



**Lancaster County
School District**

Amendment # 1

Solicitation Number 201520
 Amendment Issue Date 3/20/15
 Solicitation Issue Date 3/9/15
 Procurement Officer Jan Petersen, CPPO, CPPB
 Phone (803) 416-8842
 E-Mail Address procurement.dept@lcsdmail.net

DESCRIPTION: **Barr Street HVAC Replacement**

The Term "Offer" Means Your "Bid" or "Proposal".

SUBMIT OFFER BY (Opening Date/Time): **3/31/15 10:00 PM - EST** See "Deadline for Submission of Offer" provision

QUESTIONS MUST BE RECEIVED BY: **3/18/15 10:00 PM - EST** See "Questions from Offerors" provision

NUMBER OF COPIES TO BE SUBMITTED: **One (1) original**

Offers must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior.

SUBMIT YOUR OFFER TO THE FOLLOWING ADDRESS:

PHYSICAL & MAILING ADDRESS:
Lancaster County School District Attn: Jan Petersen, Director of Procurement 300 South Catawba Street Lancaster, SC 29720 <small>See "Submitting Your Offer" provision</small>

CONFERENCE TYPE: Non-mandatory Pre-Bid Conference DATE & TIME: 3/16/15 at 10:00 am <small>(As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions)</small>		LOCATION: Barr Street Learn Ctr 610 E. Meeting Street Lancaster, SC 29720	
AWARD & AMENDMENTS	Award will be posted at the physical address stated above on or about 4/1/15. The award, this solicitation, and any amendments will be posted at the following web address: http://www.lancastercsd.com		
You must submit a signed copy of this form with your offer. By submitting a bid or proposal, you agree to be bound by the terms of the solicitation. You agree to hold your offer open for a minimum of sixty (60) calendar days after the opening date.			
NAME OF OFFEROR <small>(Full legal name of business submitting the offer)</small>		OFFEROR'S TYPE OF ENTITY: <small>(Check one)</small>	
AUTHORIZED SIGNATURE <small>(Person signing must be authorized to submit binding offer to enter contract on behalf of Offeror named above.)</small>		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporate entity (not tax-exempt) <input type="checkbox"/> Tax exempt corporate entity <input type="checkbox"/> Government entity (federal, state, or local) <input type="checkbox"/> Other _____	
TITLE <small>(Business title of person signing above)</small>		<input type="checkbox"/> Other _____	
PRINTED NAME <small>(Printed name of person signing above)</small>	DATE SIGNED <small>(See "Signing your Offer" provision)</small>		
Instructions regarding Offeror's name: Any award issued will be issued to, and the contract will be formed with, the entity identified as the offeror above. An offer may be submitted by only one legal entity. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, <i>i.e.</i> , a separate corporation, partnership, sole proprietorship, etc.			
STATE OF INCORPORATION <small>(If offeror is a corporation, identify the State of Incorporation.)</small>			
TAXPAYER IDENTIFICATION NO. <small>(See "Taxpayer Identification Number" provision)</small>			

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(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business)	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)
	Area Code - Number - Extension Facsimile
	E-mail Address

PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)	ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)
_____ Payment Address same as Home Office Address _____ Payment Address same as Notice Address (check only one)	_____ Order Address same as Home Office Address _____ Order Address same as Notice Address (check only one)

ACKNOWLEDGMENT OF AMENDMENTS							
Offeror acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)							
Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date

DISCOUNT FOR PROMPT PAYMENT (See "Discount for Prompt Payment" clause)	10 Calendar Days (%)	20 Calendar Days (%)	30 Calendar Days (%)	_____ Calendar Days (%)
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<p>Minority Participation:</p> <p>Are you a SC Certified Minority Vendor – Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, SC Certification # _____</p> <p>Are you a Non SC Certified Minority Vendor - Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Effective this date, this amendment forms part of the contract documents and modifies the original IFB.

Item #1 (page 13) Scope of Work/Specifications, Temporary Toilet Facilities:

No temporary toilets will be required.

Item #2 (page 15) Qualifications for Determination of Responsibility, References:

References shall now read “Offeror must complete and submit with their offer, the Company Profile and References form.” (see attachment)

Item #3 (pages 17-18) Terms and Conditions – A. General; Payment & Interest:

No retainage to be withheld.

Item #4

Electrical work as indicated on sheets E001 and E101 and specification sections 260500, 260510, and 262000 are to be provided by owner and are not to be included in this contract. Electrical plans and electrical specifications are for reference and coordination purposes only.

Item #5 Add Alternate #1

Standalone programmable thermostats as scheduled and specified are not to be included in base bid. (Please use revised Bid Schedule attached when submitting your bid)

Item #6

Reference sheet M100, Wall Mounted Heat Pump and split System Heat Pump Schedules: schedules revised. (see attached MSK-1)

Item #7

Reference sheet M200, Heat Pump Unit Detail: disregard sizes as indicated on detail and refer to floor plans.

Item #8 Iran Divestment Act: By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to Section 11-57-310.

