



**Georgetown County, South Carolina**

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**ADDENDUM #2 TO IFB 09-016**

BID NUMBER: 09-016

ISSUE DATE: April 23, 2009

**REVISED OPENING DATE: Wednesday, May 13, 2009**

**OPENING TIME: 3:00 PM (EDT)**

Bid Opening Location: Georgetown County Courthouse, Room #201, (Small Conference Room)

Pre-Bid Conference/Site Inspection: (none)

**PROCUREMENT FOR: Elevator Maintenance at County Facilities**

Commodity Code(s): 91013

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This addendum will amend **Bid #09-016, Elevator Maintenance at County Facilities** originally issued on Friday, April 04, 2009. This clarification is being provided to all known and registered correspondents in response to inquiries received for additional information and/or clarification. All addenda and original bid documents are also available online at: [www.georgetowncountysc.org](http://www.georgetowncountysc.org), select “purchasing” and then “current bids”.

**As revised in Addendum 1, the bid opening date and time is:**

**REVISED OPENING DATE: Wednesday, May 13, 2009**

**OPENING TIME: 3:00 PM (EDT)**

**The Sheriff’s Department has entered into separate contract for service and maintenance of the elevator at the Detention Center. Accordingly, the requirement for service and maintenance on that elevator is deleted from this requirement.**

**Question:** Will the County confirm that it requires only semi annual and annual service?

**Response:** The County currently has monthly service on the elevators. We have modified this IFB to require monthly service. Accordingly, the following changes are made to the IFB:

1. Subparagraph 8 under the paragraph COMPLETE ELEVATOR MAINTENANCE SERVICE, REQUIREMENTS is revised to read as follows:

**A. Service Intervals:** Examination shall be provided **monthly** ~~bi-annually (every six months).~~

2. Exhibit B Mandatory Pricing Form is revised to include monthly pricing in Columns B & E

**Question:** Page 19 of 25 Item #2: Evaluated bid price \$ amount from Row 25 of mandatory bid pricing sheet. The bid pricing sheet only goes from 1-13 w/ rows A-G, page 23 of 25. Can you clarify which summary number you are looking for in the bid for item 2?

**Response:** Item #2 of the MANDATORY BID SUBMITTAL FORM on page 19 is revised to read as follows:

2. Evaluated Bid Price (\$ amount from **Row 12 Column B** of Mandatory Bid Pricing Sheet):

\$ \_\_\_\_\_

A revised MANDATORY BID SUBMITTAL FORM is attached to this Addendum #1.

**Question:** Please provide LLR Inspection reports for the past two years.

**Response:** At this time, we are unable to compile two years of reports. Attached is a representative report that the County receives.

**Question:** Does the County have a call back history?

**Response:** That data is not available

**Question:** Who currently maintains the elevator equipment?

**Response:** Thyssenkrupp Elevator services the elevators at the County Court House, DSS, and the Rice Museum. Otis Elevator Company services the elevator at the Detention Center.(Detention Center elevator service is excluded from this IFB)

**Question:** How often are the elevators serviced and what is the charge?

**Response:** The elevators are serviced monthly and the monthly charge is \$246.00 per month. At the Detention Center the monthly charge is \$226.83

**Question:** When is the Certificate of Insurance required?

**Response:** The Certificate is required prior to award



**ADDENDUM ACKNOWLEDGEMENT**

**RFP #09-016**

**Elevator Maintenance at County Facilities**  
**Mandatory Submittal Form**

**To be returned with the final proposal submission to Georgetown County.**

COMPANY NAME: \_\_\_\_\_

- |                                     |                                  |                     |
|-------------------------------------|----------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Addendum #1 Received Date: _____ | Initialed By: _____ |
| <input checked="" type="checkbox"/> | Addendum #2 Received Date: _____ | Initialed By: _____ |
| <input type="checkbox"/>            | Addendum #3 Received Date: _____ | Initialed By: _____ |
| <input type="checkbox"/>            | Addendum #4 Received Date: _____ | Initialed By: _____ |
| <input type="checkbox"/>            | Addendum #5 Received Date: _____ | Initialed By: _____ |
| <input type="checkbox"/>            | Addendum #6 Received Date: _____ | Initialed By: _____ |

If your Bid submission has already been mailed, acknowledgment may be provided by faxing this form to (843)545-3500.

[THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK]

Exhibit B (Revised by Addendum 2) - Mandatory Submittal - Pricing Form

COL	A	B	C	D	E	F	G
	Location	Year 1 Monthly Service Cost	Year 1 Annual Service Cost (12 <sup>th</sup> month)	Total year one service cost	Year 2 Monthly Service Cost	Year 2 Annual Service Cost (12 <sup>th</sup> month)	Total year two service cost
1	Historic Courthouse 129 Screven St	\$	\$		\$	\$	
2	Historic Courthouse	\$	\$		\$	\$	
3	Dept of Social Services 330 Dozier St	\$	\$		\$	\$	
4	County Airport Term 201 Airport Rd	\$	\$		\$	\$	
5	Judicial Center 401 Cleland St	\$	\$		\$	\$	
6	Judicial Center	\$	\$		\$	\$	
7	Judicial Center	\$	\$		\$	\$	
8	Judicial Center	\$	\$		\$	\$	
9	Rice Museum 633 Front St	\$	\$		\$	\$	
10	Yearly Cost for each service (Sum Rows 1-9) x 11 for columns B & E	\$	\$		\$	\$	
11	Total Year 1 (Sum of Row 10 Cols B & C - enter total \$ in Row 11, Col D ) Total Year 2 (Sum of Row 10 Cols E & F - enter total \$ in Row 11, Col G)			\$			\$
12	Evaluated price (Sum of \$ amounts in Row 11 Cols D & G)	\$					

Note: The elevators at the new Judicial Center and at the Airport Terminal are under manufacturer’s warranty. Monthly service is outside of the warranties and is required for those elevators.



**MANDATORY BID SUBMITTAL FORM (Revised Addendum #2)**

IFB #09-016

**Elevator Maintenance at County Facilities**

The undersigned, on behalf of the vendor, certifies that: (1) this bid is made without previous understanding, agreement or connection with any person, firm or corporation making a bid on the same project; (2) is in all respects fair and without collusion or fraud;(3) the person whose signature appears below is legally empowered to bind the firm in whose name the bid is entered (4) they have read the complete Request for Bid and understands all provisions: (5) if accepted by the County, this bid is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted bid will be their responsibility.

1. Name of Company submitting bid \_\_\_\_\_

2. Evaluated Bid Price (\$ amount from Row 12, Column B of Mandatory Bid Pricing Sheet):

\$ \_\_\_\_\_

3. Sales Tax Permit # \_\_\_\_\_

This purchase is subject to: **6% SC Sales Tax**

If your company is authorized to collect SC Sales Tax, place your SC Sales Tax Permit Number and the amount of tax to be collected on the line above, otherwise write "NO" in both line items.

4. Bid cost must remain valid ninety (90) days from bid opening date.

5. Availability, or number of days after receipt of order: \_\_\_\_\_

6. **Will your company accept payment for product and services via the South Carolina VISA**

**Purchase Card?** \_\_\_\_\_

7. Contact Address: \_\_\_\_\_

\_\_\_\_\_

8. Contact Person \_\_\_\_\_

9. Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

10. E-Mail address \_\_\_\_\_

11. Remittance Address: \_\_\_\_\_

\_\_\_\_\_

12. Accounting Contact \_\_\_\_\_

13 Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_