

BID SOLICITATION



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

BID NUMBER: B06096
TITLE: ELEVATOR UPGRADE
BID OPENING DATE AND TIME:
03/23/2006 1:40 PM

BUYER: JOHN O'HARA
 PHONE #: (401) 222 - 2142 ext. 125

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MENTAL HEALTH, RETARDATION & HOSPITALS
MHRH FACILITIES & MAINTENANCE
PO BOX 8268
CRANSTON RI 02920

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MENTAL HEALTH, RETARDATION & HOSPITALS
MHRH - FOR DESTINATION
SEE BELOW RI N/A

Requisition Number(s): R76F068413

Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>THERE WILL BE A PRE-BID CONFERENCE ON 3/9/06 AT 10:00 AM.</p> <p>LOCATION: MHRH MEETING IN LOBBY OF REGAN BUILDING REGAN COURT CRANSTON, R.I.</p> <p>BIDDER IS REQUIRED TO PROVIDE A BID SURETY IN THE FORM OF A BID BOND, OR A CERTIFIED CHECK PAYABLE TO THE STATE OF RHODE ISLAND, IN THE AMOUNT OF A SUM NOT LESS THAN FIVE PERCENT (5%) OF THE BID PRICE. BID SURETY MUST BE ATTACHED TO THE BID FORM. THE SUCCESSFUL BIDDER WILL ALSO BE REQUIRED TO FURNISH PERFORMANCE AND LABOR AND PAYMENT BONDS AT TIME OF TENTATIVE CONTRACT AWARD.</p>				

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	<p>BIDDERS ARE ADVISED THAT ALL PROVISIONS OF TITLE 37 CHAPTER 13 OF THE GENERAL LAWS OF RHODE ISLAND APPLY TO THE WORK COVERED BY THIS REQUEST, AND THAT PAYMENT OF THE GENERAL PREVAILING RATE OF PER DIEM WAGES AND THE GENERAL PREVAILING RATE FOR REGULAR, OVERTIME, AND OTHER WORKING CONDITIONS EXISTING IN THE LOCALITY FOR EACH CRAFT, MECHANIC, TEAMSTER, OR TYPE OF WORKMAN NEEDED TO EXECUTE THIS WORK IS A REQUIREMENT FOR BOTH CONTRACTORS AND SUBCONTRACTORS. THE PREVAILING WAGE TABLE MAY BE OBTAINED AT THE RI DIVISION OF PURCHASES HOME PAGE BY INTERNET at www.purchasing.state.ri.us. SELECT "INFORMATION" AND THEN SELECT "PREVAILING WAGE TABLE". THE STATE OF RHODE ISLAND USES THE GENERAL DECISION NUMBER RI20030001. PRINTING THE ENTIRE DOCUMENT AVERAGES APPROXIMATELY ONE MINUTE PER PAGE - YOU MAY WANT TO PRINT ONLY THE PAGES APPLICABLE TO YOUR BID. BIDDERS NOTE: IN THE EVENT THIS BID SPECIFIES PRICE OFFERS ON A TIME-AND-MATERIALS BASIS, i.e., AN HOURLY RATE, ANY OR ALL BIDS SUBMITTED IN AN AMOUNT LESS THAN THE PREVAILING RATE IN EFFECT FOR THE WORK COVERED BY THIS REQUEST AS OF THE DATE OF BID ISSUANCE SHALL BE REJECTED BY THE DIVISION OF PURCHASES.</p>				

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	<p>AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.</p>				

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	<p>NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD:</p> <ul style="list-style-type: none"> * PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - \$1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. * BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. * SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF \$5 MILLION. * ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - \$1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. * VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF \$1 MILLION. 				

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	<p>AWARDS EXTENDING BEYOND JUNE 30TH ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.</p> <p>BIDDERS ARE RESPONSIBLE FOR INSPECTION OF EQUIPMENT AND/OR LOCATION, TAKING MEASUREMENTS* WHEN REQUIRED, AND MAKING THEMSELVES AWARE OF THE TOTAL REQUIREMENT BEFORE SUBMITTING A BID. *MEASUREMENTS PROVIDED WITH ANY BID ARE FOR REFERENCE PURPOSES AND ARE NOT GUARANTEED TO BE COMPLETELY ACCURATE.</p>				

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Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.</p> <p>NO CHARGES OTHER THAN PARTS AND LABOR ON THE JOB - NO TRAVEL, NO MILEAGE, NO MISCELLANEOUS CHARGES, NO PORTAL TO PORTAL.</p> <p>UPGRADE THREE ELEVATORS LOCATED ON THE MHRH PASTORE CENTER, CRANSTON, RI PURSUANT TO THE FOLLOWING.</p>				

