



State of Rhode Island
Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Tel: (401) 574-8100 Fax: (401) 574-8387

ADDENDUM # 3

1/31/2020

Solicitation #7599898

Title: Zambarano Elevator Modernization Project

Submission Deadline: February 5, 2020 @ 1:00 PM

Per the issuance of ADDENDUM #3 the following are noted:

- Revised Bid Form/Project Schedule Revised.

Interested Parties should monitor this website on a regular basis, for any additional information that may be posted.

**Gary P. Mosca
Chief Buyer**

Solicitation #:7599898

Solicitation Title: Zambarano Elevator Modernization Project

BID FORM: Revised-Addendum #3.

To: The State of Rhode Island Department of Administration
Division of Purchases, 2nd Floor
One Capitol Hill, Providence, RI 02908-5855

Bidder:

| | |
|---------------------------------|---------------|
| _____ | |
| Legal name of entity | |
| _____ | |
| Address (street/city/state/zip) | |
| _____ | |
| Contact name | Contact email |
| _____ | |
| Contact telephone | Contact fax |

1. BASE BID PRICE

The Bidder submits this bid proposal to perform all of the work (including labor and materials) described in the solicitation for this Base Bid Price (*including the costs for all Allowances, Bonds, and Addenda*):

\$ _____
(base bid price *in figures* printed electronically, typed, or handwritten legibly in ink)

(base bid price *in words* printed electronically, typed, or handwritten legibly in ink)

• **Allowances**

The Base Bid Price ***includes*** the costs for the following Allowances:

No. 1: Allow for inspection, testing, and removal of any suspected hazardous material encountered.

\$ 30,000.00

No. 2: Allow for overtime and escalation

\$ 20,000.00

Solicitation #:7599898

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No. 3: Allow for additional demolition, gypsum, or patching work not depicted on bid documents :

\$ 20,000.00

No. 4: Allow for additional electrical branch circuit wiring not depicted on bid documents.

\$ 30,000.00

No. 5: Allow for elevator cab finishes, \$40,000 for each cab, hospital / industrial grade finishes.

\$ 120,000.00

Total Allowances: **\$ 220,000.00**

- **Bonds**

The Base Bid Price ***includes*** the costs for all Bid and Payment and Performance Bonds required by the solicitation.

- **Addenda**

The Bidder has examined the entire solicitation (including the following Addenda), and the Base Bid Price ***includes*** the costs of any modifications required by the Addenda.

All Addenda must be acknowledged.

Addendum No. 1 dated: _____

Addendum No. 2 dated: _____

Addendum No. 3 dated: _____

Addendum No. 4 dated: _____

Solicitation #:7599898

Solicitation Title: Zambarano Elevator Modernization Project

2. **ALTERNATES** (*Additions/Subtractions* to Base Bid Price)

THERE ARE NO ALTERNATES INCLUDED IN THIS SOLICITATION.

3. **UNIT PRICES**

THERE ARE NO UNIT PRICES INCLUDED IN THIS SOLICITATION.

4. **CONTRACT TIME**

The Bidder offers to perform the work in accordance with the timeline specified below:

- Start of construction: **March 1st, 2020**
- Substantial completion: **Elevator #1 – September 30th, 2020**
Elevator #2 – December 31st, 2020
Elevator #3 – March 31st, 2021
- Final completion Date: **APRIL 30th, 2021**

5. **LIQUIDATED DAMAGES**

The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for each calendar day of delay beyond each of the dates of substantial completion, as listed above, and as determined in the sole discretion of the State:

\$1,500.00 per calendar day.

Solicitation #:7599898

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This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the Bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

BIDDER

Date: _____

Name of Bidder

Signature in ink

Printed name and title of person signing on behalf of Bidder

Bidder's Contractor Registration Number