

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 1</b>
<b>CAPITAL PROJECT NUMBER: 4466</b>		<b>BID NUMBER: RFB-RC-2021-4466-001</b>
<b>PROJECT: Building E Utility Plant Renovations and Improvements</b>		

## APPENDIX A

**BID QUESTION FORM**

**GENERAL CONSTRUCTION BID FORM**

**ELECTRICAL CONSTRUCTION BID FORM**

**MECHANICAL & PLUMBING CONSTRUCTION BID FORM**

**OTHER BID FORM**

<b>COUNTY OF ROCKLAND</b> <b>FACILITIES MANAGEMENT</b> BLDG. A., 2 <sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970 PHONE: 845-364-2958 / FAX: 845-364-3810		<b>PAGE: 2</b>
<b>CAPITAL PROJECT NUMBER: 4466</b>		<b>BID NUMBER: RFB-RC-2021-4466-001</b>
<b>PROJECT: Building E Utility Plant Renovations and Improvements</b>		

**BID QUESTION FORM**

**ALL QUESTIONS PERTAINING TO THIS SOLICITATION MUST BE  
SUBMITTED IN WRITING  
QUESTIONS WILL NOT BE ADDRESSED VERBALLY**

**PLEASE USE THIS FORM AND EMAIL TO: FMCapital@co.rockland.ny.us**

**Attention: ROBERT H. GRUFFI, P.E., LEED AP  
DIRECTOR, FACILITIES MANAGEMENT**

**WE WILL RESPOND AS SOON AS POSSIBLE.**

**Bid No.** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_

**Fax No.** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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**CONTRACTOR’S REPRESENTATIVE**\_\_\_\_\_

<b>COUNTY OF ROCKLAND</b> <b>FACILITIES MANAGEMENT</b> BLDG. A., 2 <sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970 PHONE: 845-364-2958 / FAX: 845-364-3810		<b>PAGE: 3</b>
<b>CAPITAL PROJECT NUMBER: 4466</b> <b>PROJECT: Building E Utility Plant Renovations and Improvements</b>	<b>BID NUMBER: RFB-RC-2021-4466-001</b>	

**BID PROPOSAL FORM - GENERAL CONSTRUCTION**

**TO THE COUNTY OF ROCKLAND**

The Bidder hereby offers and agrees to furnish the material or service in compliance with all terms, the scope of work, conditions, specifications and amendments in the Invitation to Bid and Bidding Documents.

The Bidder hereby acknowledges that they have received a copy of the County's Equal Employment Opportunity Policy and that their rights and responsibilities concerning it were explained in the County's EEO Policy. A copy of the County's EEO policy is available at: [www.rocklandgov.com/files/3615/6924/6652/execorder\\_2019-02\\_letterhead.pdf](http://www.rocklandgov.com/files/3615/6924/6652/execorder_2019-02_letterhead.pdf)

Under penalty of perjury, the Bidder hereby states that all information it provided is true, accurate and complete and that the undersigned has the authority on behalf of the bidder to submit this Bid, which if accepted by the County, will result in a binding contract with the Bidder.

The undersigned acknowledges that the Bidder has examined the Bidding Documents and has become thoroughly familiar with the Project and the required Work, and that the Bidder possesses all requisite qualifications and licenses, therefore; and will provide all materials, labor, supervision, transportation, and equipment necessary or required, for the completion of the Work detailed in the Contract Documents, entitled:

CAPITAL PROJECT NO. 4466  
 PROJECT: Building E Utility Plant Renovations and Improvements

The Bidder acknowledges receipt of all Addenda as of the Bid submission date (the last number of which is \_\_\_\_\_.)

We submit the following bid: \$ \_\_\_\_\_

\_\_\_\_\_

BID WRITTEN OUT

Date \_\_\_\_\_

\_\_\_\_\_  
 Company Name

CORPORATE SEAL

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City                      State              Zip

Federal Identification Number: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_  
 E-Mail Address

\_\_\_\_\_  
 Signature of Person Authorized to Sign                      Title                      Printed Name

**THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID**

<b>COUNTY OF ROCKLAND</b> <b>FACILITIES MANAGEMENT</b> BLDG. A., 2 <sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970 PHONE: 845-364-2958 / FAX: 845-364-3810		<b>PAGE: 4</b>
<b>CAPITAL PROJECT NUMBER: 4466</b> <b>PROJECT: Building E Utility Plant Renovations and Improvements</b>	<b>BID NUMBER: RFB-RC-2021-4466-001</b>	

**BID PROPOSAL FORM – ELECTRICAL**

**TO THE COUNTY OF ROCKLAND**

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Under penalty of perjury, the Bidder hereby states that all information it provided is true, accurate and complete and that the undersigned has the authority on behalf of the bidder to submit this Bid, which if accepted by the County, will result in a binding contract with the Bidder.

The undersigned acknowledges that the Bidder has examined the Bidding Documents and has become thoroughly familiar with the Project and the required Work, and that the Bidder possesses all requisite qualifications and licenses, therefore; and will provide all materials, labor, supervision, transportation, and equipment necessary or required, for the completion of the Work detailed in the Contract Documents, entitled:

CAPITAL PROJECT NO. 4466  
 PROJECT: Building E Utility Plant Renovations and Improvements

The Bidder acknowledges receipt of all Addenda as of the Bid submission date (the last number of which is \_\_\_\_\_.)

We submit the following bid: \$\_\_\_\_\_

\_\_\_\_\_

BID WRITTEN OUT

Date\_\_\_\_\_

\_\_\_\_\_  
 Company Name

CORPORATE SEAL

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City                      State              Zip

Federal Identification Number: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_  
 E-Mail Address

\_\_\_\_\_  
 Signature of Person Authorized to Sign                      Title                      Printed Name

**THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID**

<b>COUNTY OF ROCKLAND</b> <b>FACILITIES MANAGEMENT</b> BLDG. A., 2 <sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970 PHONE: 845-364-2958 / FAX: 845-364-3810		<b>PAGE: 5</b>
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**BID PROPOSAL FORM – MECHANICAL & PLUMBING**

**TO THE COUNTY OF ROCKLAND**

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Under penalty of perjury, the Bidder hereby states that all information it provided is true, accurate and complete and that the undersigned has the authority on behalf of the bidder to submit this Bid, which if accepted by the County, will result in a binding contract with the Bidder.

The undersigned acknowledges that the Bidder has examined the Bidding Documents and has become thoroughly familiar with the Project and the required Work, and that the Bidder possesses all requisite qualifications and licenses, therefore; and will provide all materials, labor, supervision, transportation, and equipment necessary or required, for the completion of the Work detailed in the Contract Documents, entitled:

CAPITAL PROJECT NO. 4466  
 PROJECT: Building E Utility Plant Renovations and Improvements

The Bidder acknowledges receipt of all Addenda as of the Bid submission date (the last number of which is \_\_\_\_\_.)

We submit the following bid: \$ \_\_\_\_\_

\_\_\_\_\_

**BID WRITTEN OUT**

Date \_\_\_\_\_

\_\_\_\_\_  
 Company Name

CORPORATE SEAL

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City                      State              Zip

Federal Identification Number: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_  
 E-Mail Address

\_\_\_\_\_  
 Signature of Person Authorized to Sign                      Title                      Printed Name

**THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID**

<b>COUNTY OF ROCKLAND</b>		<b>PAGE: 6</b>
<b>FACILITIES MANAGEMENT</b>		
BLDG. A., 2 <sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970		
PHONE: 845-364-2958 / FAX: 845-364-3810		
<b>CAPITAL PROJECT NUMBER: 4466</b>		<b>BID NUMBER: RFB-RC-2021-4466-001</b>
<b>PROJECT: Building E Utility Plant Renovations and Improvements</b>		

**THIS FORM MUST BE COMPLETED AND SUBMITTED THE BID**

**APPENDIX B**

**PROJECT LABOR AGREEMENT**

- ☐ Project Labor Agreement applies to this Project.  
See following Project Labor Agreement.  
Project Labor Agreement form must be completed.  
(Page 27 of the General Conditions)
  
- ☒ Project Labor Agreement does not apply to this Project.  
Do not complete the Project Labor Agreement Form

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 7</b>
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<b>PROJECT: Building E Utility Plant Renovations and Improvements</b>		

**APPENDIX C**

**SUPPLEMENTAL GENERAL CONDITIONS**

- ☐ Supplemental General Conditions apply to this Project.  
See following Supplemental General Conditions.
  
- ☐ Supplemental General Conditions do not apply to this Project.

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 8</b>
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## APPENDIX D

## WAGE RATES



<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 9</b>
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**APPENDIX E**

**PLANS AND SPECIFICATIONS**

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 10</b>
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**APPENDIX F**

**FEDERAL REQUIREMENTS (GRANTS)**

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 11</b>
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**APPENDIX G**

**STATE REQUIREMENTS (GRANTS)**

<p align="center"><b>COUNTY OF ROCKLAND</b>  <b>FACILITIES MANAGEMENT</b>          BLDG. A., 2<sup>nd</sup> FLOOR, 50 SANATORIUM RD, POMONA, NY 10970          PHONE: 845-364-2958 / FAX: 845-364-3810</p>		<b>PAGE: 12</b>
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## APPENDIX H

### OTHER