

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
BID No. 2013-13
LANSCLAPING SERVICES
OCTOBER 07, 2013

ADDENDUM NO. 1

Subject

This addendum is to notify all parties taking part in BID 2013-13 that the Bid document will be changed. See below for details.

Changes

V – BID FORM:

Remove:

Entire document.

Remove:

V – BID FORM:

Entire document here attached.

Issue by

Should you have any questions, please contact me at (702) 207-8291 or via email at larry.silver@umcsn.com

Issued by:

Larry Silver
Sr. Contract Management Analyst
UMC

Acknowledgement

*****All Proposals submitted shall include a signed copy of this addendum acknowledging receipt and understanding. Addendums shall not count towards the page limitation.***

Signature: _____

Title: _____

Company Name: _____

Date Received: _____

V - BID FORM
UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
BID FORM
BID NO. 2013 - 13
UMC LANDSCAPING SERVICES

(NAME)

(ADDRESS)

I, THE UNDERSIGNED BIDDER:

1. Agree, if awarded this Contract, I will complete all work for which a Contract may be awarded and to furnish any and all labor, equipment, materials, transportation, and other facilities required for the services as set forth in the Bidding and Contract Documents.
2. Have examined the Contract Documents and the site(s) for the proposed work and satisfied themselves as to the character, quality of work to be performed, materials to be furnished and as to the requirements of the specifications.
3. Have completed all information in the blanks provided and have submitted the following within this Bid:
 - a. Have listed the name of each Subcontractor which will be paid an amount exceeding 5% of the Total Base Bid amount.
 - b. Attached a bid security (in the form of, at my option, a Cashiers Check, Certified Check, Money Order, or Bid Bond in favor of the Owner in the amount of 5% of the Total Base Bid amount.
 - c. Have marked on the space indicating whether I am claiming a HUD Section 3 preference.
4. I acknowledge that if I am one of the 3 apparent low bidders at the bid opening, and if I have listed Subcontractor(s) pursuant to NRS 338.141, I must submit Bid Attachment 2 within two hours after completion of the bid opening pursuant to the Instructions to Bidders, and I understand that hand delivery is recommended, and Owner shall not be responsible for lists received after the 2 hour time limit, regardless of the reason. This Attachment will be time stamped by the Purchasing and Contracts Division. I understand that submission after the 2 hour time limit is not allowed and will be returned to me and the bid may be deemed non-responsive. I acknowledge that for:
 - a. Projects **UNDER** \$5,000,000
 - 1) I need to list **only those subcontractors** which will provide labor/improvements exceeding \$50,000.00.
 - a. Projects **EXCEEDING** \$5,000,000
 - 1) I need to list only subcontractors which will provide labor/improvements exceeding 1% of the prime contractor's total base bid amount, or \$50,000.00, whichever is greater.
5. I acknowledge that if notified that I am the low bidder, I must submit the Disclosure of Ownership/Principals form within 24 hours of request.
6. I acknowledge that if I am one of the three apparent low bidder(s) for the base bid at the bid opening, I must submit the Bid Attachment 3, Schedule of Values, via hand delivery, or by fax by 12:00 Noon of the next working day.
7. Upon faxed or mailed receipt of a Notice of Intent to Award the Contract, I will provide the following submittals within 7 days from receipt of the Notice:
 - a. Performance Bond, Labor and Material Payment Bond and a Guaranty Bond, for 100% of the Contract amount as required.
 - b. Certificates of insurance for Commercial General Liability in the amount of \$1,000,000, Automobile Liability in the amount of \$1,000,000, and workers' compensation insurance issued by an insurer qualified to underwrite workers' compensation insurance in the State of Nevada, as required by law.

