



## &lt;Addendum #1&gt;

NJSDA  
1 West State Street  
Trenton, NJ 08625  
Phone: 609-341-5980  
**Fax: 609-656-4608**

**Date: June 7, 2012**

**PROJECT #: ET-0056-B01**

**DESCRIPTION: New A. Chester Redshaw Elementary School**

This addendum shall be considered part of the Bid Documents issued in connection with the referenced project. Should information conflict with the Bid Documents, this Addendum shall supercede the relevant information in the Bid Documents.

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**A. FIRMS ATTENDING THE MANDATORY PRE-BID CONFERENCE HELD ON WEDNESDAY, JUNE 6, 2012**

See Attachment A to this Addendum No. 1.


**B. Technical Proposal Forms – attached**

- a. 3.1.A Bidder's Experience on Projects of Similar Size, Cost and/or Complexity
- b. 3.1.B Identification and Qualification of Bidder's Key Team Members
- c. 3.2.A Bidder's Design Consultant's Experience on Projects of Similar Size, Cost and/or Complexity
- d. 3.2.B Identification and Qualification of Design Consultant's Key Team Members
- e. 3.3 Bidder's Demonstrated Prior Affirmative Action Experience
- f. 3.4 Bidder's Overall Approach to the Project
- g. 3.5 Bidder's Approach to Schedule
- h. 3.6 Approach to LEED Requirements
  - i. LEED Checklist

i. 3.8 Small Business Enterprise Forms "B" and "C"

j. 3.9 Technical Proposal Certification

End of Addendum No. #1

  
NJSDA \_\_\_\_\_ Date 6/7/2012  
Claire Tsai-Ochs

<Addendum #1>

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1 West State Street  
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**DESCRIPTION: New A. Chester Redshaw Elementary School**

Addendum No. 1

**Acknowledgement of Receipt of Addendum**

Contractor must acknowledge the receipt of the Addendum by signing in the space provided below and returning via fax to (609-656-4608) or via E-mail attachment. **Signed acknowledgement must be received prior to the Bid Due Date. Acknowledgement of the Addendum must be made in Section E.6 of the Price Proposal Submission.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Date

## ATTACHMENT A

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### 3.1.A BIDDER'S EXPERIENCE

(Submit at least three (3), but no more than six (6). At least two (2) case studies should be public-sector projects. This form should be photocopied as necessary.)

CASE STUDY # \_\_\_\_\_

PROJECT NAME:	
PROJECT ADDRESS:	
CONTACT NAME & TITLE FOR OWNER'S REPRESENTATIVE:	CONTACT PHONE NUMBER:
PROJECT MANAGER:	PROJECT SUPERINTENDENT:
PROJECT SAFETY COORDINATOR/INSPECTOR:	PROJECT QUALITY ASSURANCE/QUALITY CONTROL COORDINATOR OR INSPECTOR:
PUBLIC SECTOR : <input type="checkbox"/>	PRIVATE SECTOR: <input type="checkbox"/>
PROJECT COST:	
START DATE:	END DATE:

SUBCONTRACTOR INFORMATION (Please provide company name):	
PLUMBING:	
ELECTRICAL:	
HVAC:	
STRUCTURAL STEEL:	

Describe the effectiveness of project, and the methodology used to measure such effectiveness – on-time delivery, successful completion of project, effective management of costs.:
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### 3.1.A BIDDER'S EXPERIENCE (cont'd)

**SCOPE OF WORK** (Describe the project and indicate why this case study is comparable to the project being bid, in terms of cost, size & complexity.):



**3.1.B BIDDER'S KEY TEAM MEMBER RESUME**

(This form should be photocopied as necessary)

**KEY TEAM MEMBER NAME:**

**YEARS OF EXPERIENCE (Note minimum years experience required by RFP, if applicable):**

**YEARS WITH FIRM:**

**TECHNICAL SPECIALTIES:**

**PROFESSIONAL HISTORY:**

**EDUCATION:**

**PROFESSIONAL REGISTRATIONS & AFFILIATIONS:**

**REPRESENTATIVE PROJECT EXPERIENCE & QUALIFICATIONS (Describe experience on projects of similar size, cost, complexity and identify role performed on each (i.e. project manager, safety Inspector, etc. Note particularly experience working with subcontractors identified for this project.):**

### 3.2.A DESIGN CONSULTANT'S EXPERIENCE

(Submit at least three (3), but no more than six (6). At least two (2) case studies should be public-sector projects. This form should be photocopied as necessary.)

