TOWN OF WARRENTON, VIRGINIA

INVITATION FOR BID – MAINTENANCE SERVICES – HVAC UNITS

IFB: #10-006 **Closing Date: June 30, 2009 at 2 PM**

ADDENDUM # 1 **Date: June 24, 2009**

For technical information relating to this IFB, please contact:

Robert G. Butler, Superintendent of Public Works
360 Falmouth Street
Warrenton, Va. 20186
540-347-1858
Email: rbutler@warrentonva.gov

For other information relating to this IFB, please contact:

Purchasing Agent
18 Court Street
Warrenton, Va. 20186
540-347-1102

To All Bidders:

Contractors submitting for the above IFB # 10-006 shall take note of the following clarification. The following units also need to be serviced at the same time interval as described in original bid.

VISITOR CENTER: (33 North Calhoun Street)
(1) Electric Static Filter in attic

TOWN OWNED WAREHOUSE (SALVATION ARMY): (26 South Third Street)
(1) Gas Heater

PUBLIC SAFETY FACILITY: (333 Carriage House Lane)
(2) ERU's SEMCO Model # FV-500

SCOPE OF WORK:
MONTHLY SERVICE MAINTENANCE PROCEDURES
Specific requirements for all units.
I. General Maintenance:
b. Clean condensation pan and line.

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BID SHEET – ADDENDUM#1

The undersigned hereby certifies that he/she has read the attached specification sheets for HVAC Units and submits the following Bid Proposal for consideration. Any items left blank on bid sheet will be deemed as a non-responsive bid.

Perform regular cooling/heating seasonal service maintenance for a one (1) year period on all HVAC listed in attached Specifications.

	Monthly			
Monthly Price for Monthly Service for all Town units.	$_____	X 10 =	$_____	Total
Lump Sum Price for cooling Maint. / Service			$_____	Total
Lump Sum Price for heating Maint. Service			$_____	Total
Total Yearly Cost for all Maint./Services to be performed			$_____	Total

Service Calls not included in Annual Service and Maintenance.

Standard Service Rate (8 AM to 5 PM) $_____

Overtime Service Rate (5PM to 8 AM and Weekends and Holidays) $_____

I RECEIVED AND UNDERSTAND ADDENDUM # 1 DATED JUNE 24, 2009

_____	_____
Company Name	Representative Name
_____	_____
Address	Title
_____	_____
City State Zip	Signature
_____	_____
E-Mail Address	Phone Number
_____	_____
Federal ID # Number	Fax Number

To be considered responsive, an amount must be entered in all blank spaces above.
All bids shall be valid for a period of sixty (60) days from opening date.