8. I acknowledge that if I do not provide the above submittals on or before the 7th calendar day after receipt of the Notice of Intent to Award, or do not keep the bonds or insurance policies in effect or allows them to lapse during the performance of the Contract, I will pay over to the Owner the amount of **\$100.00** per day as liquidated damages.
9. I confirm this bid is genuine and is not a sham or collusive, or made in the interest of, or on behalf of any person not herein named, nor the Bidder in any manner sought to secure for themselves an advantage over any other bidder.
10. I further propose and agree that if my bid is accepted, I will commence to perform the work called for by the contract documents and I will complete all work within the calendar days **specified in the General Conditions.**
11. I further propose and agree that I will accept as full compensation for the work to be performed the price written in the Bid Schedule below.
12. I have carefully checked the figures below and the Owner will not be responsible for any error or omissions in the preparation or submission of this Bid.
13. I agree no verbal agreement or conversation with an officer, agent or employee of the owner, either before or after the execution of the contract, shall affect or modify any of the terms or obligations of this Bid.
14. I am responsible to ascertain the number of addenda issued, and I hereby acknowledge receipt of the following addenda:

Addendum No. _____	dated, _____	Addendum No. _____	dated, _____
Addendum No. _____	dated, _____	Addendum No. _____	dated, _____
Addendum No. _____	dated, _____	Addendum No. _____	dated, _____
Addendum No. _____	dated, _____	Addendum No. _____	dated, _____
Addendum No. _____	dated, _____	Addendum No. _____	dated, _____

16. I agree to perform all work described in the Exhibit A and other documents for the amounts quoted below:

ITEM NUMBER	ITEM DESCRIPTION	LUMP SUM
1.	LANDSCAPING SERVICES (All labor, equipment, management and overhead fees) Contract Year 1	\$
2.	MISCELLANEOUS parts / supplies / vegetation / materials (authorized by owner) Contract Year 1	\$ 20,000.00
3.	LANDSCAPING SERVICES (All labor, equipment, management and overhead fees) Contract Year 2	\$
4.	MISCELLANEOUS parts / supplies / vegetation / materials (authorized by owner) Contract Year 2	\$ 20,000.00
5.	LANDSCAPING SERVICES (All labor, equipment, management and overhead fees) Contract Year 3	\$
6.	MISCELLANEOUS parts / supplies / vegetation / materials (authorized by owner) Contract Year 3	\$ 20,000.00
	TOTAL BID AMOUNT	\$

ATTACHMENTS TO BID FORM

FAILURE TO SUBMIT REQUIRED ATTACHMENTS AS LISTED BELOW MAY RESULT IN REJECTION OF BID.

Bid bond is attached.

Bidder is responsible to ascertain the number of Addenda issued and hereby acknowledges receipt of the following Addendum:

FAILURE TO ACKNOWLEDGE ALL ADDENDA ISSUED AND USE THE CORRECT BID FORM AS REQUIRED, MAY RESULT IN REJECTION OF BID.

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

Bidder hereby offers and agrees to furnish the material(s) and service(s) in compliance with all terms, conditions, specifications, and amendments in the Invitation to Bid and any written exceptions in the offer. We understand that the items in this Invitation to Bid, including, but not limited to, all required certificates are fully incorporated herein as a material and necessary part of the contract.

The undersigned hereby states, under penalty of perjury, that all information provided is true, accurate, and complete, and states that he/she has the authority to submit this bid, which will result in a binding contract if accepted by Clark County, Nevada.

I certify, under penalty of perjury, that I have the legal authorization to bind the firm hereunder:

_____ SIGNATURE OF AUTHORIZED REPRESENTATIVE	_____ LEGAL NAME OF FIRM
_____ NAME AND TITLE OF AUTHORIZED REPRESENTATIVE (PRINT OR TYPE)	_____ ADDRESS OF FIRM
_____ PHONE NUMBER OF AUTHORIZED REPRESENTATIVE	_____ CITY, STATE ZIP
_____ EMAIL ADDRESS	_____ DATE

BUSINESS LICENSE INFORMATION

_____ CURRENT STATE:	_____ LICENSE NO.	_____ ISSUE DATE:	_____ EXPIRATION DATE:
_____ CURRENT COUNTY:	_____ LICENSE NO.	_____ ISSUE DATE:	_____ EXPIRATION DATE:
_____ CURRENT CITY:	_____ LICENSE NO.	_____ ISSUE DATE:	_____ EXPIRATION DATE:

NEVADA CONTRACTOR'S LICENSE NUMBER: _____

DOLLAR LIMIT : _____