**CASE STUDY #** \_\_\_\_\_

<b>PROJECT NAME:</b>	
<b>PROJECT ADDRESS:</b>	
<b>CONTACT NAME &amp; TITLE FOR OWNER'S REPRESENTATIVE:</b>	<b>CONTACT PHONE NUMBER:</b>
<b>PROJECT MANAGER:</b>	<b>PROJECT SUPERINTENDENT:</b>
<b>PROJECT SAFETY COORDINATOR/INSPECTOR:</b>	<b>PROJECT QUALITY ASSURANCE/QUALITY CONTROL COORDINATOR OR INSPECTOR:</b>
<b>PUBLIC SECTOR :</b> <input type="checkbox"/>	<b>PRIVATE SECTOR:</b> <input type="checkbox"/>
<b>PROJECT COST:</b>	
<b>START DATE:</b>	<b>END DATE:</b>

SUBCONTRACTOR/SUBCONSULTANT INFORMATION (Please provide company name):	
<b>PLUMBING:</b>	
<b>ELECTRICAL:</b>	
<b>HVAC:</b>	
<b>STRUCTURAL STEEL:</b>	

**Describe the effectiveness of project, and the methodology used to measure such effectiveness – on-time delivery, successful completion of project, effective management of costs.:**

### 3.2.A DESIGN CONSULTANT'S EXPERIENCE (cont'd)

**SCOPE OF WORK** (Describe the project and indicate why this case study is comparable to the project being bid, in terms of cost, size & complexity.):

**3.2.B KEY TEAM MEMBER RESUME (Design Consultant)**

(This form should be photocopied as necessary)

**KEY TEAM MEMBER NAME:**

**YEARS OF EXPERIENCE (Note minimum years experience required by RFP, if applicable):**

**YEARS WITH FIRM:**

**TECHNICAL SPECIALTIES:**

**PROFESSIONAL HISTORY:**

**EDUCATION:**

**PROFESSIONAL REGISTRATIONS & AFFILIATIONS:**

**REPRESENTATIVE PROJECT EXPERIENCE & QUALIFICATIONS (Describe experience on projects of similar size, cost, complexity and identify role performed on each (i.e. project manager, safety inspector, etc. Note particularly experience working with subcontractors identified for this project.):**

**3.3 BIDDER'S DEMONSTRATED PRIOR AFFIRMATIVE ACTION EXPERIENCE**

**EXPLANATION OF EXISTING AFFIRMATIVE ACTION PLAN CONCERNING WORKFORCE AND PROCUREMENT PRACTICES:**

**DOES YOUR FIRM PERFORM PERIODIC REVIEWS OR SELF-AUDITS OF ITS AFFIRMATIVE ACTION PLAN AND WORKFORCE GOALS?**

YES  NO

**DESCRIBE OR ATTACH CURRENT POLICIES ON NONDISCRIMINATION IN EMPLOYMENT AND HIRING, EQUAL EMPLOYMENT OPPORTUNITY FOR VETERANS AND INDIVIDUALS WITH DISABILITIES, AND PREVENTION OF HARASSMENT AND RETALIATION.**

**APPROACH FOR IMPLEMENTING WORKFORCE GOALS ON THE PROPOSED PROJECT:**

### **3.4 BIDDER'S OVERALL APPROACH TO THE PROJECT**

Indicate approach and methodology for executing the Project addressing relevant topics as indicated in section 3.4 of the RFP.

