CITY OF NEW BEDFORD  
Department of Facilities and Fleet Maintenance  

Brooklawn Senior Center Roof Replacement  

IFB # 19192012  

ADDENDUM #3  
The City of New Bedford issues the following Addendum # 3 for  

Brooklawn Senior Center Roof Replacement  

To: All Bidders of Record  

This addendum is issued to advise Bidders of the following:  

1. Revised Form for General Bid to be submitted with the bid documents  
2. Addenda Acknowledgement Form to be submitted with the bid documents.  
3. BID DUE DATE AMENDED:  

Bids are due on Tuesday, August 21, 2018 at 2:00 pm at  
New Bedford City Hall Purchasing Dept., Room 208  
133 William Street  
New Bedford, MA  02740  

End of Addendum  

By: Susan Bruce  
Director of Purchasing  
City of New Bedford  

August 16, 2018
FORM FOR GENERAL BID

DATE: ________________________.

TO:                  CITY OF NEW BEDFORD
                      C/O NEW BEDFORD PURCHASING DEPARTMENT
                      133 WILLIAM STREET, Room 208
                      NEW BEDFORD, MASSACHUSETTS 02740
                      PURCHASING AGENT

A) The Undersigned proposes to furnish all labor and materials required for the Reroofing of the Brooklawn Senior Center 1997 Acushnet Ave, New Bedford MA IN ACCORDANCE WITH THE ENCLOSED CONTRACT DOCUMENTS AND TECHNICAL SPECIFICATIONS.

B) The proposed contract price is __________________________ Dollars.

($ __________________________ ).

Provide a price for the following Alternates

Alternate No 1. Add: _____________ Deduct: ____________________

Alternate No 2. Add: _____________ Deduct: ____________________
Acknowledgement of Addenda:

C) The undersigned agrees that, if he is selected as General Contractor, he will, within five (5) days, Saturdays, Sundays, and legal holidays excluded, after presentation thereof by the awarding authority, execute a contract in accordance with the terms of this Bid, and furnish a Performance Bond, and also a Labor and Materials or Payment Bond, each of a surety company qualified to do business under the laws of the Commonwealth and satisfactory to the Awarding Authority, and each in the sum of the contract price, the premiums for which are to be paid by the General Contractor and are included in the Contract Price.

The undersigned hereby certifies that he is able to furnish labor that can work in harmony with all other elements of labor employed or to be employed on the work and that will comply fully with all laws and regulations applicable to awards made subject to Massachusetts General Laws Chapter 149 Section 44A.

The undersigned further certifies under the penalties of perjury that this bid is in all respects bona fide, fair and made without collusion or fraud with any other person. As used in this subsection the word "person" shall mean any natural person, joint venture, partnership, corporation or other business or legal entity.

The undersigned further certifies under penalty of perjury that the said undersigned is not presently debarred from doing public construction work in the Commonwealth under the provisions of M.G.L. Section 29F of chapter 29, or any other applicable debarment provisions of any other chapter of the General Laws or any rule or regulation promulgated thereunder.

The undersigned hereby certifies, under penalty of perjury, that the said undersigned has paid all State Taxes (Income Taxes, Unemployment Taxes, Excise Taxes, Real Estate Taxes, etc., etc.) due in compliance with the Tax Laws of the Commonwealth of Massachusetts M.G.L. Chapter 62C Sections 47A thru 49A.

The undersigned further certifies that the said undersigned shall comply with the City of New Bedford "Bidders Affirmative Action Requirements, as contained in the BIDDING REQUIREMENTS of these project specifications.

D) **Time of Completion**
The number of calendar days shall not exceed 75 calendar days from the signing of the contract to complete the work of this Contract.

Date: __________________________

Name of General Bidder: ____________________________________________

BY: ____________________________________________

(Authorized Signature) (Title)

Business Address: ____________________________________________

City/State/Zip: ____________________________________________

Telephone #: ____________________________________________

Note: If the bidder is a corporation, indicate the State of Incorporation under the signature and affix the Corporate seal; if a partnership, give full names and residential address if different from the business address.
I HEREBY CERTIFY THAT I HAVE RECEIVED THE FOLLOWING ADDENDUM

ADDENDUM #’S

Person submitting bid

Company Name

Please include this form with your bid if applicable.