



Division of Finance and Business Operations

Procurement & Strategic Sourcing
5700 Cass Avenue, suite 4200
Detroit, Michigan 48202
(313) 577-3734
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September 20, 2018

**Addendum #4 To
Request for Proposal
For Elliman Fume Hood Relocation: Project 629-304592**

Dated 08/21/2018

Points of Clarifications during the Pre-proposal Meeting 08/29/2018:

The Addendum must be acknowledged on your lump sum bid.

IMPORTANT – PLEASE NOTE: Effective December 1, 2007, bid notices will be sent only to those Vendors registered to receive them via our Bid Opportunities Listserv service. To register, to <http://go.wayne.edu/bids>, and click on the “Join our Listserv” link at the top of the page. Instructions are at the top of the page, and the Construction Listserv service is under “Construction Bid Opportunities”.

NOTE: You must have attended a pre-bid conference in order to be eligible to bid on a particular project. Receipt of minutes or addenda without being at a pre-bid conference does not qualify your company to bid.

The addendum 3 had an alternate in it. This addendum 4 has the Form of Proposal Section 300 that includes a place to bid on alternate 1.

A copy of this Addendum will be posted to the Purchasing web site at <http://go.wayne.edu/bids>.

All questions concerning this project must be emailed to: **Valerie Kreher**, Procurement & Strategic Sourcing. Email: rfpteam2@wayne.edu, and copy **Leiann Day**, Associate Director, at leiann.day@wayne.edu.

Bids are due **by electronic submission** on no later than 2:00 p.m., **09/25/2018**. The link for bid submission will be posted with the bid details at <http://go.wayne.edu/bids> beginning **08/21/2018**.

Thank you,

**Valerie Kreher,
Senior Buyer**

VENDOR NAME _____

GENERAL CONTRACT - PROPOSAL FORM (revised 4 - 2017)

Sealed proposals for lump-sum General Contract will be received at the office of the Procurement & Strategic Sourcing **by electronic submission on 09/11/2018**, until 2:00 p.m. (local time). The link for bid submission will be posted with the bid details at <http://go.wayne.edu/bids> beginning **08/21/2018**.

Please Note – Vendors must Pre-qualify themselves when responding to this bid opportunity. Our Prequalification questions can be found on page 4 of this section.

OWNER: Board of Governors
Wayne State University

PROJECT: Elliman Fume Hood Relocation

PROJECT NO.: WSU PROJECT NO. **629-304592**

PROJECT TYPE: General construction including architectural, electrical, mechanical (HVAC & plumbing) Work

PURCHASING AGENT: Valerie Kreher, Senior Buyer
WSU – Procurement & Strategic Sourcing
5700 Cass, Suite 4200
Detroit, Michigan 48202
313-577-3710/ 313-577-3747 fax
rfpteam2@wayne.edu & copy leiann.day@wayne.edu

OWNER'S REPRESENTATIVE: T. Allen Gigliotti, Project Manager
Design & Construction Services
Facilities Planning & Management
Wayne State University
5454 Cass Avenue
Detroit, Michigan 48202

TO: Board of Governors
Wayne State University
Detroit, Michigan

BASE PROPOSAL:

The undersigned agrees to enter into an Agreement to complete the entire work of the **Elliman Fume Hood Relocation** project (WSU Project No. **629-304592**) in accordance with the Bidding Documents for the following amounts:

_____ \$ _____ Dollars

ALTERNATES: The following alternates to the base proposal(s) are required to be offered by the respective bidder. The undersigned agrees that the following amounts will be added to or deducted from the base bid as indicated, for each alternate which is accepted.

ALTERNATE NO. 1:

The undersigned agrees to enter into an agreement to complete the Alternate # 1 work of the **Elliman Fume Hood Relocation** project (WSU Project No. **629-304592**) and to provide all labor and material associated with the work in accordance with the Bidding Documents for the following amounts:

(select one) ADD _____ \$ _____ Dollars

or
DEDUCT _____ \$ _____ Dollars

LAWN REPLACEMENT:

The undersigned agrees that, in the event of existing lawn or landscaping damage, due to the Contractor's work, that has not been properly addressed and repaired to the satisfaction of the University, the University may repair/replace the lawn and/or landscaping, and that the expense will be at a **unit cost of \$10.00 per square yard for lawn, and landscaping at a rate of 1.5 times the cost of said repairs**, the full cost of which shall be reimbursed by the contractor.

