



MARK PESTRELLA, Director

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

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

IN REPLY PLEASE

REFER TO FILE:

BRC-2

October 25, 2023

**NOTICE TO BIDDERS D
CENTURY REGIONAL DETENTION FACILITY ROOF, ELEVATOR AND FIRE
PROTECTION DEFERRED MAINTENANCE REPAIRS
IFB NUMBER: BRC0000450
SPECS. NO: 7684; CP 87678**

This Notice to Bidders D extends the due date and is hereby made part of the Contract Documents.

EXTENSION OF BID DUE DATE

This Notice to Bidders D extends the deadline for submittal of Bids. **The due date is extended** from Thursday, November 9, 2023 **to Thursday, November 30, 2023**. **Bids shall be submitted no later than 11:00 a.m.** The bids will be publicly opened, examined and declared by Public Works at 3:00 p.m. on November 30, 2023 using Microsoft Teams, or County accepted platform. A link to access the bid opening will be posted on the Public Works website, on the project information link.

PROJECT MANUAL:

1. Refer to Section 00 03 00, Form of Bid.

Delete Section in its entirety and replace with the attached revised Section 00 03 00, Form of Bid, which includes receipt of Notice to Bidders D (Attachment 1).

Kindly notify your subcontractors of this Notice.

If you have any questions regarding this Notice to Bidders D, you may contact Mr. Simon Lee at (626) 458-2509 or SimonLee@dpw.lacounty.gov.

Notice to Bidders D
October 25, 2023
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Very truly yours,

MARK PESTRELLA, PE
Director of Public Works

 for

EDWIN MANOUKIAN
Administrative Services Manager III
Business Relations and Contracts Division

EM:SK:syl

Attach.

ATTACHMENT 1

ATTACHMENT 1

Name of Bidder (Firm Name)

Vendor Identification Number

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 Century Regional Detention Facility Roof, Elevator, and Fire Protection Deferred Maintenance Repairs project, in accordance with Drawings and Specifications 7684, 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 lowest bid price shall be determined by adding the following items: Lump Sum Bid in Words (1) + [Extended Overhead Daily Rate (2) x Multiplied by 60 days] + Bid Alternate 1 (3) + Bid Alternate 2 (4) = Total Lump Sum Bid. 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. 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

3. BID ALTERNATE 1: INTERIM MAINTENANCE DURING CONSTRUCTION

The amount to be added to the Lump Sum Bid for inclusion of the work of Additive Alternate 1, As per the detailed scope of services described in "Exhibit 14 CRDF Elevator Interim Maintenance and Warranty Specifications". A part of the bid documents. Contractor is to furnish all services, materials, labor, and equipment required for the facilities elevators continued operation and conduct all required elevator servicing to meet County and State operational requirements of the existing non-modernized elevators during construction as follows:

Provide a monthly unit price per elevator within each machine room. These services shall become effective at the start of and for the duration of the modernization for all elevators **WITHIN THE SAME ELEVATOR MACHINE ROOM.**

Total Number of Elevators	8
Monthly Unit Price per Elevator	\$_____/Elevator/Month

(Additive Alternate #1) = 8 x Monthly Unit Price per Elevator x 12 months

The amount to be added to the Lump Sum Base Bid will be:

(\$ _____) (_____)
Additive Alternate #1 bid in figures Additive Alternate #1 bid in words

Durations listed herein are only for Bid evaluation purposes. Payments will be per actual durations.

4. BID ALTERNATE 2: WARRANTY MAINTENANCE

The amount to be added to the Lump Sum Bid for inclusion of the work of Additive Alternate 2. As per the detailed scope of services described in “Exhibit 14 - CRDF Elevators Maintenance and Warranty Specifications”. A part of the bid documents. Provide a monthly unit price per machine room.

Contractor is to furnish all services, materials, labor, and equipment required for the facilities elevators continued operation and conduct all required elevator servicing to meet County and State operational requirements of the newly replaced elevators **after modernization/replacement** of all elevators **WITHIN THE SAME ELEVATOR MACHINE ROOM**. These services shall run concurrently with the required 12-month warranty period.

Machine Room	Total Number of Elevators (TNOE)	Monthly Price per Machine Room	Months	Total (Monthly Price per Machine Room x Months)
West Tower 1	4	\$ _____	12	\$ _____
East Tower 2	4	\$ _____	12	\$ _____
(Additive Alternate #2)				\$ _____

(\$ _____) (_____)

Additive Alternate #2 bid in figures

Additive Alternate #2 bid in words

Durations listed herein are only for Bid evaluation purposes. Payments will be per actual durations.

5. COUNTY PROGRAM PREFERENCE:

The Local Small Business Enterprise Program Preference, Social Enterprise Program Preference, and Disabled Veterans Business Enterprise Program Preference are 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, Social Enterprise Preference, and/or Disabled Veterans Business Enterprise 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	<input type="checkbox"/>	No	<input type="checkbox"/>
SE Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
DVBE Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

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

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

- Notice to Bidders A, dated September 21, 2023
- Notice to Bidders B, dated September 27, 2023
- Notice to Bidders C, dated October 2, 2023
- Notice to Bidders D, dated October 25, 2023

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