

**Note: The bidder is asked to use either black ink or typewriter (black ribbon) in completing this proposal form. Each line item amount must be completed. Failure to do so will be grounds for disqualification of the bidder.**

**BASE BID: Contract M – Heating, Ventilation, Air Conditioning Work**

**ITEM 1 – BONDS and INSURANCES**

(written in words) \_\_\_\_\_ ( \$ )

**ITEM 2 – DIVISION 1 – GENERAL REQUIREMENTS**

(written in words) \_\_\_\_\_ ( \$ )

**ITEM 3 – DIVISION 1 – PROJECT SUPERVISION**

(written in words) \_\_\_\_\_ ( \$ )

**ITEM 4 – DIVISION 23 – HVAC PIPING (INCLUDING MATERIALS, INSULATION, PIPE HANGERS AND SUPPORTS, IDENTIFICATION, AND LABOR)**

(written in words) \_\_\_\_\_ ( \$ )

**ITEM 5 – DIVISION 23 – AIR HANDLING SYSTEMS (INCLUDING PACKAGED ROOFTOP UNITS, EXHAUST FANS, DUCTWORK, INSULATION, AND IDENTIFICATION)**

(written in words) \_\_\_\_\_ ( \$ )

**ITEM 6 – PROJECT CLOSEOUT**

(written in words) \_\_\_\_\_ ( \$ )

**ALLOWANCE HA-1 – ALLOWANCE FOR GENERAL CONTINGENCY**

(written in words) \_\_\_\_\_ Twenty Thousand ( \$20,000 )

**TOTAL BASE BID ( ITEMS 1 – 6 INCLUSIVE, PLUS ALLOWANCE HA-1 )**  
(written in words) \_\_\_\_\_ ( \$ )

**Note: The HASTINGS-ON-HUDSON UNION FREE SCHOOL DISTRICT is exempt from Federal, New York State and local taxes. TOTAL AMOUNT BID shall be exclusive of all taxes.**

EACH BIDDER SHALL SUBMIT WITH IT'S BID A SEPARATE SEALED LIST THAT NAMES THE SUBCONTRACTORS THAT THE BIDDER WILL USE TO PERFORM WORK AND THE AGREED UPON AMOUNT TO BE PAID FOR A.) HEATING, VENTILATION AND AIR-CONDITIONING WORK, B.) PLUMBING WORK AND C.) ELECTRICAL WORK. AFTER THE LOW BID IS ANNOUNCED, THE SEALED LIST OF SUBCONTRACTORS SUBMITTED BY THE APPARENT LOW BIDDER SHALL BE OPENED AND THE NAMES OF THE SUBCONTRACTORS ANNOUNCED. ANY CHANGE OF



ALT-H2 (Add)	Provide Add/Deduct Alternate for Second Shift (3:30 - 11:00pm) work for the entire project. All work to be performed after school hours	(\$ )
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**TOTAL BID ( ITEMS 1–6 INCLUSIVE, PLUS ALLOWANCE HA-1, AND ALTERNATES H1 and H2)**

(written in words) \_\_\_\_\_ (\$ )

### **SITE SUPERVISION**

**THE SUCCESSFUL CONTRACTOR IS TO PROVIDE FULL TIME SITE SUPERVISION FOR HIS OR HER STAFF, SUBCONTRACTORS AND SUPPLIERS FOR THE DURATION OF THIS PROJECT. A COMPETENT SUPERINTENDENT SHALL BE IN ATTENDANCE AT THE JOB SITE AT ALL TIMES WHEN WORK IS BEING PERFORMED UNDER THEIR CONTRACT. THE SUPERINTENDENT IS RESPONSIBLE TO VISIT THE JOB SITE DAILY WHEN WORK IS NOT BEING PERFORMED UNDER THEIR CONTRACT AND TO MONITOR THE OVERALL CONSTRUCTION PROGRESS. A QUALIFIED SITE SUPERINTENDENT MUST HAVE THE AUTHORITY TO REPRESENT AND MAKE DECISIONS FOR HIS OR HER COMPANY WITH REGARDS TO THE SUBJECT JOB, MUST BE ABLE TO GIVE GUIDANCE AND DIRECTION TO EMPLOYEES, SUBCONTRACTORS AND SUPPLIERS, AND MUST BE KNOWLEDGEABLE ABOUT THE WORK TO BE PROVIDED. FAILURE TO PROVIDE A QUALIFIED SITE SUPERINTENDENT AT THE JOB SITE SHALL SUBJECT SAID PRIME CONTRACTOR TO A PENALTY OF \$1,000 PER DAY FOR EVERY OCCURRENCE.**

