



COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

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MARK PESTRELLA, Director

ADDRESS ALL CORRESPONDENCE TO:
P.O. BOX 1460
ALHAMBRA, CALIFORNIA 91802-1460

IN REPLY PLEASE

REFER TO FILE: **BRC-2**

May 15, 2024

**DEPARTMENT OF PUBLIC HEALTH
DOWNEY LABORATORY EXPANSION AND RENOVATION PROJECT
SPECS. NO. 7817; C.P. NO. 87889**

NOTICE TO BIDDERS "D"

This Notice to Bidders "D" clarifies certain portions of the bid documents all of which is hereby made part of the contract documents.

PROJECT MANUAL:

1. **Delete** and **replace** in its entirety Section 00 03 00, Form of Bid, with the attached revised Section 00 03 00, Form of Bid, which includes receipt of Notice to Bidders "D" (**attached**).
2. **Delete** in its entirety, Section 00 04 00, Certification of Contractor's Meeting Minimum Qualifications and **replace** with revised Section 00 04 00, Certification of Contractor's Meeting Minimum Qualifications (**attached**).
3. **Delete** and **revise** Section 00 01 00, 1.02.c, Instructions to Bidders, to read as follows:
 - c. As specified in the bidding documents, in order to qualify to bid on this project, the General Contractor shall, at a minimum, have previously completed as a prime contractor one similar type project for **commercial, private, or** public entity within the last ten years (not including any warranty period) that **involved renovation or construction of a laboratory or medical facility with specialized systems** (refer to Section 00 04 00).

Notice to Bidders "D"
May 15, 2024
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Bids are due **June 4, 2024 on/or before 11:00 a.m.** Kindly notify your subcontractors to this effect.

If you have any questions, please contact Ms. Loydi Nguyen at Lnguyen@pw.lacounty.gov or (626) 458-2180.

Very truly yours,

MARK PESTRELLA, PE
Director of Public Works



SOO KIM
Division Chief
Business Relations and Contracts Division

SK:ln

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Attach.

SECTION 00 03 00**FORM OF BID TO BE USED BY BIDDERS**

The undersigned proposes to furnish all materials, labor, and equipment required for the construction to complete the Department of Public Health Downey Laboratory Expansion and Renovation Project in accordance with Drawings and Specifications 7817, including addenda thereto, if any, adopted by the Board of Supervisors, and on file in the office of the Board of Supervisors, as follows:

The total lump sum bid price is determined by adding the following items: Lump Sum Bid + Additive Alternate + Extended Overhead Daily Rate [Multiplied by 30 days] - less County Preference, if applicable. Preference as stated in Section 00 01 00, 1.30, will be applied to the Total Lump Sum Bid, if applicable, to determine the Final Total Bid Amount.

1. LUMP SUM BID:

The lump sum bid for the work, including Best Management Practices (BMP) and Construction and Demolition Debris Recycling, and Mandatory Jobs Coordinator requirements complete according to the Drawings and Specifications, will be:

(\$ _____) (_____)
Lump sum bid in figures Lump sum bid in words

2. ADDITIVE ALTERNATE 1: BSL 3 (BIOLOGICAL SAFETY LEVEL 3)

The amount to be added to the lump sum bid for inclusion of the work as specified in Section 01 23 00, will be:

(\$ _____) (_____)
Amount in figures Amount in words

3. EXTENDED OVERHEAD DAILY RATE:

The daily rate for the sum of the Contractor's field office and home office overhead applicable to this project, for each day of compensable delay will be:

(\$ _____) (_____)
Daily rate in figures Daily rate in words

4. COUNTY PROGRAM PREFERENCE:

The Local Small Business Enterprise Program Preference is provided by the County for purposes of bid evaluation only, as specified in Article 1.30 of Section 00 01 00. If Bidder is a qualifying Local Small Business Enterprise (LSBE), check "yes" in the box below. Section 00 04 38 Request for County Program Preference Consideration must be submitted at the time of bid with a copy of the certification letter issued by the County of Los Angeles Department of Consumer and Business Affairs. If non-qualifying, check "no" in the appropriate box.

