



**State of West Virginia
Request For Quotation
Construction**

Procurement Folder : 524514

Document Description : Addendum No. 04 Twin Falls State Park Cabin HVAC Improvement

Procurement Type : Agency Contract - Fixed Amt

Date Issued	Solicitation Closes	Solicitation No	Version	Phase
2019-01-15	2019-01-22 13:30:00	ARFQ 0310 DNR1900000079	5	Draft

SUBMIT RESPONSES TO:	VENDOR
BID RESPONSE DIVISION OF NATURAL RESOURCES PROPERTY & PROCUREMENT OFFICE 324 4TH AVE SOUTH CHARLESTON WV 25303-1228 US	Vendor Name, Address and Telephone

FOR INFORMATION CONTACT THE

Angela W Negley
 (304) 558-3397
 angela.w.negley@wv.gov

Signature X

FEIN #

DATE

All offers subject to all terms and conditions contained in this solicitation

ADDITIONAL INFORMATION:

Addendum No.04 is issued to publish and distribute the attached information to the Vendor Community.

INVOICE TO		SHIP TO	
SUPERINTENDENT DIVISION OF NATURAL RESOURCES TWINS FALLS RESORT STATE PARK RR 97 PO BOX 667		SUPERINTENDENT DIVISION OF NATURAL RESOURCES TWIN FALLS RESORT STATE PARK RR 97	
MULLENS	WV25882-0667	MULLENS	WV 25882-0667
US		US	

Line	Commodity Line Description	Qty	Unit Issue	Unit Price	Total Price
1	Heating System Construction Service				

Commodity Code	Manufacturer	Model #	Specification
72151206			

Extended Description

Installation of HVAC units in fourteen (14) cabins

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Non-Mandatory Pre-Bid at 3:00 p. m., EST	2018-12-17
2	Technical Question Deadline 9:00 a.m.,EST	2019-01-02

DNR1900000079	Document Phase Draft	Document Description Addendum No. 04 Twin Falls State Park Cabin HVAC Improvement	Page 3 of 3
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ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

SOLICITATION NUMBER: ARFQ DNR19*79
Twin Falls State Park Cabin HVAC Improvement
Addendum Number: 04

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

Description of Modification to Solicitation:

Addendum issued to publish and distribute the attached documentation to the vendor community.

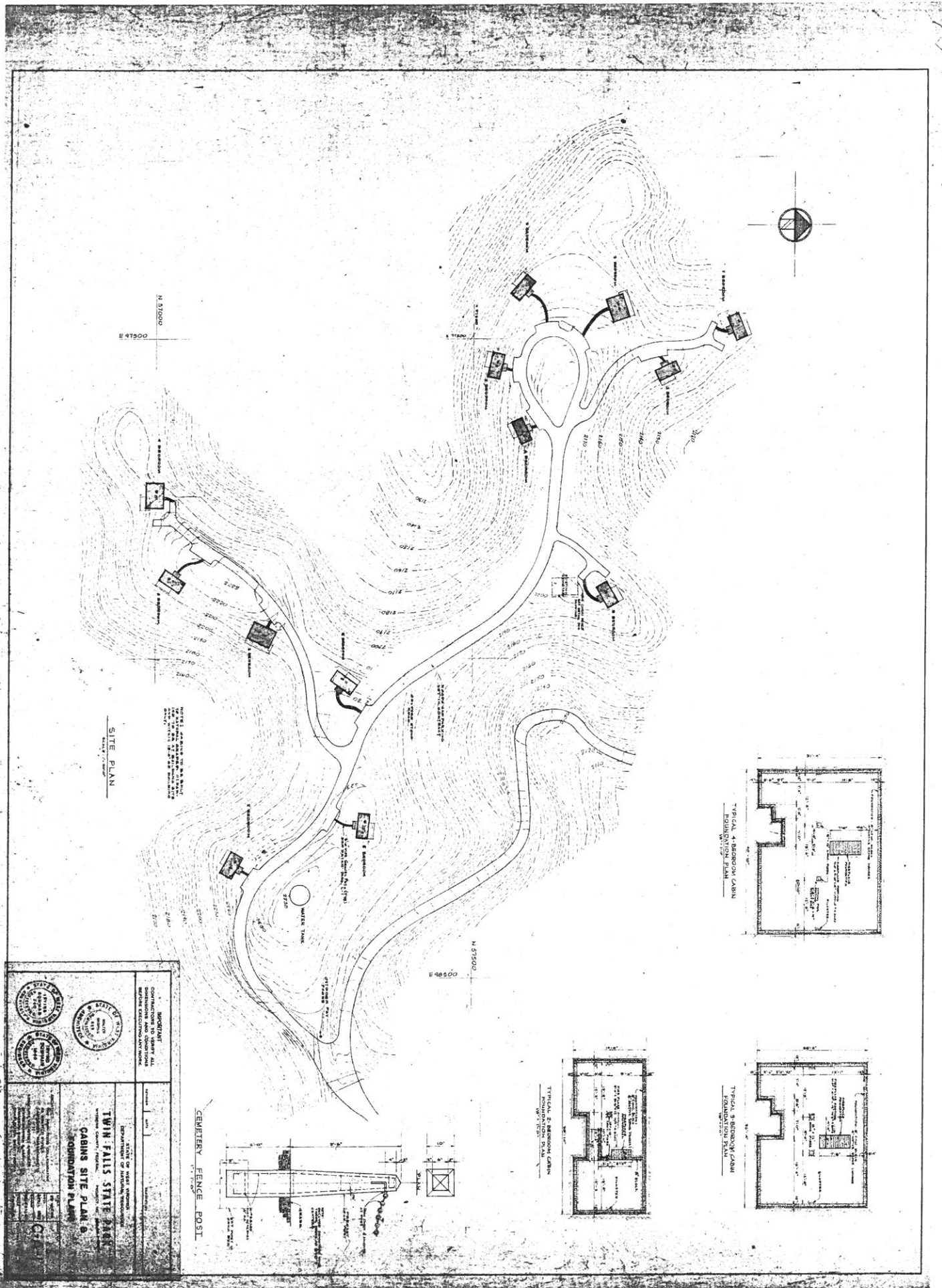
1. To include floor plans. See Attachments A, B, C and D.

