TO: ALL BIDDERS

RE:

TOWN OF TRUMBULL
HEALTH DEPARTMENT BUILDING
ROOF REPLACEMENT
335 WHITE PLAINS ROAD, TRUMBULL, CT

SUBJECT: ADDENDUM NO. 1

DATE: SEPTEMBER 19, 2017

This Addendum shall be part of the Contract Documents for the referenced Bid. The Addendum is to acknowledge by the bidder on the Bid Form.

The following ADDENDUM is issued to clarify items appearing either in the specifications or on the Drawings, said items having been called to the attention of the Architect by one or more of the Contractors estimating the work:

The Specifications and / or drawings are amended as follows:

1. GENERAL –
   A. The correct address for the Health Department Building is 335 White Plains Road.

2. SPECIFICATIONS – BID FORM – Attachment 1A Addendum-see below
   A. Refer to attached revised Bid Form which now includes Deduct Alternate #1 and a Breakout Cost for Allowances.

3. SPECIFICATIONS – SECTION 072210 ROOF INSULATION
   A. Part 1.1-C – Item No. 1: Delete “tapered” and replace “.080” PVC” with “.060” fully adhered EPDM”.

4. SPECIFICATIONS – SECTION 075410 FULLY ADHERED EPDM ROOFING
   A. Part 1.1-C – Item No. 2: Replace “30 year” with “20 year”.

5. DRAWINGS – A-100
   A. Detail ‘A’ – Replace “New tapered insulation” with “New one layer of 2” insulation”.
6. DRAWINGS – A-101

   A. Detail ‘3’ – Clarification: Paint new 1”x8” Azek Fascia and ½” Azek sheet soffit with one coat primer and two finish coats of paint as recommended by manufacturer.

7. DRAWINGS – A-102

   B. Detail ‘6’ – Add the following note: Remove existing Texture 1-11 wood siding at both ends of mansard roof and replace with new ½” Azek sheet. Also remove fascia and trim boards below siding at both ends of mansard roof and replace with new ½” Azek sheet fascia and new 1x4 Azek trim board above and 1x6 Azek trim board below. All new Azek to be painted with one coat primer and two finish coats of paint as recommended by manufacturer.

END OF ADDENDUM NO. 1

Attachment 1A Proposal - please make sure to fill out & submit the below Proposal as instructed - 1-original and 2 exact copies
TOWN OF TRUMBULL
REQUEST FOR PROPOSAL
PWD
ROOF REPLACEMENT AT THE HEALTH DEPARTMENT BUILDING

Bid number 6262       DUE: September 28, 2017 @ 2pm

PROPOSAL

Proposal of ___________________________________________________ (hereinafter called "Proposer, Bidder"), organized and existing under the laws of the State of Connecticut, doing business as to the Engineering Department, Town of Trumbull, Connecticut (hereinafter called the "Owner").

In compliance with your Advertisement for Proposals, Proposer hereby proposes for the ROOF REPLACEMENT AT HEALTH DEPARTMENT BUILDING project, in the Town of Trumbull, Connecticut together with all related incidental and appurtenant work as described in the specifications or outlined and/or shown on the exhibits. The work is to be done in strict accordance with the Specifications, Drawings and all Contract Documents, within the time set forth therein, and at the prices stated on the Proposal Schedule.

By submission of this Proposal, each Proposer certifies, that this Proposal has been arrived at independently, without consultation, communication, or agreement as to any matter relating to this Proposal with any other Proposer or with any competitor.

Proposer hereby agrees to commence work under this contract on or before a date to be specified in the “Notice to Proceed”, and to fully complete the Project within sixty (60) consecutive calendar days thereafter.

Proposer further agrees to pay as liquidated damages, the sum of ($250.00) two hundred and fifty dollars for each consecutive calendar day thereafter till completion of the full contract as provided in the General Conditions. Proposer further agrees that he will provide and sustain the required Bonds and Insurance Policies as required.

Proposer understands that the Owner reserves the right to reject any or all proposals and to waive any informality in the bidding.

Proposer agrees that this proposal shall be good and may not be withdrawn for a period of ninety (90) calendar days after the scheduled closing time for receiving proposals.

Upon receipt of written notice of the acceptance of this proposal, proposer shall execute the formal contract attached within five (5) days and deliver a Surety Bond or Bonds as required in the General Conditions. The Bid Security attached in the sum of_______________________Dollars ($________________) is to become the property of the Owner in the event the contract and bond are not executed within the time above set forth, as liquidated damages for the delay and additional expense to the Owner caused thereby.