LSBE Yes

☐

No

☐

5. RECEIPT OF NOTICE TO BIDDERS: (IF APPLICABLE)

I hereby certify and declare that I have received, reviewed and incorporated the following Notices into my Bid:

Notice to Bidders A, dated April 30, 2024

Notice to Bidders B, dated May 7, 2024

Notice to Bidders C, dated May 13, 2024

Notice to Bidders D, dated May 15, 2024

Executed this day of _____ (Month and Year)

By: _____

(Authorized Signature of a Principal Owner, Officer, or Manager)

NOTE: Any alteration or addition to the Form of Bid may invalidate same. All blank spaces shall be filled out completely. Line out nonapplicable blanks. An incomplete form may invalidate bid. The County reserves the right to waive any informalities or to reject any or all bids or to accept any alternatives when called for.

I (We) certify that on _____, 20____, License No. _____, license classification(s) _____, was issued to me (us), in the name of _____, by the Contractors' State License Board, pursuant to California Statutes of 1929, as amended, and that said license has not been revoked.

Firm Ownership Information

Check where applicable:

1. ☐ Minority-Owned
 ☐ Woman-Owned
 ☐ Disadvantaged-Owned
 ☐ Disabled Veteran-Owned
 ☐ LGBTQQ-Owned

2. ☐ An individual
 ☐ A corporation. Name
 state or territory of
 Incorporation

☐ A copartnership

☐ A joint venture

Race/Ethnic Composition

For statistical purposes only.

- ☐ Black/African American
☐ Hispanic/Latino
☐ Asian or Pacific Islander
☐ Native Americans
☐ Subcontinent Asian
☐ White

If a copartnership or joint venture, list names of individuals comprising same below

Date signed _____, 20____

Respectfully submitted,

Place _____

City and State

Firm Name (if applicable)

Bidder's address, E-mail address, and telephone:

Number and Street

Signature and Print Name

City and State

Zip Code

Title and E-mail Address

Telephone

Signature and Print Name

Fax

Title and E-mail Address

SECTION 00 04 00

CERTIFICATION OF CONTRACTOR’S MEETING MINIMUM QUALIFICATIONS

General Contractor’s Firm Name (as shown on bid): _____

As specified in the bidding documents, in order to qualify to bid on this project, the General Contractor shall, at a minimum, have previously completed as a prime contractor one similar type project for commercial, private, or public entity within the last ten years (not including any warranty period) that involved renovation or construction of a laboratory or medical facility with specialized systems.

The general contractor hereby certifies to the County of Los Angeles that it possesses the qualifying experience.

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct to the best of my knowledge.

Executed this _____ day of _____, 2024 at _____
(Month) (City and State)

By: _____
(Signature of owner or officer of the General Contractor)

(Title)

SECTION 00 04 00

CERTIFICATION OF CONTRACTOR'S MEETING MINIMUM QUALIFICATIONS

The general contractor shall submit verification and justification of its minimum qualifying experience on this County-provided form as part of its bid submittal. Failure to submit this certification form and the requested information at the time of bid and to meet requirements for minimum qualifying experience may result in a determination by the County that the Bidder is non-responsive and/or does not meet the minimum qualifications to bid on the project.

The County will determine, in its sole discretion, whether or not the information provided at the time of bid submittal meets the requirements for minimum qualifying experience in order for the general contractor to be considered a responsive bidder and/or as having met the minimum qualifications to bid on the project.

PROJECT:

Project Name	Total Square Footage	Owner Contact Name and Address	Owner Phone and Email Address	Final Contract Value	Date Completed

The general contractor must specify the applicable required structure conditions, features, and components that apply to the listed project above by checking the applicable boxes below:

- ☐ Laboratory or medical facility
- ☐ Floor mounted equipment and casework systems
- ☐ Laboratory or medical facility HVAC Controls and Exhaust Systems

NOTE: IN ORDER FOR THE LISTED PROJECT TO MEET THE STATED MINIMUM QUALIFICATIONS, ALL OF THE BOXES ABOVE MUST BE CHECKED.

Project description:
