

## BUREAU OF PURCHASING, CITY OF YONKERS, ONE LARKIN CENTER, 3RD FL, YONKERS, NY 10701

## REQUEST FOR QUOTATION - This Is Not an Order

Date: 12/28/2020 REF. RFQ 2021-3733

**TO: Prospective Bidders** 

## PLACE OF PERFORMANCE: DPW CACACE JUSTICE CENTER - 104 SOUTH BROADWAY YONKERS, NY 10701

All price quotes must be firm, i.e., no price adjustments are allowed. All quotes are deemed F.O.B. Destination. Payment terms are Net 30 Days, unless a discount is offered for prompt payment. NOTE: The New York State Tax Law exempts the City of Yonkers from the payment of sales and use taxes on all purchases – tax exemption numbers are not issued to governmental entities. The Tax Law states that vendors are not required to collect tax when they are presented with the City's official Purchase Order or Contract document

| ESTIMATED START OF WORK | QUOTE NOT LATER THAN         | F. O. B.    |
|-------------------------|------------------------------|-------------|
| ASAP                    | Wednesday 01/13/2021 2:00 PM | DESTINATION |

NOTICE TO CONTRACTOR: If this work involves the employment of laborers, workmen, or mechanics under Articles 8 or 9 of the NYS Labor Law, the Contractor and its Subcontractors (if any) must pay these employees at least the Prevailing Wage rate and supplements, and these employees may not work more than the number of hours and days as set forth by the NYS Department of Labor per the Labor Law. The current NYS Prevailing Wage Schedule can be found at <a href="http://wpp.labor.state.ny.us/wpp/showFindProject.do?method=showlt">http://wpp.labor.state.ny.us/wpp/showFindProject.do?method=showlt</a>. All Plumbing and Electrical Contractors engaged on this project must be licensed by Westchester County (914-995-2000). Licensing information can be obtained at: <a href="http://consumer.westchestergov.com/trades/plumbers-and-electricians">http://consumer.westchestergov.com/trades/plumbers-and-electricians</a>. Bidder warrants under penalty of perjury that it's Quote was arrived at independently and without collusion aimed at restricting competition. Any resultant contract shall be construed in accordance with the laws of the State of New York. The Contractor will be required to provide at his own cost and expense any and all safety devices as may be required by the Project Manager. All work must comply with applicable Federal, State, and local laws, rules, and regulations. Contractor shall be responsible for removal of all waste material from the job site and for its lawful disposal. The Contractor shall, on a daily basis, thoroughly clean and keep clean the work site, all roadways, sidewalks, and other indoor and outdoor areas in connection with this Work. Required Insurance coverage: A) The Contractor shall provide Worker's Compensation Insurance and Employer's Liability Insurance as required under the New York State Worker's Compensation Law. B) The Contractor shall maintain Commercial General Liability Insurance, listing YONKERS as an additional insured, in the minimum amount of \$1,000,000 in the aggregate, \$500,000 ea

RETURN QUOTATION VIA EMAIL TO: DANIEL CANDEIAS - Office Tel.: 914-376-8056 Email: Daniel.Candeias@YonkersNY.gov

NY STATE PREVAILING RATE CASE NUMBER: PRC# 2020012735 - THE RESULTANT CONTRACT SHALL BE REGISTERED WITH THE NYS DEPT. OF LABOR. CERTIFIED PAYROLLS MUST BE SUBMITTED WITH PAYMENT REQUISITIONS. THE PREVAILING WAGE CASE NUMBER WILL BE LISTED ON THE AWARDED PURCHASE ORDER.

## Scope of work:

The City of Yonkers seeks a professional to repair a leaking boiler section (Weil McLain 88 series section) at the Cacace Justice Center – 104 South Broadway, Yonkers, NY 10701. The scope of work includes but may not be limited to:

- Disconnect the boiler section in order to gain access to the defective section.
- Replace the defective section with one new one.
- Furnish and install new seals between the sections which were disassembled.
- Fill and test.
- Remove all debris.

This boiler is one of two boilers; this work pertains to only to boiler #B1.

Site visit/inspection scheduled for Wednesday, January 6, 2021 at 11:00 AM at the Cacace Justice Center at 104 South Broadway, Yonkers, NY 10701. Please meet at the entrance to the court; parking is available on the street and also in the Cacace lot. Please contact me directly at <a href="mailto:daniel.candeias@yonkersny.gov">daniel.candeias@yonkersny.gov</a> to confirm that you will be attending. If you are running late at the time of the inspection/visit, please contact me directly at 914-434-8834.

Submission of a quote will be constructed as evidence that the contractor has thoroughly examined all the work to be done and familiarized themselves as to the nature and scope of work and difficulties that will be a part of its execution for the construction work and that later claims for labor, equipment or materials required for difficulties encountered which could have been averted had such an examination been made will not be recognized.

QUOTATION: (To be entered by Contractor) The undersigned CONTRACTOR, with a complete understanding of the aforementioned requirements, specifications, and the existing conditions at the Work Site (if required), and having inspected the Work Site (if required) and having become familiar with all conditions likely to be encountered affecting the cost and scheduling of the work, and having a complete understanding of the work specifications and insurance requirements hereby offers the amount set forth below as full compensation for all costs and expenses of completing the work in accordance with the terms, conditions and specifications presented herein and at the site inspection (if required), including, but not limited to all labor, materials, tools, equipment, overhead, fees and profit.

|  | Total Price in figure | es: \$        |        |              |  |
|--|-----------------------|---------------|--------|--------------|--|
|  | Total Price in word   | s: \$         |        |              |  |
|  | Availability to       | Start Work    |        |              |  |
| CONTRACTOR                               | Date:                 | Telephone No: |        | Cell phone:  |  |
| Legal Name of Com                        | pany                  |               |        | Federal ID # |  |
| Address                                  |                       |               |        |              |  |
| Name of authorized quoting (please print |                       |               | Title  |              |  |
| Signature                                |                       |               | E-Mail |              |  |