### **3.5 BIDDER'S APPROACH TO SCHEDULE**

(Bar-chart schedule to be attached)

**Bidder must submit (attach to this form) a detailed bar-chart schedule for completion of the project, showing all design phases, the securing of DOE and DCA approvals of plans, as well as tracking major construction activities and milestones including substantial completion, final completion and project closeout.**

**Describe the bidder's approach and methodology for executing the Project within the milestone dates provided. Address topics relevant to the performance and completion of the project that may include, without limitation, the following: identification of schedule concerns and constraints (e.g., completion of preliminary and final design, permitting issues, potential for phased DCA release, labor and material availability, winter weather conditions) and plan for completion of the project in accordance with the Authority's proposed date for contract completion. Include discussion of plan for maintaining schedule and providing regular schedule updates.**

### 3.6 APPROACH TO LEED REQUIREMENTS

(attach LEED checklist)

Describe the bidder's approach to achieving the proposed level of LEED certification. The narrative shall confirm the level of LEED certification (basic, Silver, Gold, or Platinum) the Bidder proposes to be achieved, and discuss the approach to achieving this level of certification (i.e., integration of LEED requirements in design, monitoring compliance through design and construction, process for submission to USGBC for certification, etc.) The completed LEED checklist (form provided) is to be submitted along with this form identifying the specific LEED features which the Bidder proposes to incorporate in the design and construction of the project.



# LEED 2009 FOR SCHOOLS NEW CONSTRUCTION AND MAJOR RENOVATIONS PROJECT CHECKLIST

## Sustainable Sites

**24 Possible Points**

<input checked="" type="checkbox"/>	Prerequisite 1	Construction Activity Pollution Prevention	Required
<input checked="" type="checkbox"/>	Prerequisite 2	Environmental Site Assessment	Required
<input type="checkbox"/>	Credit 1	Site Selection	1
<input type="checkbox"/>	Credit 2	Development Density and Community Connectivity	4
<input type="checkbox"/>	Credit 3	Brownfield Redevelopment	1
<input type="checkbox"/>	Credit 4.1	Alternative Transportation—Public Transportation Access	4
<input type="checkbox"/>	Credit 4.2	Alternative Transportation—Bicycle Storage and Changing Rooms	1
<input type="checkbox"/>	Credit 4.3	Alternative Transportation—Low-Emitting and Fuel-Efficient Vehicles	2
<input type="checkbox"/>	Credit 4.4	Alternative Transportation—Parking Capacity	2
<input type="checkbox"/>	Credit 5.1	Site Development—Protect or Restore Habitat	1
<input type="checkbox"/>	Credit 5.2	Site Development—Maximize Open Space	1
<input type="checkbox"/>	Credit 6.1	Stormwater Design—Quantity Control	1
<input type="checkbox"/>	Credit 6.2	Stormwater Design—Quality Control	1
<input type="checkbox"/>	Credit 7.1	Heat Island Effect—Nonroof	1
<input type="checkbox"/>	Credit 7.2	Heat Island Effect—Roof	1
<input type="checkbox"/>	Credit 8	Light Pollution Reduction	1
<input type="checkbox"/>	Credit 9	Site Master Plan	1
<input type="checkbox"/>	Credit 10	Joint Use of Facilities	1

## Water Efficiency

**11 Possible Points**

<input checked="" type="checkbox"/>	Prerequisite 1	Water Use Reduction	Required
<input type="checkbox"/>	Credit 1	Water Efficient Landscaping	2-4
<input type="checkbox"/>	Credit 2	Innovative Wastewater Technologies	2
<input type="checkbox"/>	Credit 3	Water Use Reduction	2-4
<input type="checkbox"/>	Credit 4	Process Water Use Reduction	1

## Energy and Atmosphere

**33 Possible Points**

<input checked="" type="checkbox"/>	Prerequisite 1	Fundamental Commissioning of Building Energy Systems	Required
<input checked="" type="checkbox"/>	Prerequisite 2	Minimum Energy Performance	Required
<input checked="" type="checkbox"/>	Prerequisite 3	Fundamental Refrigerant Management	Required
<input type="checkbox"/>	Credit 1	Optimize Energy Performance	1-19
<input type="checkbox"/>	Credit 2	On-site Renewable Energy	1-7
<input type="checkbox"/>	Credit 3	Enhanced Commissioning	2
<input type="checkbox"/>	Credit 4	Enhanced Refrigerant Management	1
<input type="checkbox"/>	Credit 5	Measurement and Verification	2
<input type="checkbox"/>	Credit 6	Green Power	2

## Materials and Resources

**13 Possible Points**

<input checked="" type="checkbox"/>	Prerequisite 1	Storage and Collection of Recyclables	Required
<input type="checkbox"/>	Credit 1.1	Building Reuse—Maintain Existing Walls, Floors and Roof	1-2

<input type="checkbox"/>	Credit 1.2	Building Reuse—Maintain Existing Interior Nonstructural Elements	1
<input type="checkbox"/>	Credit 2	Construction Waste Management	1-2
<input type="checkbox"/>	Credit 3	Materials Reuse	1-2
<input type="checkbox"/>	Credit 4	Recycled Content	1-2
<input type="checkbox"/>	Credit 5	Regional Materials	1-2
<input type="checkbox"/>	Credit 6	Rapidly Renewable Materials	1
<input type="checkbox"/>	Credit 7	Certified Wood	1

### Indoor Environmental Quality

**19 Possible Points**

<input checked="" type="checkbox"/>	Prerequisite 1	Minimum Indoor Air Quality Performance	Required
<input checked="" type="checkbox"/>	Prerequisite 2	Environmental Tobacco Smoke (ETS) Control	Required
<input checked="" type="checkbox"/>	Prerequisite 3	Minimum Acoustical Performance	Required
<input type="checkbox"/>	Credit 1	Outdoor Air Delivery Monitoring	1
<input type="checkbox"/>	Credit 2	Increased Ventilation	1
<input type="checkbox"/>	Credit 3.1	Construction Indoor Air Quality Management Plan—During Construction	1
<input type="checkbox"/>	Credit 3.2	Construction Indoor Air Quality Management Plan—Before Occupancy	1
<input type="checkbox"/>	Credit 4	Low-Emitting Materials	1-4
<input type="checkbox"/>	Credit 5	Indoor Chemical and Pollutant Source Control	1
<input type="checkbox"/>	Credit 6.1	Controllability of Systems—Lighting	1
<input type="checkbox"/>	Credit 6.2	Controllability of Systems—Thermal Comfort	1
<input type="checkbox"/>	Credit 7.1	Thermal Comfort—Design	1
<input type="checkbox"/>	Credit 7.2	Thermal Comfort—Verification	1
<input type="checkbox"/>	Credit 8.1	Daylight and Views—Daylight	1-3
<input type="checkbox"/>	Credit 8.2	Daylight and Views—Views	1
<input type="checkbox"/>	Credit 9	Enhanced Acoustical Performance	1
<input type="checkbox"/>	Credit 10	Mold Prevention	1

### Innovation in Design

**6 Possible Points**

<input type="checkbox"/>	Credit 1	Innovation in Design	1-4
<input type="checkbox"/>	Credit 2	LEED Accredited Professional	1
<input type="checkbox"/>	Credit 3	The School as a Teaching Tool	1

### Regional Priority

**4 Possible Points**

<input type="checkbox"/>	Credit 1	Regional Priority	1-4
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## LEED 2009 for Schools New Construction and Major Renovations

100 base points; 6 possible Innovation in Design and 4 Regional Priority points

Certified	40–49 points
Silver	50–59 points
Gold	60–79 points
Platinum	80 points and above

**NEW JERSEY SCHOOLS DEVELOPMENT AUTHORITY**  
**SBE FORM B - SCHEDULE OF SBE PARTICIPATION FOR GOODS & SERVICES VENDORS**  
**NJSDA PROCUREMENT ANALYST:**

CONTRACT NO: \_\_\_\_\_ SERVICES: \_\_\_\_\_ PRIME FED ID NO: \_\_\_\_\_  
 CONTRACT AMT: \$ \_\_\_\_\_ STATEWIDE PROCUREMENT: \_\_\_\_\_ DATE OF AWARD: \_\_\_\_\_

