ITB-15-088-AC Fire Extinguisher Service Contract

The information below notes changes to the solicitation as noted:

The **Bid Due Date** and Time has been changed to Tuesday, July 19, 2016 at 2pm EST.

The Public Opening of this Bid has changed to Tuesday, July, 19, 2016 at 2pm EST.

Section 2.2 Scope of Services- Part 2.2 Parts is changed to:

3. Signs – FEI with Braille, Extinguisher Inside, Arrows.

The Section 3.0 Bid Proposal Form has been changed. Please utilize the updated Price Proposal Form provide as an Excel attachment to this addendum.

File Name: M-DCPS Fire Extinguisher Service Contract Price Proposal Form.XLS

The following list addresses the questions received regarding the above-referenced solicitation:

1. Question: In Section 2.2 "Scope of Services", 1.3 Definitions. Can you be more specific on the training that is required?

   Answer: Training is addressed within the solicitation in Part 3 Execution Section 3.1D Training.

2. Question: Please confirm that any "Pull Alarm" signs will not be part of this contract as discussed in the pre-bid meeting.

   Answer: Only signs that say Extinguisher Inside.

3. Question: How many wheel units does the MDCPS system have? Are they all 125lb. PK units?

   Answer: Ten to fifteen (10-15) wheel units. Some are BC units and some 125lb PK units.

4. Question: What size K-Class Fire Extinguishers does the MDCPS District have? Is the 500 unit count correct?

   Answer: We have Amerex 2 ½ gallon K-Class Fire Extinguishers. There are over 500 units.

5. Question: Is the 15-20 unit count on the 9lb. Halon Extinguishers correct?

   Answer: It's approximant but close.

6. Question: How many D-Class Fire Extinguishers are there?

   Answer: 10-15.

7. Question: Will the bid date be revised due to the pending addendum?

   Answer: Yes. The bid due date and time has been changed as documented on page 2 of this addendum

8. Question: If the Fire Blanket is missing at the time of inspection, will that be considered vandalism?

   Answer: Yes, unless it was used to extinguish a fire.

9. Question: What is the total count for the fire extinguishers?

   Answer: There are approximately 30,000 fire extinguishers within the District. It depends on the construction in the system.

Clear Form

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA
SCHOOL BOARD ADMINISTRATION BUILDING
Procurement Management Services
1450 N.E. 2nd Avenue, Room 650
Miami, FL 33132

Direct All Inquiries To
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Buyer's Name: Adenia Clark

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BID/RFP ADDENDUM

Date: 07/08/2016

Addendum No. 1

BID/RFP No. ITB-15-088-AC BID/RFP TITLE: Fire Extinguisher Service Contract

This addendum modifies the conditions of the above-referenced BID/RFP as follows:

The proposal deadline date has been changed to Tuesday, July 19, 2016 at 2pm EST.

All other terms and conditions within the above solicitation remain the same.

All information, specifications terms, and conditions for the above-referenced BID/RFP, are included on the document posted on the Procurement Management website at http://procurement.dadeschools.net

The attached pages containing clarifications, additional information and requirements constitute an integral part of the referenced bid.

1. If your bid/proposal has not been submitted, substitute the pages marked REVISED and mail your entire bid/proposal package. **REMEMBER TO SIGN THE BIDDER QUALIFICATION FORM.**

OR

2. If your bid/proposal has been submitted, sign and return this addendum form with the revised pages by the time and date indicated on the Bidder Qualification Form. BY SIGNING THIS ADDENDUM, THE VENDOR AGREES TO THE TERMS AND CONDITIONS CONTAINED IN THE BIDDER QUALIFICATION FORM AND ALL RELATED BID DOCUMENTS.

I acknowledge receipt of Addendum Number 1

PLEASE NOTE: If your firm has forwarded a copy of this bid/proposal to another vendor, it is your responsibility to forward him/her a copy of this addendum.

(PLEASE TYPE OR PRINT BELOW)

LEGAL NAME OF BIDDER: _____

MAILING ADDRESS: _____

CITY, STATE ZIP CODE: _____

TELEPHONE NUMBER: _____ E-MAIL I.D. _____ FAX # _____

BY: SIGNATURE (Manual): _____
OF AUTHORIZED REPRESENTATIVE

NAME (Typed): _____ TITLE: _____
OF AUTHORIZED REPRESENTATIVE