

SECTION 004323 - ALTERNATES FORM

1.1 BID INFORMATION

- A. Bidder: _____.
- B. Prime Contract: _____.
- C. Project Name: Columbia University Irving Medical Center - Interventional Radiology
- D. Project Location: 155 White Plains Road, Tarrytown, NY, 10591
- E. Owner: Columbia University Irving Medical Center
- F. Owner Project Number:
- G. Architect: Gensler
- H. Architect Project Number: 006.3757.000

1.2 BID FORM SUPPLEMENT

- A. This form is required to be attached to the Bid Form.

1.3 DESCRIPTION

- A. The undersigned Bidder proposes the amount below be added to or deducted from the Base Bid if particular alternates are accepted by Owner. Amounts listed for each alternate include costs of related coordination, modification, or adjustment.
 - 1. Cost-Plus-Fee Contract: Alternate price given below includes adjustment to Contractor's Fee.
- B. If the alternate does not affect the Contract Sum, the Bidder shall indicate "NO CHANGE."
- C. If the alternate does not affect the Work of this Contract, the Bidder shall indicate "NOT APPLICABLE."
- D. The Bidder shall be responsible for determining from the Contract Documents the affects of each alternate on the Contract Time and the Contract Sum.

- E. Owner reserves the right to accept or reject any alternate, in any order, and to award or amend the Contract accordingly within 60 days of the Notice of Award unless otherwise indicated in the Contract Documents.
- F. Acceptance or non-acceptance of any alternates by the Owner shall have no effect on the Contract Time unless the "Schedule of Alternates" Article below provides a formatted space for the adjustment of the Contract Time.

1.4 SCHEDULE OF ALTERNATES

- A. Alternate No. 1: Auto Operators : Provide add alternate for providing auto operators at Door #101A, 103, 105 & 117. Incorporate any electrical wiring or associated pricing required to incorporate Auto Operators at these door locations.
 - 1. ADD___ DEDUCT___ NO CHANGE___ NOT APPLICABLE___.
 - 2. _____ Dollars (\$_____).
- B. ADD___ DEDUCT___ calendar days to adjust the Contract Time for this alternate. Alternate No. 2: Digilocks at Lockers: Provide add alternate for providing digilocks and USB power at Patient & Staff Lockers. Incorporate any electrical wiring or associated pricing required to incorporate Digilocks and USB power at these door locations.
 - 1. ADD___ DEDUCT___ NO CHANGE___ NOT APPLICABLE___.
 - 2. _____ Dollars (\$_____).

Retain subparagraph below if provision for adjustment of the Contract Time for the alternate is required.

- C. ADD___ DEDUCT___ calendar days to adjust the Contract Time for this alternate.

1.5 SUBMISSION OF BID SUPPLEMENT

- A. Respectfully submitted this ___ day of _____, 2021.
- B. Submitted By: _____ (Insert name of bidding firm or corporation).
- C. Authorized Signature: _____ (Handwritten signature).
- D. Signed By: _____ (Type or print name).
- E. Title: _____ (Owner/Partner/President/Vice President).

Gensler
006.3757.000

October 4th, 2021
Issue for Bid

**CUIMC - Interventional
Radiology**
Tarrytown, New York

END OF DOCUMENT 004323