

Procurement and Contracting Documents

DOCUMENT - BID FORM – GENERAL CONTRACTOR (SINGLE-PRIME CONTRACT)

1.1 BID INFORMATION

- A. Bidder: \_\_\_\_\_.
- B. Project Name: Inpatient Room Renovation.
- C. Project Location: 1111 11<sup>th</sup> Street, Hawarden IA 51023.
- D. Owner: Hawarden Regional Healthcare.
- E. Owner Project Number: 10003.
- F. Architect: Hoefer Welker – 11460 Tomahawk Creek Parkway, Suite 400, Leawood, Kansas 66211
- G. Architect Project Number: 104461.

1.2 CERTIFICATIONS AND BASE BID

- A. Base Bid, Single-Prime (All-Trades) Contract: The undersigned Bidder, having carefully examined the Procurement and Contracting Requirements, Conditions of the Contract, Drawings, Specifications, and all subsequent Addenda, as prepared by Hoefer Welker and the Architect's consultants, having visited the site, and being familiar with all conditions and requirements of the Work, hereby agrees to furnish all material, labor, equipment and services, including all scheduled allowances, necessary to complete the construction of above-named Project, according to the requirements of the Procurement and Contracting Documents, for the stipulated sum of:
  - 1. \_\_\_\_\_ Dollars (\$\_\_\_\_\_).
  - 2. The above amount may be modified by amounts indicated by the Bidder on the attached Bid Supplement – Alternates
  - 3. Alternate 1: \_\_\_\_\_ Dollars (\$\_\_\_\_\_).
  - 4. Alternate 2: \_\_\_\_\_ Dollars (\$\_\_\_\_\_).

1.3 BID GUARANTEE

- A. The undersigned Bidder agrees to execute a contract for this Work in the above amount and to furnish surety as specified within 3 days after a written Notice of Award, if offered within 10 days after receipt of bids, and on failure to do so agrees to forfeit to Owner the attached cash, cashier's check, certified check, U.S. money order, or bid bond, as liquidated damages for such failure, in the following amount constituting five percent (5%) of the Base Bid amount above:
  - 1. \_\_\_\_\_ Dollars (\$\_\_\_\_\_).

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- B. In the event Owner does not offer a Notice of Award within the time limits stated above, Owner will return to the undersigned the cash, cashier's check, certified check, U.S. money order, or bid bond.

1.4 SUBCONTRACTORS AND SUPPLIERS

- A. The following companies shall execute subcontracts for the portions of the Work indicated:

- 1. General: \_\_\_\_\_.
- 2. Architecture Site \_\_\_\_\_.
- 3. Architecture: \_\_\_\_\_.
- 4. Structure: \_\_\_\_\_.
- 5. Mechanical: \_\_\_\_\_.
- 6. Plumbing: \_\_\_\_\_.
- 7. Electrical: \_\_\_\_\_.
- 8. Alternate 1: Replace Windows 1<sup>st</sup> Floor \_\_\_\_\_.
- 9. Alternate 2: Roof Ladder and Pads \_\_\_\_\_.

1.5 TIME OF COMPLETION

- A. The undersigned Bidder proposes and agrees hereby to commence the Work of the Contract Documents on a date specified in a written Notice to Proceed to be issued by Architect and shall be substantially complete the Work within 90 calendar days.

1.6 ACKNOWLEDGEMENT OF ADDENDA

- A. The undersigned Bidder acknowledges receipt of and use of the following Addenda in the preparation of this Bid:

- 1. Addendum No. 1, dated \_\_\_\_\_.
- 2. Addendum No. 2, dated \_\_\_\_\_.
- 3. Addendum No. 3, dated \_\_\_\_\_.
- 4. Addendum No. 4, dated \_\_\_\_\_.

1.7 BID SUPPLEMENTS

- A. The following supplements are a part of this bid form and are attached hereto:

- 1. Bidder Status Form – See Attached document.

1.8 CONTRACTOR'S LICENSE

- A. The undersigned further states that it is a duly licensed contractor, for the type of work proposed, in Hawarden, IA, and that all fees, permits, etc., pursuant to submitting this proposal have been paid in full.

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1.9 SUBMISSION OF BID

- A. Respectfully submitted this \_\_\_\_ day of \_\_\_\_\_, 2021.
- B. Submitted By: \_\_\_\_\_(Name of bidding firm or corporation).
- C. Authorized Signature: \_\_\_\_\_(Handwritten signature).
- D. Signed By: \_\_\_\_\_(Type or print name).
- E. Title: \_\_\_\_\_(Owner/Partner/President/Vice President).
- F. Witnessed By: \_\_\_\_\_(Handwritten signature).
- G. Attest: \_\_\_\_\_(Handwritten signature).
- H. By: \_\_\_\_\_(Type or print name).
- I. Title: \_\_\_\_\_(Corporate Secretary or Assistant Secretary).
- J. Street Address: \_\_\_\_\_.
- K. City, State, Zip: \_\_\_\_\_.
- L. Phone: \_\_\_\_\_.
- M. License No.: \_\_\_\_\_.
- N. Federal ID No.: \_\_\_\_\_(Affix Corporate Seal Here).

END OF DOCUMENT