



MARK PESTRELLA, Director

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

900 SOUTH FREMONT AVENUE
ALHAMBRA, CALIFORNIA 91803-1331
Telephone: (626) 458-5100
<http://dpw.lacounty.gov>

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

IN REPLY PLEASE

REFER TO FILE:

BRC-2

September 19, 2022

NOTICE TO BIDDERS F HARBOR-UCLA MEDICAL CENTER REPLACEMENT PROGRAM INTERIM HELISTOP PROJECT SPECS. NO: 7821; CP 67965

This Notice to Bidders F responds to a question and is hereby made a part of the Contract Documents.

BID SUBMISSION AND OPENING

Each bid shall be submitted on the proper form electronically through BidExpress under **BRC0000360-Revised**. The link to access the bid opening will be posted on the Public Works website on the day of the bid opening. Bidders may also click here to attend the bid opening:

https://dpw.lacounty.gov/contracts/aed_bid/ProjectDetail.aspx?project_id=BRC0000360

PROJECT MANUAL

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 Notices to Bidders (Attachment 1).

QUESTION AND ANSWER

Question: The Notice to Bidders E removed the detail showing the fence over K-rail. We are assuming we will use regular (on T-stand) temporary fence for the construction. Please clarify if sound mitigation for the project site using sound blankets is necessary since the sound blankets were supposed to be installed on the fence over the K-rail. We are confirming if the sound mitigation blankets are necessary or not.

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Answer: Temporary sound barriers are required. Provide temporary sound barriers per Keynote 3 on A101 and Section 024119. The Detail 4/A120 removed in the Notice to Bidders E applies to the alternate chain link fence, not the sound barrier.

Kindly notify your subcontractors of this Notice to Bidders F.

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

Very truly yours,

MARK PESTRELLA, PE
Director of Public Works

A handwritten signature in black ink, appearing to read "Jose Quevedo", is enclosed in a rectangular box.

for

JOSE QUEVEDO, PE
Assistant Deputy Director
Business Relations and Contracts Division

JQ:syl

Attach.

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 Harbor-UCLA Medical Center Replacement Program Interim Helistop Project, in accordance with Drawings and Specifications 7821, 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 30 days] = 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. 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. If non-qualifying, check "no" in the appropriate box.

Yes

☐

No

☐
4. 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 August 23, 2022
- Notice to Bidders B, dated August 25, 2022
- Notice to Bidders C, dated September 8, 2022
- Notice to Bidders D, dated September 14, 2022
- Notice to Bidders E, dated September 15, 2022
- Notice to Bidders F, dated September 19, 2022

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.

ATTACHMENT 1

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:

If minority-owned, indicate the appropriate category:

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

- ☐ African American
- ☐ Hispanic or Latino
- ☐ Asian/Pacific Islander
- ☐ Filipino
- ☐ American Indian/Alaskan Native

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

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

- ☐ A copartnership
- ☐ A joint venture

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

Title and E-mail Address

Telephone

Signature and Print Name

Fax

Title and E-mail Address