

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
BID NO. 2009-28  
Sterile Processing Department Remodel

March 8, 2010

**ADDENDUM NO. 4**

**Instructions to Bidders**

1) **Section 11.C. Delete this section in its entirety and replace with the following:**

**C. Award Determination**

All responsive and responsible bids received are considered firm offers for 90 calendar days after the date of bid opening and may be considered for award. Award shall be made to the lowest responsive, responsible and/or best bidder based upon the Total Base Bid, plus the funding availability of Bid Option(s) One, Two, Three, etc. exercised in sequential order. Bidders must quote all items and agree to provide the bonds and insurance specified herein to be responsive and considered for award. Owner reserves the right to accept or reject on a Lot-by-Lot basis including the election of options in sequential order and subject to the availability of funds, whichever is in the best interest of the Owner.

The determination of award may involve all or some of the following factors: price; bidder preference, if applicable; conformity to specifications; financial ability to meet the contract; previous performance; facilities and equipment; experience; and other objective and accountable factors which are reasonable and in accordance with the requirements of the Nevada Revised Statutes.

Rejection of bid(s) may be recommended to the Governing Body for any of (but not limited to) the following causes:

1. Failure to use the Bid Form(s) furnished by the Owner.
2. Lack of signature by an authorized representative on the Bid Form(s).
3. Failure to properly complete the Bid Form(s).
4. Evidence of collusion among Bidders.
5. Omission of Bid Security, in an acceptable form.
6. Unauthorized alteration of Bid Form(s).
7. Failure to fill out the Disclosure of Ownership/Principals form, if requested.

Owner reserves the right to waive any minor informality or irregularity.

2) **Add Section 19 Bid Option Item(s) to Instruction to Bidders**

**19. BID OPTION ITEM(S)**

This document contains a Bid Option Item(s) which is shown in the specifications and drawings under the appropriate sections, but is not to be included in the Total Base Bid amount. The item(s) is/are identified by a number designation and description. It is the responsibility of each Bidder to determine to its own satisfaction the limits and extent of the work for the item and quote a unit price and/or lump sum on the Bid Form pages. Where a Bid Option requires deleting all or a portion of the specified item and adding or substituting an optional item, the Bid Amount submitted for the Bid Option shall be the net cost difference between what is added and what is deleted. The(se) item(s) may be exercised by the Owner in sequential order only subject to the availability of funds.

## **Bid Form**

Please use the newly revised Bid Form revised 3/8/2010 (attached) when submitting your bid. If you do not use the revised Bid Form, your bid will be deemed non-responsive. Bid Option 1 was added to the Bid Form (Deletion of all work associated with Phase X, Peds Pre-op Area, as detailed on Drawing No. G123, from Base Bid and to be bid separated as Bid Option 1)

## **Questions and Answers**

Q1 Drawing S200 shows fiberglass grating for the platforms. The treads are called out on drawing S311 and reads for additional information to see Architectural drawings. The architectural drawings call both the landings and treads as Metal Grate and to see Structural.

- a. What is the size and material type for the treads?
- b. Are the landings fiberglass or metal?
- c. Are risers required? If so please provided added information.
- d. Are there specifications for the fiberglass grating?

A1 a. **1-1/2" x 3/16" Steel grating, GCM 1-150. Treads to be of the same material as the landings. Size is on the drawings.**  
b. **Steel.**  
c. **Risers are required. They can be of a solid material metal attached to the tread by welding.**  
d. **No.**

Q2 Sections A5, B2, #1/A471 shows HSS tube reinforcing at the bottom of existing beams and to see structural. These do not show on the structural drawings. If these tubes are required, please size and locate.

A2 **These tubes are not required.**

Q3 On sheet PD121 the 3rd floor plumbing demo drawings indicates 5 plumbing lines in rooms 307 & 310 to be demoed. However, this would require demo of existing ceiling and construction of new drywall ceiling. This work is not indicated on the documents. Please clarify the Owner's intent.

A2 **PD121 note number 18 states "Abandon-in-place existing piping and components to be removed when located above hard ceiling that are not included in demolition work as indicated on Architectural work phasing plan. Coordinate with Architect and General Contractor."**

**The Lines in rooms 307 and 310 can be Abandoned-in-place. There is no intent on the Phasing or the Reflected ceiling plan to remove the ceiling in these areas.**

Q4 Details C5, D1, E5/A472 indicate treads and landings to be metal. The grating call out on the structural drawings indicate the grating to be T-bar grate #MST 3320, which is a fiberglass grate. According to McNichols, this grating will NOT span the required areas or meet the performance requirements as indicated in Specification 05510.

A4 **See answer to A1.a above.**

Q5 The slotted perforated metal at rail is made in a 36" width with slots running the length of the sheet. The perforated metal at the stair rail indicate the slots to run parallel to straight rail, this will require splices at perforated metal at rail panels.

A5 **The perforated slots at the treads and risers can go parallel with the angle of the stair**

## **Revised Specifications.**

1) **REVISE:** Specification Section 14210 Electrical Traction Elevator to read the Following:

Section 3.6 Description of Elevator

**G.** Rated Capacity : **4000 lbs**

**L.** Entrance width & Type : **4'-0"** & left Opening

**Q-2** Car Enclosure: As follows:

a. Inside Dimensions: As follows:

- 1) Width : **5'-6 3/16"**
- 2) Depth: **7'-7 7/16"**
- 3) Height: **8'-0"**

**Q.3** Hoist way Entrances: As follows:  
a. Size: **48"**

**2)** Provide the following note to **Drawing A421 detail A1**.

Provide an Access Panel 4'-0" to the North of Elevator Shaft for Elevator inspections. The Access Panel will have the same rating as the Shaft Wall Rating.

**Bid Opening Date**

The Bid Opening date of March 9, 2010 at 3:00:00 p.m. (Pacific) has been **changed to March 18, 2010 at 2:00:00 pm (Pacific)**.

Should you have any questions, please contact me at (702) 383-3606 or via email at [jim.haining@umcsn.com](mailto:jim.haining@umcsn.com).

Issued by:

Jim Haining, CPSM, C.P.M., A.P.P.  
Purchasing Administrator, Contracts Management

Attachments: Revised Bid Form (Revised 3/8/2010)

cc: Cindi Roehr  
David Brice  
Cheryl Griggs

**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
 BID FORM (Revised 3/8/2010)**

**BID NO. 2009-28  
 Sterile Processing Department Remodel  
 PWP NUMBER: CL-2010-114**

(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.
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 Contracts Management Department. 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.
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, Explosion, Collapse and Underground in the amount of \$1,000,000, Installation Floater, 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 **\$200.00** 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 on the date specified in the Notice to Proceed 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, \_\_\_\_\_

I agree to perform all work described in the drawings, specifications, and other documents for the amount quoted below:

ITEM NUMBER	ITEM DESCRIPTION	LUMP SUM
1.	STERILE PROCESSING DEPARTMENT REMODEL, AS SPECIFIED, LESS ALL WORK ASSOCIATED WITH PHASE X (PEDS PRE-OP) AS DETAILED ON DRAWING NO. G123	\$
2.	STORMWATER POLLUTION, AS SPECIFIED	\$
3.	DUST CONTROL, AS SPECIFIED	\$
	TOTAL BASE BID AMOUNT	
4.	CONSTRUCTION CONFLICTS AND ADDITIONAL WORK	\$ 100,000.00
5.	PERMITS AND FEES BID ALLOWANCE	\$ 10,000.00
	TOTAL BID AMOUNT	\$

**BID OPTIONS**

THE OWNER MAY EXERCISE THE FOLLOWING ITEMS IN SEQUENTIAL ORDER ONLY SUBJECT TO THE AVAILABILITY OF FUNDS. THE BID OPTION PRICES QUOTED SHALL REMAIN FIRM FOR THE PERIOD OF 90 CALENDAR DAYS, AS DETAILED IN THE INSTRUCTIONS TO BIDDERS.  
 WHERE A BID OPTION REQUIRES DELETING ALL OR A PORTION OF THE SPECIFIED ITEM AND ADDING OR SUBSTITUTING AN OPTIONAL ITEM, THE BID AMOUNT SUBMITTED FOR THE BID OPTION SHALL BE THE NET COST DIFFERENCE BETWEEN WHAT IS ADDED AND WHAT IS DELETED.

