July 13, 2022

ADDENDUM TWO (2)

RE: RFP 735-22-4368 IDIQ Time & Materials for Minor Renovations/Repairs/Additions & Minor Construction Services

TO WHOM IT MAY CONCERN,

The following question was submitted and received the following response.

1. Are electronic signatures acceptable? If not, which documents require a wet/original signature? Electronic signatures are acceptable as long as they are by the responding company’s official authorized to commit such responses.
2. It is understood that there’s no HUB-related requirement. Please confirm. While we recommend the use of HUB vendors whenever possible, for the purposes of this solicitation, a HUB Subcontracting Plan is not required.
3. Page 12 indicates that the response may not exceed thirty (30) pages. Page 14 indicates that electronic submissions may not exceed twenty (20) pages. Please confirm whether our email submission is limited to 20 or 30 pages. Not to exceed (20) pages.
4. Are there any pages/forms excluded from the page maximum? No.
5. Page 12, 6.1 Response Requirements, lists all the forms required and their order. Page 14, section C, lists narrative information required and the order. Please confirm if we include forms first in our proposal. Section 6.1, then Section C in the order described.
6. Please confirm the Unit Price Book used for our coefficients. Coefficient price responses are used with the prevailing wage rate noted in Section 6.3 of the RFP.

PLEASE NOTE: Section 4.2 of the RFP states “Quote unit price on quantity specified – extend and show total. In case of errors in extension, UNIT prices shall govern”. With regards to Section 6.3 Response Sheet/Pricing Schedule; in the event there is an error in calculating the “Hourly Rate”, the “Coefficient Price” and current “Prevailing Wage” shall govern.

The deadline for additional questions has passed. No additional questions will be accepted at this time.

Please remember to acknowledge this addendum on the Addenda Checklist.

Regards,

Joseph J. Mrugalski Jr.
Purchasing/Contract Management