Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
ONE CAPITOL HILL
PROVIDENCE RI 02908

CREATION DATE : 11-JUN-15
BID NUMBER: 7549616,1
TITLE: DISH ROOM FLOOR REPLACEMENT-ZAMBARANO HOSPITAL-BEAZLEY HOUSE HOSPITAL BUILDING

BLANKET START : 01-JUL-15
BLANKET END : 31-DEC-15
BID CLOSING DATE AND TIME: 17-JUN-2015 11:00:00

BUYER: Cadoret, David
PHONE #: N/A

BILL TO
DOA CONTROLLER
ONE CAPITOL HILL, 4TH FLOOR
SMITH ST
PROVIDENCE, RI 02908
US

SHIP TO
DOA-FACILITIES AND MAINTENANCE
ZAMBARANO HOSPITAL
2090WALLUM LAKE ROAD
PASCOAG, RI 02859-1813
US

Requistion Number: 1414555
Note to Bidders: THERE WILL BE A MANDATORY PRE BID AS PER ATTACHED SPECIFICATIONS
Amendment Description: THIS ADDENDUM POSTS SIGN IN SHEET FROM MANDATORY PRE BID CONFERENCE.
THIS ADDENDUM CHANGES WORDING ON LINE ONE OF REQUEST FOR QUOTE AND ADDS LINE TWO.
THIS ADDENDUM POSTS NOTES FROM PRE BID CONFERENCE.

Line	Description	Quantity	Unit	Unit Price	Total
1	ZAMBARANO HOSPITAL DISH ROOM VINYL FLOOR REPLACEMENT AS PER ATTACHED SPECIFICATIONS. THE AGENCY WILL MOVE ALL EQUIPMENT.	1.00	TOTAL		
2	OPTIONAL. ZAMBARANO HOSPITAL DISH ROOM VINYL FLOOR REPLACEMENT AS PER ATTACHED SPECIFICATIONS. VENDOR RESPONSIBLE FOR MOVING EQUIPMENT.	1.00	TOTAL		

Delivery: _____

Terms of Payment: _____

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
DIVISION OF PURCHASES
One Capitol Hill
Providence, RI 02908-5855

Tel: (401) 574-8100
Fax: (401) 574-8387
Website: www.purchasing.ri.gov

June 11, 2013
ADDENDUM NUMBER ONE
RFQ #7549616
TITLE: Dish Floor Replacement-Zambarano Hospital-Beazley House Hospital Building

Closing Date and Time: 6/17/15 at 11:00 AM

Per the issuance of this ADDENDUM #1 (2 pages) the following is noted:

This addendum posts sign in sheet from mandatory pre bid conference held 6/10/15 at 1pm. This addendum changes wording on line 1 of request for quote and adds line 2.
As noted by buyer at pre bid:

-This is a mandatory pre bid conference. Only those vendors on the sign in sheet will be allowed to submit proposals. I would ask that the name you sign in with is the name the bid is submitted under.

-Questions are being accepted on line until 6/12/15 at 5pm. Instructions on how to submit questions are in the bid proposal.

-Bid bond is not required.

-Payment and Performance bond is not required.

-This is a public works project and as such requires that your bid, in addition to the paper copy, requires a CD be submitted also. Failure to do so will result in your bid being disqualified.

-Please note Roman Numeral II, Deliverables, on page 1 of the specifications.

-Please note the Public Works Bid Clauses.

-This is a prevailing wage project and there is a form in the bid documents that needs to be submitted with your bid proposal which is an acknowledgement that you are aware of the prevailing wage requirements.

-There is a Bid Preparation Checklist to help you out but it is not a substitute for a thorough review of the bid proposal by the vendor.

-We are asking you to submit a W-9with their bid proposal.

State of Rhode Island
Division of Purchases
One Capitol Hill
Providence, RI 02908

"MANDATORY" PRE-BID CONFERENCE SIGN IN SHEET

Mandatory Pre-bid Conference: Any vendor who intends to submit a bid proposal in response to this solicitation must have its designated representative attend the mandatory pre-bid conference. The representative must register at the pre-bid conference and disclose the identity of the vendor whom he/she represents. Because attendance at the pre-bid conference is mandatory, a vendor's failure to attend and register at the pre-bid conference shall result in disqualification of the vendor's bid proposal as non-responsive to the solicitation.

BID NUMBER:	7549616
BID TITLE:	DISH ROOM FLOOR REPLACEMENT-ZAMBARANO HOSPITAL
PRE-BID DATE AND TIME:	6/10/15 AT 1PM

Purchasing Representative:	DCADORET
Mandatory Pre-bid START TIME:	1:05
Mandatory Pre-bid END TIME:	1:10

	COMPANY NAME	COMPANY REPRESENTATIVE	ADDRESS	CONTACT E-MAIL	CONTACT PHONE NUMBER	CONTACT FAX NUMBER	PROPOSAL SUBMITTED (For Purchasing Use Only)
1	State Purchasing	David Cadoret					
2	Stonhard	John Fournier		JFournier@stonhard.com	860	306 4887	
3	DOA F+M State of R.I.	Gordon Reid					
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Rev: 4/30/13

** VENDOR: PLEASE SUBMIT A BUSINESS CARD IF AVAILABLE**