CONTRACT CHANGE

ORDERS: (revised 4-17-2017)

The undersigned agrees to the following pricing formula and rates for changes in the contract work:

Where changed Work is performed, the Contractor may add to the total estimated actual cost for such Work no more than ten (10%) for subcontractor mark-up and seven and one-half percent (7.5%) for self-performed trade work for profit, overhead, insurance, taxes, indirect supervision, bonds, and any other costs not allowed by section 4.02.01

Within 14 days of the project's contract execution Contractor shall provide to the Owner; Subcontractor's hourly labor rate breakdown details. This requirement shall extend to the lowest level of subcontractor participation.

* Job and general overhead includes supervision and executive expenses; use charges on small tools, scaffolding, blocking, shores, appliances, etc., and other miscellaneous job expenses.

** Net labor cost is the sum of the base wages, fringe benefits established by governing trade organizations, applicable payroll taxes, and increased expense for contractor's liability insurance (Workman's Compensation, P.L. and P.D.).

TIME OF COMPLETION:

(revised 4-01-2011)

The Contract is expected to be fully executed on or about 25 calendar days after successful bidder qualification and recommendation of award. The undersigned agrees to start construction **immediately after** receipt of a fully executed contract, and to complete the work as follows:

Substantial Completion will be completed no later than **12/14/2018**.

LIQUIDATED DAMAGES:

It is understood and agreed that, if project is not completed within the time specified in the contract plus any extension of time allowed pursuant thereto, the actual damages sustained by the Owner because of any such delay, will be uncertain and difficult to ascertain, and it is agreed that the reasonable foreseeable value of the use of said project by Owner would be the sum of **\$500.00, Five Hundred Dollars Dollars per day**, and therefore the contractor shall pay as liquidated damages to the Owner the sum of **\$500.00, Five Hundred Dollars Dollars per day** for each day's delay in substantially completing said project beyond the time specified in the Contract and any extensions of time allowed thereunder.

TAXES:

The undersigned acknowledges that prices stated above include all applicable taxes of whatever character or description. Michigan State Sales Tax is applicable to the work. Bidder understands that the Owner reserves the right to reject any or all bids and to waive informalities or irregularities therein.

ADDENDA:

The undersigned affirms that the cost of all work covered by the following Addenda are included in the lump sum price of this proposal.

Addendum No. _____ Date _____ Addendum No. _____ Date _____

Addendum No. _____ Date _____ Addendum No. _____ Date _____

Addendum No. _____ Date _____ Addendum No. _____ Date _____

Addendum No. _____ Date _____ Addendum No. _____ Date _____

Addendum No. _____ Date _____ Addendum No. _____ Date _____

CONTRACTOR'S PREQUALIFICATION STATEMENT & QUESTIONNAIRE:**Our Minimum Requirements for Construction Bids are:**

WSU considers this project: General construction including architectural, electrical, mechanical (HVAC & plumbing) Work.

Criteria	Small Project bid less than \$50,000	Medium Project bid between \$50,001 and \$250,000	Large Project bid between \$250,001 and \$2 million	Very Large Project bid greater than \$2 million
EMR Rating (Experience Modification Rating)	1.0 or Less	1.0 or Less	1.0 or Less	1.0 or Less
Bondable Vendor	N.A.	Required	Required	Required
Length of Time in Construction Business	2 Years	3 Years	5 Years	5 Years
Demonstrated Experience in Projects Similar in Scope and Price in the last 3 years	1 or more	1 or more	2 or more	3 or more
Unsuccessful Projects on Campus in last 3 years	None Allowed	None Allowed	None Allowed	None Allowed
Failure to comply with Prevailing Wage and/or Project Labor requirements	None Allowed	None Allowed	None Allowed	None Allowed
Withdrawn University Bid (with or without Bond forfeiture) within the last 3 years **	1 or less	1 or less	1 or less	1 or less
Company currently not in Chapter 11 of the US Bankruptcy Code	1 Year	2 Years	3 Years	3 Years

** Withdrawal of a bid is subject to the University suspension policy, for a period up to one year.

Contractors must complete the following information to determine their eligibility to participate in this bid. This information is required with your Bid to the University

Failure to complete this form in its entirety will result in your bid being disqualified.

