

Addendum No.2

Office of Management & Budget/Department of Facilities Management
Department of Corrections
Baylor Women's Correctional Institution

Tt Project No. 213-26912-22005
OMB/DFM Contract No. MJ3804000111

Addendum No. 2
to
Baylor Women's Correctional Institution – Infirmary Expansion

July 31, 2026

To: ALL BIDDERS

This ADDENDUM forms a part of the BIDDING AND CONTRACT DOCUMENTS and modifies the following documents:
Original DRAWINGS dated July 27, 2026
Original PROJECT MANUAL dated July 27, 2026

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

This ADDENDUM consists of two (2) and the following attachments listed below:

2.1 GENERAL ADMINISTRATIVE DISCUSSION

A. Critical Dates:

1. Bid Due Date: **Thursday, August 20, 2026 by 2:00pm**
2. Security forms submission (to Brandon Slaughter – Branden.Slaughter@delaware.gov) **Friday, July 31 2026 by COB**
3. Sub-Contractor site walk throughs are as follows: **Please meet at the sites on Tuesday, August 11, 2026 following times at 9:00am**
4. Cut off for Substitutions: **Thursday, August 13, 2026 by COB**
5. Cut off for Questions/Clarifications/or Interpretations: **Thursday, August 13, 2026 by COB**
6. Last Addendum for technical content: **Tuesday, August 18, 2026 by COB**

2.2 PROJECT MANUAL MODIFICATIONS

A. Section 00 41 13; Bid Form

1. **REPLACE** Spec Section with **REVISED** Bid Form attached to this Addendum
 - A. Subcontractor list updated to include "Detention Equipment" to the list.

B. Section 11 98 11; Detention Equipment General Requirements

1. **REVISE** the following Paragraph 1.4.A. **ADD** the following Pre-Qualified Detention Equipment Contractor.
Southern Folger Contracting, Inc.
923 Tahoe Blvd, Suite 204
Incline Village, NV 89451
(916) 900-6593

2.3 PROJECT DRAWING MODIFICATIONS: N/A

2.4 QUESTIONS/CLARIFICATIONS:

Question 1: We are supposed to match the existing metal wall panels. Please provide product and profile information.
It pertains to 07 42 13.13 Formed Metal Wall Panels.

Response: **New metal panels to match existing metal siding materials and profile. Confirm existing materials and profile during pre-bid site walkthrough scheduled as noted above in General Administrative Discussion section.**

ATTACHMENTS

00 41 13 Bid Form

Images of existing metal siding – for reference only.

END OF ADDENDUM

INFIRMARY EXPANSION
MJ3804000111

BID FORM

To: State of Delaware, Office of Management & Budget/
Division of Facilities Management
Haslet Armory
122 Martin Luther King Jr. Blvd.
Dover, DE 19901

Phone No.: () _____ - _____ **Fax No.:** () _____ - _____

\$ _____
(\$ _____)

\$ _____ (Date and Initial)

INFIRMARY EXPANSION
MJ3804000111

BAYLOR WOMEN'S CORRECTIONAL INSTITUTION
NEW CASTLE, DELAWARE

**INFIRMARY EXPANSION
BAYLOR WOMEN'S CORRECTIONAL INSTITUTION
660 BAYLOR BLVD.
NEW CASTLE, DELAWARE
OMB/DFM CONTRACT NO.: MJ3804000111**

BID FORM

UNIT PRICES

No Unit Prices

ALTERNATES

ALTERNATE No. 1: To be Determined

Add/Deduct: _____
(\$ _____)

**INFIRMARY EXPANSION
BAYLOR WOMEN'S CORRECTIONAL INSTITUTION
660 BAYLOR BLVD.
NEW CASTLE, DELAWARE
OMB/DFM CONTRACT NO.: MJ3804000111**

BID FORM

I/We acknowledge Addendums numbered _____ and the price(s) submitted include any cost/schedule impact they may have.

This bid shall remain valid and cannot be withdrawn for thirty (30) days from the date of opening of bids (60 days for School Districts and Department of Education), and the undersigned shall abide by the Bid Security forfeiture provisions. Bid Security is attached to this Bid.

The Owner shall have the right to reject any or all bids, and to waive any informality or irregularity in any bid received.

This bid is based upon work being accomplished by the Sub-Contractors named on the list attached to this bid.

Should I/We be awarded this contract, I/We pledge to achieve substantial completion of all the work within _____ calendar days of the Notice to Proceed.

The undersigned represents and warrants that he has complied and shall comply with all requirements of local, state, and national laws; that no legal requirement has been or shall be violated in making or accepting this bid, in awarding the contract to him or in the prosecution of the work required; that the bid is legal and firm; that he has not, directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken action in restraint of free competitive bidding.

Upon receipt of written notice of the acceptance of this Bid, the Bidder shall, within twenty (20) calendar days, execute the agreement in the required form and deliver the Contract Bonds, and Insurance Certificates, required by the Contract Documents.

I am / We are an Individual / a Partnership / a Corporation

By _____ Trading as _____
(Individual's / General Partner's / Corporate Name)

(State of Corporation)

Business Address: _____

Witness: _____ By: _____
(SEAL) (Authorized Signature)

(Title)
Date: _____

ATTACHMENTS

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

INFIRMARY EXPANSION
BAYLOR WOMEN’S CORRECTIONAL INSTITUTION
660 BAYLOR BLVD.
NEW CASTLE, DELAWARE
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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.

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

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BAYLOR WOMEN’S CORRECTIONAL INSTITUTION
660 BAYLOR BLVD.
NEW CASTLE, DELAWARE
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BID FORM (Continued)

3. Structural Steel			
A.			
B.			
C.			
4. Roofing			
A.			
B.			
C.			
5. Mechanical			
A.			
B.			
C.			
6. Plumbing			
A.			
B.			
C.			

7. Electrical			
A.			
B.			
C.			
8. General Trades			
A.			
B.			
C.			
9. DDC Controls			
A.			
B.			
C.			
10. Testing & Balancing			
A.			
B.			
C.			
11. Detention Equipment			
A.			
B.			
C.			

**INFIRMARY EXPANSION
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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 *MJ3804000111* 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.

**INFIRMARY EXPANSION
BAYLOR WOMEN'S CORRECTIONAL INSTITUTION
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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.

**INFIRMARY EXPANSION
BAYLOR WOMEN'S CORRECTIONAL INSTITUTION
660 BAYLOR BLVD.
NEW CASTLE, DELAWARE
OMB/DFM CONTRACT NO.: MJ3804000111**

**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.