____ (*insert State agency name*) this Contract to be entered into within twenty days after
the date of official notice of the award thereof in accordance with the terms of said proposal, then this
obligation shall be void or else to be and remain in full force and virtue.

Sealed with _____ seal and dated this _____ day of _____ in the year of our Lord two
thousand and _____ (20____).

SEALED, AND DELIVERED IN THE
Presence of

		_____ Name of Bidder (Organization)
Corporate Seal	By:	_____ Authorized Signature
Attest _____		_____ Title
		_____ Name of Surety
Witness: _____	By:	_____ Title