



To: Prospective Bidders  
Date: August 14, 2023  
  
RE: Addendum No. 1  
Fireweed Dental Clinic Renovation  
ITB # SCF23-1109

Issue Date: August 4, 2023

This document forms a part of the Contract Documents and modifies the original Procurement Documents dated August 4, 2023. Acknowledge receipt of this Addendum in the provided on the Bid Form. Failure to acknowledge receipt of this addendum may subject Proposers to disqualification.

This Addendum consists of nine (9) pages.

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### **1. Change to Section 00 01 10-1 (Supplementary Documents):**

Supplementary Documents Item D is deleted in its entirety and replaced with:

- SOUTHCENTRAL FOUNDATION SAMPLE OF EDITED AGREEMENT CONSISTING OF AIA A101-2017; AIA A101 EXHIBIT A - 2017; AND AIA A201- 2017.

### **2. Addition to Section 00 11 16-1 (Invitation to Bidders):**

Details about public bid opening are added to the 3<sup>rd</sup> to last sentence which now reads:

“Bids will then be publicly opened and read aloud during a conference call scheduled for 2:30PM on September 15, for all bidders to attend.”

### **3. Change to Section 00 11 16-1:**

Last sentence in this section is edited as follows:

Southcentral Foundation reserves the right to reject any and all bids, accept [bids](#) other than the lowest bid, and/or waive informalities or irregularities in bids received whenever such rejection, acceptance, and/or waiver is in the best interest of Southcentral Foundation.

### **4. Deletion to Section 00 21 13-4:**

Section 1.05 B is deleted in its entirety and intentionally reserved.

### **5. Change to Section 00 21 14-1 (Bidder's Checklist):**

Added item #5 to the Bidder check list. See updated form below.

### **6. Change to Section 00 41 13-1 (Bid Form):**

Revised Section 2 on Bid Form to reflect that SCF will provide draft contract for review. See revised Bid Form below.

### **7. Change to Section 00 45 13-1 (Minimum Bidder's Qualification):**

Subsection a) is deleted in its entirety and replaced with the following:

Contractor must have successfully completed a minimum of three (3) projects of similar scope and size (valued over \$10,000,000 each), in occupied healthcare facilities. Prior dental facility construction is required. Bidder must provide list of the projects and client name and current phone contact for each project on the Statement of Bidder's Qualifications.

### **8. Change to Section 00 45 14-3 (Statement of Bidder's Qualification):**

Updated item #16 to:

Attach [2022](#) year-end and [2023](#) current Financial Statements. See revised Statement of Bidder's Qualification below.

**NOTICE TO BIDDERS: PLEASE REMOVE THIS SECTION AND FORMS LISTED BELOW FROM THE REST OF THE MANUAL FOR SUBMISSION ON THE BID DUE DATE**

All responsive Bids MUST contain the following:

1. 00 41 13 Bid Form – Stipulated Sum
2. 00 43 13 Bid Security Form
3. 00 45 14 Statement of Bidder’s Qualifications
4. 00 45 19 Non-Collusion Affidavit
5. Proof of AN/AI status to claim preference

## **BID FORM, STIPULATED SUM**

**Project:** Fireweed Dental Clinic Renovation

**Location:** ANCHORAGE, ALASKA

**Owner:** Southcentral Foundation (SCF)

- 1) The undersigned, having familiarized (himself/herself) (themselves) with the local conditions affecting the cost of work, and with the Specifications, including the Invitation To Bid (ITB), this Bid Form, the Form Of Contract A101-2017, the SCF Revision/Amendments to A101-2017, the SCF Statement of American Indian/Alaska Native Preference Requirements, the General Scope of the Work, and the Technical Specifications and Drawings, as prepared by SCF, and on file in the office of SCF, hereby proposes to furnish all labor, material, equipment and services required to construct and complete the project:

Bidder to submit fixed prices to complete the Fireweed Dental Clinic Renovation work shown in the attached drawings and the project manual. The work will occur next to an active medical campus; thus, noise mitigation, disruption planning is required.