### **TIME OF COMPLETION**

**ALL WORK UNDER THIS CONTRACT SHALL BE COMPLETED BETWEEN THE FOLLOWING HOURS, IN ACCORDANCE WITH THE FOLLOWING DATES:**

**WORK DAYS: Monday – Saturday**

**WORK HOURS: 7:00 AM - 8:00 PM**

**CONSTRUCTION START DATE: September 14, 2021**

**SUBSTANTIAL COMPLETION: February 15, 2022**

**FINAL COMPLETION: March 1, 2022**

**IF NECESSARY, WEEKEND, HOLIDAY AND EVENING WORK SHALL BE PROVIDED TO ENSURE THE COMPLETION DATES LISTED ABOVE, AT THE SOLE COST AND EXPENSE OF THE BIDDER.**

FAILURE OF THE CONTRACTOR TO COMPLETE WORK BY THE SPECIFIED TIME SHALL SUBJECT HIM/HER TO LIQUIDATED DAMAGES AS SET FORTH IN ARTICLE 13 OF THE GENERAL CONDITIONS.

THE ARCHITECT/ENGINEER SHALL ACT AS THE RECORD KEEPER OF CONTRACT DAYS; HE WILL BE THE SOLE JUDGE OF DELAYS CAUSED BY WEATHER. ONLY WEATHER DELAYS, AS ADJUDGED BY THE ARCHITECT/ENGINEER, WILL BE CONSIDERED FOR EXTENSIONS OF THE CONSTRUCTION PERIOD. THE CONTRACTOR SHALL SUBMIT A BI-WEEKLY REQUEST FOR DELAYS DUE TO WEATHER TO THE ARCHITECT/ENGINEER FOR APPROVAL. NO OTHER DELAY CLAIMS WILL BE ACCEPTED, FOR CREDIT TOWARDS THE PROJECT COMPLETION SCHEDULE, REGARDLESS OF THE SOURCE OF THE DELAY.

FAILURE OF THE CONTRACTOR TO COMPLETE ALL WORK SHOWN AND SPECIFIED IN THE CONTRACT DOCUMENTS, BY ALL OF THE SPECIFIED TIME FRAMES, SHALL SUBJECT THE CONTRACTOR TO LIQUIDATED DAMAGES, AS SET FORTH IN ARTICLE 13 OF THE GENERAL CONDITIONS OF THE CONTRACT FOR CONSTRUCTION, IN THE SUM OF ONE THOUSAND DOLLARS (\$1,000.00) PER CALENDAR DAY. SUCH DAMAGES WILL COMMENCE ON THE DAY AFTER THE COMPLETION DATE OR THE DAY AFTER ANY LISTED MILESTONE DATE IN THE NOTICE TO PROCEED.

WITHIN TEN (10) CONSECUTIVE CALENDAR DAYS AFTER THE DATE OF THE NOTICE OF AWARD, THE BIDDER SHALL EXECUTE THE CONTRACT AND FURNISH THE REQUIRED PERFORMANCE BOND, PAYMENT BOND AND INSURANCES.

**THE BOARD OF EDUCATION OF THE DISTRICT RESERVES THE RIGHT TO AWARD THIS CONTRACT TO OTHER THAN THE LOW BIDDER IF THE LAW SO PERMITS.**

THE UNDERSIGNED HEREBY ACKNOWLEDGES RECEIPT OF THE FOLLOWING ADDENDA (IF ANY):

<u>ADDENDUM NO.</u>	<u>DATED</u>
_____	_____
_____	_____

**SPECIFIC DAMAGES WILL BE ASSESSED AND DEDUCTED FROM AMOUNTS OTHERWISE DUE THE CONTRACTOR FOR ADDITIONAL INSPECTION (FIELD) AND CONTRACT ADMINISTRATION (OFFICE) TIME EXPENDED BY THE ARCHITECT/ENGINEER AND/OR OTHER CONSTRUCTION EMPLOYEE(S) HIRED TO ADMINISTER OR OBSERVE THE CONTRACT, SHOULD THE CONTRACTOR COMPLETE THE CONTRACT BEYOND THE CONTRACT COMPLETION PERIOD SPECIFIED ABOVE.**

**SUCH DEDUCTION SHALL BE IN ACCORDANCE WITH THE ARCHITECT, ENGINEER'S, AND/OR OTHER CONSTRUCTION EMPLOYEE(S) STANDARD HOURLY BILLING RATES IN EFFECT AT THE TIME FOR THE SCHOOL DISTRICT.**

**THE REQUIREMENTS OF THE PROPOSAL HAVE BEEN COMPLETELY READ, UNDERSTOOD AND ACKNOWLEDGED BY THE BIDDER.**

BIDDER: \_\_\_\_\_

BIDDER'S ADDRESS: \_\_\_\_\_

SIGNED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

Telephone number where the contractor or a competent representative can accept a telephone message and provide a reasonable reply as soon as possible, but not later than twenty-four (24) hours:

DAY: ( ) \_\_\_\_\_ NIGHT: ( ) \_\_\_\_\_

FAX: ( ) \_\_\_\_\_

FEDERAL I.D. NO. OR SOCIAL SECURITY NO.: \_\_\_\_\_