Name of SBE Sub-contractor vendor	Category (see below)	** MBE	** WBE	Address, Telephone Number & Contact Person	Type of Goods or Services Provided	Subconsultant Amount	Projected		% of Total Contract
							Start Date	End Date	
TOTALS									

CONSULTANT (Print Name) \_\_\_\_\_ PREPARED BY: (Print Name) \_\_\_\_\_ VENDOR'S SBE LIAISON (Print Name) \_\_\_\_\_  
 CONSULTANT ADDRESS \_\_\_\_\_ SIGNATURE & TITLE \_\_\_\_\_ TELEPHONE (Include Area Code) \_\_\_\_\_  
 EMAIL ADDRESS \_\_\_\_\_

**NOTE:** As the Prime Contractor of this contract you have a responsibility to meet the following SBE goals:  
 A minimum of 2.5% (5% Category 1, 5% Category 2, 5% Category 3 and the remaining 10% to be allocated among Categories 1, 2, and 3).  
**NJ STATE GOALS:**  
 Category 1: SBE's with gross revenue not exceeding \$500,000  
 Category 2: SBE's with gross revenues exceeding \$500,000, but not greater than \$5,000,000  
 Category 3: SBE's with gross revenue exceeding \$5,000,000, but not greater than \$12,000,000

Pursuant to Executive Order #34, NJSDA is currently monitoring minority/woman-owned participation on all construction and goods and services contracts.  
 Please note, if any of the named subcontractors are a minority or woman owned firm, as well as an SBE, indicate this where appropriate.  
 \*\* MBE/WBE B: Black H: Hispanic A: Asian N: Native American W: Woman \*\*\*Identity of race and gender is voluntary and not required

**SBE FORM C - CONFIRMATION OF SBE STATUS and BID PRICE**

NJSDA Contract #: \_\_\_\_\_

SBE Federal ID #: \_\_\_\_\_

I, \_\_\_\_\_, certify that: \_\_\_\_\_  
I am the \_\_\_\_\_ of the firm of \_\_\_\_\_,  
located at \_\_\_\_\_, which is  
registered as an SBE firm by the New Jersey Treasury Department, Division of Revenue.

I further warrant that I am authorized by the said firm to make this Certification and will provide the information requested by the New Jersey Schools Development Authority (NJSDA) to document the fact that the said firm is a bona fide SBE.

I further state that I am aware my firm has been named on Form A as a proposed Subcontractor, Sub-consultant, or Goods and Service provider on the above contract to meet the General Contractor or Prime Consultant's NJSDA SBE Goals.

Specifically, my Subcontract Bid Amount is: \$ \_\_\_\_\_

I am currently certified as a (please circle all that apply) in the State of New Jersey. SBE MBE WBE  
Please indicate ethnicity for MBE \_\_\_\_\_ Black \_\_\_\_\_ Hispanic \_\_\_\_\_ Asian \_\_\_\_\_ American Indian

**Race and gender identification is voluntary.**

I have attached a copy of my current and valid SBE Registration Certificate issued by the New Jersey Treasury Department, Division of Revenue. If applicable, I have attached the MBE and or the WBE Certification.

\_\_\_\_\_  
Signature Date Email Address

**Acknowledgement and Consent  
(For General Contractor / Prime Consultant Use)**

I, \_\_\_\_\_,  
Company Principal or Executive

hereby agree to award to named subcontractor/subconsultant a contract in the above-stipulated amount pursuant to contract terms and conditions.

\_\_\_\_\_  
Signature Date Email Address

**NOTE: Form C is to be completed by ALL Sub-contractors, Sub-consultants, or Goods and Services Providers to be engaged in the contract and signed by both Parties.**

### 3.9 TECHNICAL PROPOSAL CERTIFICATION

I SWEAR AND AFFIRM that all statements and information contained in the Technical Proposal submitted by \_\_\_\_\_ are true and correct; and all such statements are made with full knowledge that the NJSDA relies upon the truth of the statements contained in the Proposal.

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Title

Sworn and subscribed to before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public of \_\_\_\_\_

My commission expires: \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Notary Public