REVISED

BID SCHEDULE

IFB 201520 – Barr Street Learning Center HVAC Replacement

Description of Services
<p>Base Bid: To perform HVAC Replacement at Barr Street Learning Center as specified in the engineer’s specifications and drawings. All work shall be performed in accordance with the requirements of this solicitation. All applicable federal and state taxes shall be included in the base bid amount.</p> <p>Base Bid Amount: \$ _____</p> <p>Add Alternate #1: Standalone programmable thermostats as scheduled and specified.</p> <p>Add Alternate #1 Bid Amount: \$ _____</p> <p>Total Bid: \$ _____</p>

Prime Contractor Name and License #:

Name: _____ License #: _____

List of all Subcontractors by specialty who are expected to perform work to the Prime Contractor:

(1) All subcontractors’ bids shall be included in the base bid amount. (2) A prime contractor whose bid is accepted may not substitute a person as subcontractor in place of a subcontractor listed in the original bid, except for showing a satisfactory reason to the district. Request for substitution must be made to the district in writing. (3) If the bidder determines to use his own employees to perform a portion of the work for which he would otherwise be required to list a subcontractor and if the bidder is qualified to perform that work under the terms of the invitation for bids, the bidder shall list himself in the appropriate place in the bid and not subcontract that work except with the approval of the district for good cause shown.

Sub-Contractors:

If you use more than one subcontractor for any trade, please list each individually.

_____ : _____ **Bid Amount:** \$ _____
Trade Subcontractor’s Name – SC License #

_____ : _____ **Bid Amount:** \$ _____
Trade Subcontractor’s Name – SC License #

_____ : _____ **Bid Amount:** \$ _____
Trade Subcontractor’s Name – SC License #

Company Profile and References

Company Name: _____

1. How Long in Business? _____
2. How Many Locations? _____
3. How long has company offered services in our region? _____
4. Annual Sales Volume _____
5. Has your organization ever failed to complete any construction work it has been awarded?
Yes _____ No _____

(If the answer is yes, please describe in full.) _____

6. Is there any potential claim, demand, litigation, arbitration, investigation, governmental proceeding or regulatory proceeding involving your firm, or its principals, predecessors or affiliates? Yes _____ No _____

(If the answer is yes, please describe in full. Enclose a separate attachment if necessary.)

Major Projects:

The references provided below must reflect services of similar size and work within the last five (5) years.

#1. Major Project (current major project in progress):

Company Name _____
Address _____
City, State, Zip Code _____
Contact Name: _____ Telephone Number: (____) _____
Project Scope: _____
Project Value: _____
Anticipated date of completion: _____

#2. Major Project (current major project in progress):

Company Name _____
Address _____
City, State, Zip Code _____
Contact Name: _____ Telephone Number: (____) _____
Project Scope: _____
Project Value: _____
Anticipated date of completion: _____

#3. Major Project (major project completed in last five (5) years):

Company Name _____
Address _____
City, State, Zip Code _____
Contact Name: _____ Telephone Number: (____) _____
Project Scope: _____
Project Value: _____
Date of completion: _____

Bidder may include, on a separate sheet, any other references to certify the quality of past work.

Company Name: _____ **Date:** _____

All other requirements of the solicitation remain unchanged.

SPLIT SYSTEM HEAT PUMP SCHEDULE

MANUFACTURER		TRANE		
INDOOR UNIT	SYMBOL	SSHP-1,2,3,5,6,7,8,9,10	SSHP-4,11,12	SSHP-13
	MODEL NUMBER	TAM7A0B30	TAM7A0C48	TWE090
	SUPPLY AIRFLOW	875	1400	2625
	EXTERNAL S.P. (IN)	.5	.5	.7
	FAN MOTOR HP	.5	.75	2
	EAT (DB/WB) (°F)	79.2/66.6	78.5/66.1	76.9/64.7
	UNIT LAT (DB/WB/DP) (°F)	56.3/54.8/53.8	55.5/54.3/53.5	56.2/54.7/53.6
	OUTSIDE AIR (CFM)	185	200	250
	AUX. HTR K.W.	7.2	10.8	18.72
	UNIT VOLTAGE	208/3/60	208/3/60	208/3/60
WEIGHT (LBS.)	138	163	325	
OUTDOOR UNIT	SYMBOL	SSHP-1A,2A,3A,5A,6A,7A,8A,9A,10A	SSHP-4A,11A,12A	SSHP-13A
	MODEL NUMBER	4TWA3030	4TWA3048	TWA090
	FAN QUANTITY/HP	1@1/8	1@1/6	1@.5
	COMP. QUANTITY	1	1	1
	M.C.A.	11	21	34.4
	M.F.S.	15	35	45
	UNIT VOLTAGE	208/3/60	208/3/60	208/3/60
	WEIGHT (LBS.)	204	241	340
COOLING CAPACITY	AMBIENT (°F)	95	95	95
	TOTAL (NET BTUH)	30,760	46,430	79,730
	SENS. (NET BTUH)	21,340	33,410	60,710
INTEGRATED HTG. CAP. @ 17°F	15,800	30,200	49,000	
SEER/EER RATING @ ARI	14.5/12	14/12	~11	
HSPF/COP RATING @ 47°F	8.5/3.7	8.5/3.8	~1/3	