________________________________________________
Company Name

________________________________________________
Address

________________________________________________
City-Town-Zip

________________________________________________
Date

________________________________________________
By (Signature)

________________________________________________
Print Name

________________________________________________
Title

________________________________________________
Telephone/Fax

PROPOSAL – ROOF REPLACEMENT AT HEALTH DEPARTMENT BUILDING (continued)
The undersigned hereby declares that in regard to all conditions affecting the work to be done and the labor and materials required, this proposal is based on his investigations and findings, and the Town of Trumbull and the Engineers and their officers, agents and employees shall not in any manner be held responsible for the accuracy of, or be bound by any estimates, borings, water or underground conditions relative to the proposed work, indicated in this or in the other contract documents; that no warranty or representation has been made by the Town of Trumbull or the Engineers or their officers, agents and employees as to subsurface soil or rock conditions, ground water, or other underground and similar conditions; nor has any representation or warranty been so made that the estimated quantities to be used for comparison of proposals will even approximate the actual quantities or materials and work which the Contractor may be required to furnish or perform.

Project HEALTH DEPARTMENT BUILDING  
ROOF REPLACEMENT  
335 WHITE PLAINS ROAD  
TRUMBULL, CONNECTICUT

Date: _________________

Submitted by: ____________________________________________
________________________________________________________
(full name)
____________________________________________________________________________
(full address)

1. OFFER

Pursuant to and in compliance with the Invitation to Bid relating thereto, the Undersigned,

himself/herself with the conditions present and carefully examined all the documents (including the drawings and specifications dated September 5, 2017), General Instructions, Bid Proposal Form, etc., together with all Addenda issued and received prior to closing time for receipt of Bids as prepared by Antinozzi Associates hereby offers and agrees as follows:

To provide all materials, all labor and all else whatsoever necessary to erect and properly finish all work in accordance with said documents for the above mentioned projects to the satisfaction of the Architect and Owner for the stipulated sum of

Base Bid (in words) ____________________________________________

Base Bid (in figures) $__________________________________________

Enclosed herewith is the Bid Guaranty (10% of Base Bid minimum), which is in the form of:

( ) Bid Bond        ( ) Certified Check

All State of Connecticut taxes are excluded from the Bid Sum.
2. ACCEPTANCE
   a. This offer shall be open to acceptance for ninety (90) days from the Bid opening date.
   b. If this Bid is accepted by the Owner within the time period stated above, Undersigned will:
   c. Execute this Agreement within ten days of receipt of acceptance of this Bid.
   d. Furnish the required bond(s) within ten days of receipt of acceptance of this Bid.
   e. Commence work within seven days after written Notice to Proceed or Contract signing.
   f. If this Bid is accepted within the time stated, and the Undersigned fails to provide the required Bond(s), the Owner may charge against the Undersigned the difference between the amount of this bid and the amount for which the contract for the work is subsequently executed, irrespective of whether the amount thus due exceeds the amount of the bid guaranty.
   g. In the event this Bid is not accepted within the time stated above, the required security deposit shall be returned to the undersigned, in accordance with the provisions of the Instructions to Bidders; unless a mutually satisfactory arrangement is made for its retention and validity for an extended period of time.

3. CONTRACT TIME
   If this Bid is accepted, the Undersigned will complete all the work per the contract documents and shall receive satisfactory inspection by the appropriate municipal and state entities within 60 calendar days from Notice to Proceed.
   Is it additionally understood that liquidated damages, in the amount of $250 per calendar day, will be assessed for failure to complete the project within the above time period.

4. CHANGES TO THE WORK
   Equitable adjustments for Changes in the Work will be net cost plus a percentage feed in accordance with the General Conditions.

5. ADDENDA
   The following Addenda have been received. The modifications to the Bid Documents noted therein have been considered and all costs thereto are included in the Base Bid.

   Addenda #
   _________, __________, __________, __________, __________, __________

6. ALTERNATES
   A. Deduct Alternate No.1 – To delete replacement of asphalt shingles included in Base bid.

      DEDUCT THE SUM OF
      ______________________

7. BREAKOUT COSTS FOR ALLOWANCES
   A. Include an allowance in the Base Bid to remove five (5) sheets of existing damaged plywood roof sheathing and replacing with new 5/8” exterior grade plywood sheathing.

      ______________________ Allowance included in Base Bid

PROPOSAL - ROOF REPLACEMENT AT HEALTH DEPARTMENT BUILDING (continued)
8. BID FORM SIGNATURE(S)

The Corporate Seal

______________________________________________________________________________

(Bidder - please print the full name of your Proprietorship, Partnership, or Corporation)

Was hereunto affixed in the presence of:

______________________________________________________________________________

(Authorized signing officer) (Title)

(Seal)

______________________________________________________________________________

(Authorized signing officer) (Title)

If the Bid is a joint venture or partnership, add additional forms of execution for each member of the joint venture in the appropriate form or forms as above.

Company Name

______________________________________________________________________________

By (Signature)

Address

______________________________________________________________________________

Print Name

City, State, Zip code

______________________________________________________________________________

Title

Phone #

______________________________________________________________________________

FAX

EMAIL

END Proposal Addendum 1A