BID OPTION	ITEM DESCRIPTION	TOTAL
1.	Delete all work associated with Phase X (Peds Pre-op) as detailed on Drawing No. G123 from your Base Bid Amount and Bid it separately as Bid Option 1.	\$



15. BUSINESS ENTERPRISE INFORMATION:

The Prime Contractor submitting this Bid is a  MBE  WBE  PBE  SBE  NBE  LBE as defined in the Instructions to Bidders.

16. BIDDER'S PREFERENCE

(Check box if applicable) I do have a Certificate of Eligibility to receive preference in bidding.

**Bidders who do not check the above box shall have 24 hours after the Owner's request to submit a copy of their valid certificate of eligibility.**

17.

NAME OF BIDDER (PRINT OR TYPE)

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LEGAL NAME OF FIRM AS IT WOULD APPEAR IN CONTRACT

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ADDRESS OF FIRM

---

CITY, STATE, ZIP CODE

---

TELEPHONE NUMBER

---

FAX NUMBER

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**NEVADA STATE CONTRACTOR'S BOARD LICENSE INFORMATION:**

I certify that the license(s) listed below will be the license(s) used to perform the majority of the work on this project.

LICENSE NUMBER: \_\_\_\_\_

LICENSE CLASS: \_\_\_\_\_

LICENSE LIMIT: \_\_\_\_\_

ONE TIME LICENSE LIMIT INCREASE \_\_\_\_\_  YES. DATE REQUESTED \_\_\_\_\_:

TODAY'S DATE: \_\_\_\_\_

SIGNATURE OF BIDDER (AUTHORIZED REPRESENTATIVE)

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**BID ATTACHMENT 1  
BID BOND**

**IMPORTANT: SURETY COMPANIES EXECUTING BONDS MUST BE LICENSED TO ISSUE SURETY BY THE STATE OF NEVADA INSURANCE DIVISION PURSUANT TO NEVADA REVISED STATUTE 683A AND ISSUED BY AN APPOINTED PRODUCER OF INSURANCE PURSUANT TO NEVADA REVISED STATUTE 683A. INDIVIDUAL SURETY BONDS ARE NOT ACCEPTABLE.**

KNOW ALL MEN BY THESE PRESENTS,

That we, the undersigned, \_\_\_\_\_ as Principal Contractor, and \_\_\_\_\_ as Surety, are hereby held and firmly bound unto UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA as OWNER in the penal sum of \_\_\_\_\_ for the payment of which, well and truly to be made, were hereby jointly and severally bind ourselves, successors and assigns.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

The condition of the above obligation is such that whereas the Principal has submitted to UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA a certain BID, attached hereto and hereby made a part hereof to enter into a contract in writing, for **BID NO. 2009-28, Sterile Processing Department Remodel.**

NOW, THEREFORE,

- (a) If said BID shall be rejected, or
- (b) If said BID shall be accepted and the Principal Contractor shall deliver a insurance certificate and bonds pursuant to the forms attached hereto properly completed in accordance with said BID, and shall furnish a BOND for their faithful performance of said Contract, and for the payment of all persons performing labor or furnishing materials in connection therewith, and shall in all other respects perform the Agreement created by the acceptance of said BID,

then this obligation shall be void, otherwise the same shall remain in force and effect: it being expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.

The Surety, for value received, hereby stipulates and agrees that the obligations of said Surety and its BOND shall be in no way impaired or affected by any extension of the time within which the OWNER may accept such BID; and said Surety does hereby waive notice of any such extension.

IN WITNESS WHEREOF, the Principal and the Surety have hereunto set their hands and the Surety has caused their seal to be hereto affixed and these presents to be signed by their proper officers, the day and year first set forth above.

Bond must be acceptable to University Medical Center of Southern Nevada.

(SEAL AND NOTARIAL ACKNOWLEDGMENT OF SURETY)

\_\_\_\_\_  
(Principal Contractor)

\_\_\_\_\_  
Surety: \_\_\_\_\_  
\_\_\_\_\_  
(State of Nevada, License Number)

\_\_\_\_\_  
(Authorized Representative and Title)

\_\_\_\_\_  
(Appointed Agent Name)

By: \_\_\_\_\_  
(Signature)

By: \_\_\_\_\_  
(Signature)

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_