- |    |    |  |       |
|----|----|--|-------|
| 1. | a) | Total Stipulated Sum, Bid Price (BASE)   | _____ |
|    |    |  | \$    |
|    |    |  | _____ |
|    | b) | Additive Alternate #1:   | _____ |
|    | c) | Additive Alternate #2:   | _____ |
|    | d) | Additive Alternat3 #3:   | _____ |
| 2. | a) | <u>Only if claiming AN/AI Preference, record amount shown in 1. a) less 2.5%</u> | _____ |
|    |    |  | \$    |
|    |    |  | _____ |
| 3. | a) | <b>TOTAL BASE BID PRICE [1. a) or 2. a) from above]</b>                          | _____ |
|    |    |  | \$    |
|    |    |  | _____ |

- 2) By submitting this bid, it is understood/acknowledged that the right is reserved by SCF to reject any and all bids at its sole discretion and for its convenience or benefit. SCF agrees to draft and deliver a contract for review in the prescribed form within ten (10) days after the date SCF mails or otherwise delivers to bidder SCF's written acceptance of this bid as the successful bid.
  
- 3) I/We have enclosed with this Bid a Statement of American Indian/Alaska Native Ownership, if applicable and AI/AN preference is claimed.
  
- 4) I /We have enclosed with the bid the documents identified on the Bidder's Checklist in the forms provided in the project manual.
  
- 5) I/We further acknowledge receipt of the following addenda:
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  - Addendum No.: \_\_\_\_\_ Dated: \_\_\_\_\_
  
- 6) I/We further understand the penalty for making false statements in offers is prescribed by federal law in 18 U.S.C. 1001.

NAME OF BIDDER

OFFICIAL ADDRESS

\_\_\_\_\_

\_\_\_\_\_

BY:

\_\_\_\_\_

Print Name and Title

\_\_\_\_\_

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

## **STATEMENT OF BIDDER'S QUALIFICATION**

All questions must be answered, and the data given must be clear and comprehensive. This statement must be notarized. Attach additional pages if needed.

1. Name of bidder.
  
2. Names of principals.
  
  
  
3. Names of authorized signatories.
  
  
  
  
4. Permanent main office address.
  
  
  
  
5. When organized.
  
  
  
  
6. Where incorporated.
  
  
  
  
7. How many years have you been engaged in the contracting business under your present name?

8. Previous names of companies in which the principals listed above (#2) have engaged in the contracting business.

9. List all active projects.

10. Have you ever defaulted on a contract?      Yes      No  
If so, where, and why?

11. Have you ever refused to sign a contract at your original bid?      Yes      No  
If yes, explain.

12. Names, background experience and current workload of the principal members of your firm (including the officer and lead personnel assigned to this project).

<u>Name</u>	<u>Background</u>	<u>Years in Contracting</u>	<u>Current Workload</u>
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13. Attach list of comparable construction contracts completed, indicating contract amount, project size, location, owner, start and end date, contact person and telephone number. Refer to Minimum Bidder's Qualifications, Section 00 45 13.
14. Attach a list of your primary subcontractors for this project.
15. Furnish written evidence of amount and type of credit available.
16. Attach 2022 year-end and 2023 current Financial Statements.
17. Attach proof of Alaska Native / American Indian Ownership.
18. Will you, upon request, fill out a detailed Financial Statement and furnish any other information that may be required by Southcentral Foundation? Yes No.



19. The undersigned hereby authorizes and requests any person, firm, or corporation to furnish any information requested by Southcentral Foundation, in verification of the recitals comprising this Statement of Bidder's Qualification.

Dated at \_\_\_\_\_, this \_\_\_\_\_  
\_\_\_\_\_ 2023. \_\_\_\_\_  
(place) (day)  
(month)

(Name of Bidder)

By:  
(Signature of Bidder's Representative)

Title:

State of ALASKA )  
County of )ss  
)

\_\_\_\_\_, being duly sworn, deposes and says he is (individual signing above)

he is \_\_\_\_\_ of \_\_\_\_\_  
(Title) (Name of Organization)

and that the answers to the foregoing questions and all statements therein contained are true and correct.

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 2023.  
(Date) (Month)

(Notary Public)

My Commission Expires: \_\_\_\_\_ (Date)