

**BID SPECIFICATION SHEET FOR FB16-020**

INSTALLATION OF DAIKIN VRV HEAT RECOVERY SYSTEM

**Scope:**

Installation of Daikin VRV Heat Recovery System to serve Wilson Hall’s rooms: 105, 123, 180, 181, 183, 184, 185, 186, 188, 189, 190, 191, 193, 193A, 194, 194A. Contact Gregory George at the Physical Plant Department 816-271-4417 to view project site, obtain engineered drawings and specifics of installation. Direct all other questions to Purchasing Manager, Kelly Sloan (816) 271-4465, purchase@missouriwestern.edu

**Timeline of Project:**

* Mandatory pre-bid meeting at Wilson Hall 188 July 29th at 10:00am
* Bid opening August 4, 2015 2:00pm Purchasing Department, Popplewell 221
* Project to be completed by August 31, 2015

**Bid Specification:**

* Installation shall include the mechanical and electrical installations.
* MWSU shall provide all Daikin equipment and rigid piping and insulation to connect the outdoor units to the branch selector boxes. MWSU will also arrange and seal the roof penetration and disposal of existing condensing equipment on the roof.
* Installation shall conform to manufacturer’s instructions and all applicable building codes.
* Installation hall be subject to guidance/oversight and inspection by representatives of Thermal Mechanics Inc.
* All work is to be performed in accordance with MWSU’s “Hot Work” guidelines.
* Isolation valves shall be provided on all lines on the outside unit side of each branch selector box.
* All copper brazing shall be performed utilizing dry nitrogen to prevent oxidation of interior pipe walls.
* Contractor shall warrant their workmanship and provided materials for a period of one year from date of acceptance.
* Contractor shall be liable for equipment damage due to inadequate use of nitrogen during brazing operations.

**This will be a prevailing wage project.**

* + **Bidders must submit a notarized Affidavit of Work Authorization and completed MOU signature pages, per attached memorandum dated January 2014, with their bids.**
	+ **Annual Wage Order Number 22 is currently in effect. A copy of this order will be attached separately once bid is awarded.**
	+ **A Certificate of Liability Insurance will also be required with MWSU listed as an additional insured.**
	+ **Missouri Revised Statute Chapter 292.675 went into effect on August 28, 2008, all on-site employees are required to complete the ten-hour safety training program.**

Bid Amount $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return this pricing sheet with your bid. Include any addendum(s) with your initials.

Pricing must be FOB Missouri Western State University.

All questions should be directed to Purchasing Manager, Kelly Sloan, (816) 271-4465, purchase@missouriwestern.edu

Missouri Western reserves the right to accept or reject any or all items of this bid.

Include with your bid:

* Notarized Affidavit of Work Authorization (see attached) and completed MOU signature pages.

**PREVAILING WAGE PROJECT INFORMATION**

TO: ALL BIDDERS

FROM: MISSOURI WESTERN STATE UNIVERSITY

DATE: January 2014

RE: ADDITIONAL BID SUBMISSION REQUIREMENTS

Please review Missouri statute, 285.530 RSMo, regarding employment of unauthorized aliens. Pursuant to RSMo 285.530 (1), No business entity or employer shall knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri, and (2), the bidder must affirm its enrollment and participation in a federal work authorization program with respect to the employees proposed to work in connection with the services requested herein by:

Submitting a completed, notarized copy of AFFIDAVIT OF WORK AUTHORIZATION (attached) and,

Providing documentation affirming the bidder’s enrollment and participation in a federal work authorization program (see below) with respect to the employees proposed to work in connection with the services requested herein.

A copy of RSMo 285.530 can be viewed in its entirety at:

<http://www.moga.mo.gov/statutes/C200-299/2850000530.HTM>

E-Verify is an example of a federal work authorization program. Acceptable enrollment and participation documentation consists of completed copy of the E-Verify Memorandum of Understanding (MOU). A sample of the MOU is included. For vendors that are not already enrolled and participating in a federal work authorization program, E-Verify is available at:

<http://www.dhs.gov/files/programs/gc_1185221678150.shtm>

*The successful bidder will be required to submit a notarized Affidavit of Work Authorization and the completed MOU signature pages (the last three pages) with their bid. A bid that does not include these items will be deemed Non-responsive.*

**WORK AUTHORIZATION AFFIDAVIT**

**PURSUANT TO R.S.Mo. §285.530**

**(For all bids in excess of $5,000.00)**

**Effective 1/1/09**

State of Missouri )

 )ss

County of Buchanan )

Comes now \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Business Entity Authorized Representative) as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Position/Title) first being duly sworn on my oath, affirm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Business Entity Name)does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

***In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)***

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|  |  |  |
| Authorized Representative’s Signature |  | Printed Name |
|  |  |  |
|  |  |  |
| Title |  | Date |
| E-Mail Address |  | E-Verify Company ID Number |

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am

 (DAY) (MONTH, YEAR)

commissioned as a notary public within the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of

 (NAME OF COUNTY)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and my commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(NAME OF STATE) (DATE)

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of Notary |  | Date |