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1.0	910-13 BID A TOTAL COST DESCRIPTION OF WORK: THE CONTRACTOR WILL BE RESPONSIBLE TO SUPPLY ALL LABOR AND MATERIAL REQUIRED TO ADD FIRE FIGHTER SERVICE PHASE I AND PHASE II AND ALTERNATE FLOOR OPERATION PER ASME/ANSI A 17.1 2000 CODE AND STATE FIRE CODE 13.8.10.514. FOR THE THREE CARS LISTED BELOW. SCOPE OF WORK: ALL WORK REQUIRED TO ACHIEVE THE DESIRED OUTCOME. WORK WILL INCLUDE , BUT IS NOT LIMITED TO, NEW CONTROLLERS, CAR OPERATING PANELS AND HALL FIXTURES INCORPORATING 2000 CODE REQUIRED FIRE SERVICE KEY SWITCHES, SIGNAGE, BUTTONS AND ALARMS. SURFACE MOUNTED HALL STATIONS MAY BE INSTALLED IF FEASIBLE. ALSO ALL CODE APPROVED ELECTRICAL TRAVELING CABLES AND ASSOCIATED WIRING TO ACTIVATE NEW SYSTEM. THE VENDOR IS RESPONSIBLE TO DETERMINE WHAT ADDITIONAL WORK AND/OR EQUIPMENT IS REQUIRED AND WILL INCLUDE THIS IN THE BASE BID. PRICE SUBMITTED WILL BE INCLUSIVE OF ALL COSTS OF THE JOB AND WILL INCLUDE THE REMOVAL AND APPROPRIATE DISPOSAL OF ALL UNUSED EQUIPMENT, WIRING, PIPE, ETC. CONTRACTOR WILL PROVIDE ASSISTANCE FOR ANY SMOKE DETECTOR WORK REQUIRING ACCESS TO SHAFT. SMOKE DETECTOR WORK WILL BE BY OWNER.	1.00	TOTAL		

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	<p>EQUIPMENT: ALL EQUIPMENT, COMPONENTS AND MATERIAL INSTALLED AS PART OF THIS WORK SHALL BE NON-PROPRIETARY ACCEPTANCE: SERVICE WILL BE TESTED IN THE PRESENCE OF STATE OF RHODE ISLAND ELEVATOR INSPECTOR FOR PROPER OPERATION AND COMPLIANCE WITH ALL APPLICABLE STATE AND FEDERAL CODES AND REGULATIONS PRIOR TO ACCEPTANCE. PERMITS AND FEES: THE CONTRACTOR IS RESPONSIBLE TO ACQUIRE ALL NECESSARY PERMITS LOCATION: PASTORE CENTER, CRANSTON, RI EQUIPMENT: REGAN BUILDING, ELEVATOR ID NUMBER - 91818 MATHIAS BUILDING, ELEVATOR ID NUMBER - 91820 MEYER BUILDING, ELEVATOR ID NUMBER - 91829 PERFORMANCE: BY SUBMISSION OF A BID, THE CONTRACTOR ACKNOWLEDGES THAT HE HAS SATISFIED HIMSELF AS TO THE SCOPE, SPECIFICATIONS AND LOCATION OF THE WORK AND ALL MATTERS WHICH CAN IN ANY WAY AFFECT THE WORK OR THE COST THEREOF UNDER THIS CONTRACT. NO CLAIM FOR COMPENSATION WILL BE ENTERTAINED FOR WORK REQUIRED TO BE DONE WHICH PRELIMINARY EXAMINATION OF THE SITE WOULD HAVE REVEALED AS NECESSARY TO ACCOMPLISH THE PURPOSE INTENDED.</p>				

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	<p>WARRANTEE: THE CONTRACTOR SHALL PROVIDE MAINTENANCE ON THE ENTIRE WORK FOR A PERIOD OF ONE YEAR COMMENCING ON THE DATE OF ACCEPTANCE AS DEFINED ABOVE. WORK WILL INCLUDE 24 HOUR - 7 DAY CALL BACK, MONTHLY EXAMINATION AND LUBRICATION. ONLY PARTS APPROVED FOR THE ORIGINAL INSTALLATION WILL BE SUPPLIED AS REPLACEMENT PARTS.</p> <p>OUT OF SERVICE: THE CAR WILL BE OUT OF SERVICE FOR NO LONGER THAN 45 DAYS, INCLUDING ACCEPTANCE/INSPECTION. IN THE EVENT THE VENDOR IS CALLED FOR SERVICE WHICH DOES NOT PERTAIN TO THE THE WARRATEED WORK THEY AGREE TO FOLLOWING LABOR RATES. RATES FOR SERVICE NOT COVERED:</p> <p>STRAIGHT TIME _\$ _____/HR</p> <p>OVERTIME _\$ _____/HR</p> <p>DOUBLETIME _\$ _____/HR</p> <p>PARTS AT MANUFACTURER'S LIST PRICE LESS _____%</p> <p>HOURS OVERTIME RATE APPLIES TO _____</p> <p>HOURS DOUBLETIME RATE APPLIES TO _____</p>				

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	CONTACT PERSON: BILL ANDERSON (401) 462-3188 STARTING DATE _____ NO. OF WORKING DAYS REQUIRED FOR COMPLETION _____				
				TOTAL:	_____

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