REMARKS:

- CONTRACTOR SHALL VERIFY VOLTAGE, ALL ELECTRICAL CHARACTERISTICS AND CONFIRM DISCONNECTS ARE PROVIDED BY ELECTRICAL CONTRACTOR PRIOR TO ORDERING EQUIPMENT.
 - ALL CAPACITIES ARE NET TO INCLUDE INDOOR FAN HEAT.
 - UNIT LEAVING AIR CONDITION INCLUDES INDOOR FAN HEAT AND IS THE TEMPERATURE (DB/WB/DP) AT UNIT DISCHARGE.
 - SET AIRFLOW CONTROL DIP SWITCHES FOR CONSTANT CFM PER SCHEDULE AND ENHANCED MODE FOR DEHUMIDIFICATION. (SSHP-13 NOT INCLUDED)
 - EXTERNAL S.P. IS EXTERIOR TO UNIT/ HEATER CABINET.
 - PROVIDE WITH INTERNAL CONDENSATE SWITCH KIT, SINGLE ENTRY POWER, COIL GUARD, COMPRESSOR SUMP HEATERS, 2" FILTER RACK W/MERV 7 PLEATED FILTERS AND 5 YR. COMPRESSOR WARRANTY.
 - REFRIGERANT LINES FOR SYSTEM TO BE SIZED BY EQUIPMENT MANUFACTURER TO MINIMIZE CAPACITY AND EFFICIENCY LOSSES AND OBTAIN MAXIMUM SYSTEM RELIABILITY. LINE SIZES FOR SYSTEM TO BE INCLUDED IN EQUIPMENT SUBMITTAL.
- ADD ALTERNATE #1:**
- PROVIDE TRANE MODEL 803 DIGITAL THERMOSTAT WITH MANUAL/ AUTO/ 7 DAY PROGRAMMABLE SELECTABLE OPTIONS AND DEHUMIDIFICATION FEATURE. SET FOR 7 DAY PROGRAMMABLE MODE AND 50% RH.

WALL MOUNTED HEAT PUMP SCHEDULE

SYMBOL		WMHP-1,2,3,5	WMHP-4
MANUFACTURER		BARD	BARD
MODEL NUMBER		W30H2DB	W36H2DB
AIRFLOW (C.F.M.)		1000	1100
EXT. STATIC PRESSURE (IN.)		.2	.2
COOLING CAPACITY	TOTAL (BTUH)	29,800	34,600
	SENSIBLE (BTUH)	22,600	25,950
ENTERING AIR	DRY BULB (°F)	80	80
	WET BULB (°F)	67	67
	AMBIENT (°F)	95	95
INTEGRATED HTG. CAP. @ 20°F		17,000	21,000
INDOOR FAN MOTOR (HP)		1/3	1/3
OUTDOOR FAN MOTOR (HP)		1/5	1/5
AUXILIARY HEATER (KW)		6	6
COMPRESSOR	NUMBER	1	1
	R.L.A. (EACH)	8	12.1
	L.R.A. (EACH)	71	88
ELECTRICAL	MIN. CIRC. AMPS	37	41
	MAX. FUSE AMPS	40	45
VOLTAGE		208/3/60	208/3/60
UNIT WEIGHT (LBS.)		400	400
OUTSIDE AIRFLOW (C.F.M.)		120	120

REMARKS:

- CONTRACTOR SHALL VERIFY VOLTAGE, ALL ELECTRICAL CHARACTERISTICS AND CONFIRM DISCONNECTS ARE PROVIDED BY ELECTRICAL CONTRACTOR PRIOR TO ORDERING EQUIPMENT.
 - PROVIDE ON ALL WALL MOUNTED HEAT PUMPS:**
 - SINGLE POINT POWER CONNECTION
 - PROVIDE WITH COMMERCIAL ROOM VENTILATOR (CRV) WITH SPRING RETURN OPTION. INTERLOCK WITH COMPRESSOR
 - SLOPED TOP, TOP RAIN FLASHING AND FULL LENGTH SIDES,BOTTOM MOUNTING BRACKETS AND DRAIN CONNECTION KIT.
 - FACTORY FINISHED COLOR SELECTED PER OWNER, OWNER TO SELECT UNIT COLOR PRIOR TO ORDERING -PROVIDE COLOR CHART
 - PROVIDE HOT GAS REHEAT
 - HIGH PRESSURE SWITCH AND 5 MIN. COMPRESSOR TIME DELAY
 - ARI-390 CERTIFICATION
 - PHASE ROTATION MONITOR AND OUTDOOR SENSOR TO CONTROL ELECTRIC HEAT OPERATION.
- ADD ALTERNATE #1:**
- DIGITAL PROGRAMMABLE THERMOSTAT UNDER ADD ALTERNATE#1 ONLY



2015/3/20 ADDENDUM #1

REFERENCE SHEET NUMBER: M100

**Barr Street HVAC Replacement
LANCASTER, SOUTH CAROLINA**

PARTIAL DWG. NO.

MSK-1

LANCASTER, SOUTH CAROLINA

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DRAWN JAS

DATE 03/20/15