OFFICIAL BID FORM

Revised 5/17/2022



BID NUMBER:	2122-71VS								
PROJECT NAME:	ME: Aynor High School (AHS) HVAC Replacement								
through the website at th	e following URL http:	NDATORY FOR A BID TO s://vrapp.vendorregistry.c in the <i>Invitation for Bids</i> r	om/Bids/View/E		2f302e8a-69	9b0-407b-a2	21a-33	documentation shall be submitted 868d004365e , mailed, expressed led by addendum.)	
BASIC SUBMITTER INF	FORMATION:								
Name of Submitting (Company:								
Mailing Address of Co	ompany:								
Taxpayer Identification	on Number:								
Qualifier's Name:				Phor	ne Number				
Contractor's License Number:		Fax Number:							
Contractor's Group Number:		Dollar Limitation of License: \$							
Email Address:									
Company's Minority S		Minority Owned Business to be certified by the State				Applicable tical purpos	es onl	ly. Check if State certified: □)	
ADDENDA ACKNOWI F	FDGFMFNT: (Ackn	owledgement of all adder	nda issued is re	eauired.)					
ADDENDA NO.	ADDENDA DATE	•		ADDENDA NO.	<u>Al</u>	<u>DDENDA D</u>	<u>ATE</u>	BIDDER'S INITIALS	
	-	_							
such descriptions of the equipment and processe responsive. Check box	work to be perform es necessary for the to indicate addition, r	ed as well as the worksi	te and conditionates listed be om base bid.)	ns affecting the w low. <i>(Failure of th</i> <i>Round all bids to</i>	ork, the un ne Bidder to the neares	dersigned point bid any al	ropos	cations, drawings, forms or other es to furnish all materials, labor, e listed shall render the bid non-	
described within the	specifications unle	ss otherwise noted. Tr 15, HP046, HP047, HP	ane Equipme	nt and all work in	า	Dollars:	¢		
		13, NE040, NE047, NE	040) (IIICIUU	e arry anowance			ф Э	20,000,00	
a. Contingency Allowance						Dollars:	\$	20,000.00	
TOTAL BASE BID						Dollars:	\$		
in Areas D, E, F, HP048) as descri using HVAC equi	to the contract amou G, H, O &M (Less HI bed in the Drawings pment as Manufactu	Int to provide all work P045, HP046, HP047, and Specifications red by Daikin and Air Units (DOAS)) as							
Manufactured by	Greenheck.		☐ No Chan	ge 🗌 Add 🔲 [Deduct	Dollars:	\$		
2. State the change equipment and al	to the contract amou I work in Areas K, L,	Int to provide Trane & J.	☐ No Chan	ge 🔲 Add 🔲 [Deduct	Dollars:	\$		
3. State the change	to the contract amou	ınt to provide		o — — — ge □ Add □ [Dollars:	\$		
4. State the change equipment and al	Daikin/Greenheck equipment and all work in Areas K, I State the change to the contract amount to provide Tra equipment and all work in for units HP045, HP046, HP0								
and HP048.	al time of the Territory	a LIDOAE LIDOAY LIDOAZ		ge 🗌 Add 🗍 [DeudCl	Dollars:	\$		
5. State the change	to the contract amou c equipment and all v	s HP045, HP046, HP047 int to provide vork in for units HP045,		ge ☐ Add ☐ [Deduct	Dollars:	\$		
Provide lea	nd time for Daikin/Gre	enheck units HP045, HP	046, HP047, &	HP048:	_				

(CAUTION: Bidders are required to include ALL costs in the above Base Bid and each Bid Alternate, if any. If the bid is accepted, the District will not contract for more than the amounts shown. The District reserves the right to accept bid alternates in any order or combination that serves its best interests and is within budget. If any numbers are illegible, the District's interpretation of the number is final.)

<u>SUBCONTRACTOR DISCLOSURE</u>: As stipulated in the *Bid Instructions*, subcontractors who shall perform the trades listed below must be identified. When the Bidder intends to perform any trade listed with the Bidder's own forces, the Bidder shall be named in the place of any subcontractor required to be listed. Listing any subcontractor that does not meet the qualifications stated in the *Bid Instructions* or does not meet the licensing requirements of the State of South Carolina shall render the bid non-responsive.

Base Bid:	<u>TRADE</u>	SUBCONTRACTING COMPANY NAME	<u>LICENSE NUMBER</u>
	Electrical		
	Air Conditioning		
	Plumbing		
	Roofing		
Alternate 1:	TRADE Electrical	SUBCONTRACTING COMPANY NAME	<u>LICENSE NUMBER</u>
	Air Conditioning		
	Plumbing		
	Roofing		
Alternate 2:	: <u>TRADE</u> Electrical	SUBCONTRACTING COMPANY NAME	LICENSE NUMBER
	Air Conditioning		
	Plumbing		
	Roofing		
Alternate 3:	<u>TRADE</u> Electrical	SUBCONTRACTING COMPANY NAME	<u>LICENSE NUMBER</u>
	Air Conditioning		
	Plumbing		
	Roofing		

Alternate 4	: <u>TRADE</u>	SUBCONTRACTING COMPANY NAME	LICENSE NUMBER				
	Electrical						
	Air Conditioning						
	Plumbing						
	Roofing						
Alternate 5	: <u>TRADE</u>	SUBCONTRACTING COMPANY NAME	<u>LICENSE NUMBER</u>				
	Electrical						
	Air Conditioning						
	Plumbing						
	Roofing						
Names: Identify any subcontracting	employee, agent or representation and any work for the project.	: Identify any employee, agent or representative of the Architect/Engineer of the Properties of the Architect/Engineer of the Properties of the Architect/Engineer or District (including members of the Horry Not applicable					
ACKNOWLE							
Have you clearly listed any deviations from the requested specifications and fully explained such deviations? Yes No N/A – No Deviations							
obligate the observation observat	company to a contract for the work such that I have full knowledge of a is awarded. I further understand th d and to the payment of subcontrac f my knowledge, understanding, a	tify that I am an authorized signatory for the bidding company identified in this identified in the Contract Documents provided by Horry County Schools. I had of the work to be performed and the terms, conditions, and requirements that the bidding company I represent must comply with all applicable local, stations. I certify that the information included on this form or as attached suppend belief. I understand that misrepresentation of any information on this form	ave read and fully understand the Contract the company I represent must comply with ate and federal laws related to the work to lementary information is true and accurate				
BIDDER:	I. (A.II. '. IC'. I	NOTARY:	CORPORATE SEAL:				
Name & H	le of Authorized Signatory:	State of: County of: Subscribed and sworn to before me on this date:					
Signature:		Signature:					
		My Commission Expires:					
1. A fully 6		e submitted with this <i>Official Bid Form</i> : er of attorney, or other approved security. ed below:					