Check one of the following on the makeup of your company:

_____ Corporation

_____ Individual

_____ Partnership

_____ Joint Venture

_____ Other (Explain below):

Diversity Classification: Please indicate the appropriate diversity classification for your company. The University recognizes the following groups as diverse or disadvantaged:

- Majority Owned _____
- Minority Business Enterprises (MBE) _____
- Women Business Enterprises (WBE) _____
- Disabled Veteran Enterprises (DVBE) _____
- Disabled Person Enterprises (DBE) _____
- Veteran Owned Businesses (VBE) _____
- Small Businesses per the US Small Business Administration (SBE) _____
- Other (Please Explain): _____

1. How many years has your organization been in business as a contractor? _____
2. How many years has your organization been in business under its present business name? _____
3. List states in which your organization is legally qualified to do business. _____

4. Provide the Name and Address of your Liability Insurance Carrier. _____

5. What is your current EMR Rating? _____
The minimum requirement is an EMR Rating of 1.0 or less for all projects. Bidders with a rating higher than 1.0 understand that their bid may be disqualified, at the sole discretion of the University.
6. What percentage of work performed on projects are by company employees; excluding any hired subcontracting and outsourced relationships, for the bid submitted? _____ %
7. What percentage of work performed on your companies behalf are by subcontracted business relationships; disallowing 1099 contracting work forces, for the bid submitted? _____ %
8. Have you ever failed to complete any work awarded to you? If so, attach a separate sheet of explanation. Include the name of the Project, the customer, the dates of the work, and the amount of the contract?
9. Have you withdrawn a bid after a University bid opening and/or refused to enter into a contract with the University upon notification of award within the last 3 years? If so, state the Project Name and Number, and the date of bid submission below.

10. Has any officer or partner of your organization ever been an officer or partner of another organization that failed to complete a construction contract? If so, attach a separate sheet of explanation.

11. List the construction experience of the principals and superintendents of your company.
Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

12. List the construction Projects, and approximate dates, when you performed work similar in Scope to this project.

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

13. List the construction Projects, and approximate dates, when you performed work similar in Dollar Amount to this project.

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

Project: _____ Owner: _____

Contract Amount: _____ Date Completed: _____

14. Is your Company "bondable"? Yes _____ No _____

15. What is your present bonding capacity? \$ _____

16. Who is your bonding agent?

NAME: _____

ADDRESS: _____

PHONE: (_____) _____

CONTACT: _____

17. Does your company agree to provide financial reports to the University upon request? Failure to agree may result in disqualification of your bid. Yes _____ No _____

18. Does your company agree that all of the Terms and Conditions of this RFP and Vendor's Response Proposal become part of any ensuing agreement? Yes _____ No _____

19. Does your company agree to execute a contract containing the clauses shown in Section 00500 "Agreement Between Contractor and Owner for Construction"? Yes _____ No _____

If "No", clearly note any exceptions to any information contained in the contract documents and include with your proposal.

20. Did your company quote based upon **Prevailing Wage Rates**? Yes _____ No _____

21. Does your company agree to comply with the University **Smoke and Tobacco Free Policies**? Yes _____ No _____

Note: Contractors submitting proposals for this project may, at the discretion of the University, be required to submit references including contact information to be used to assist in the post bid evaluation process for the subject project

**ACKNOWLEDGEMENT OF
MINIMUM QUALIFICATIONS:**

The undersigned has read and understands the minimum qualifications for University construction projects, and has completed the Prequalification section completely and accurately. The undersigned understands that a contractor, who fails to meet the minimum qualifications **in the category identified for this project, will be disqualified from consideration for the project.**

ACCEPTANCE OF PROPOSAL:

The undersigned agrees to execute a Contract, being the Wayne State University standard form titled "Agreement Between Contractor and Owner for Construction" (see section 00500 of the bid documents), provided that we are notified of the acceptance of our Proposal within sixty (60) days of the date set for the opening thereof.

The undersigned below understands that the bid will be disqualified if the Prequalification information above is not completed in its entirety.

NAME OF COMPANY: _____

OFFICE ADDRESS: _____

PHONE NUMBER: _____ DATE _____

FAX NUMBER: _____

SIGNED BY: _____
Signature

(Please print or type name here)

TITLE _____

EMAIL ADDRESS: _____ @ _____