NO OTHER CHANGES.

Additional Documentation: Documentation related to this Addendum has been included herewith and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.



SITE PLAN

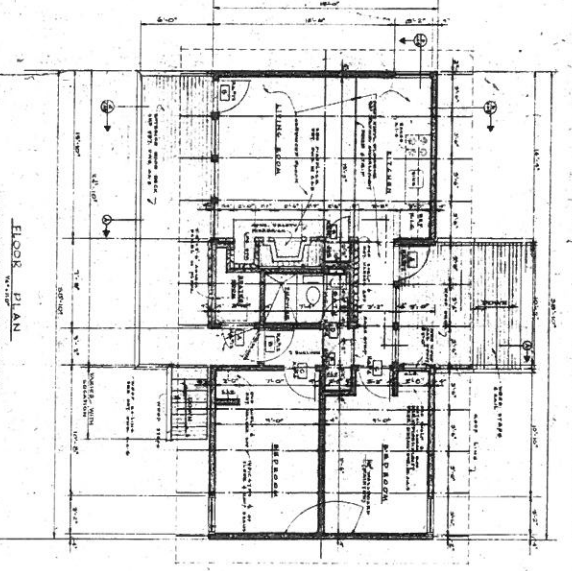
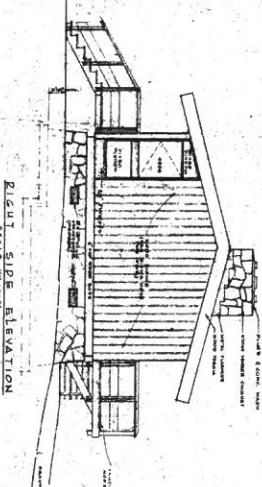
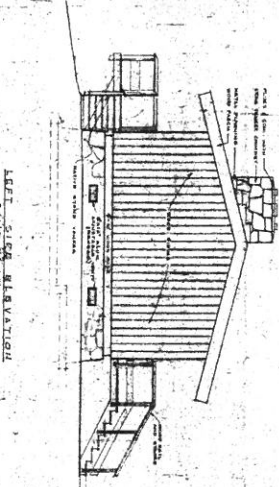
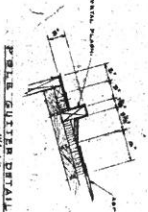
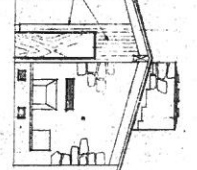
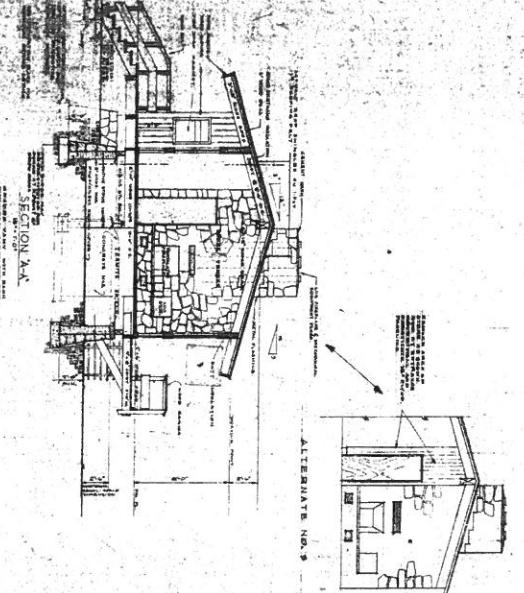
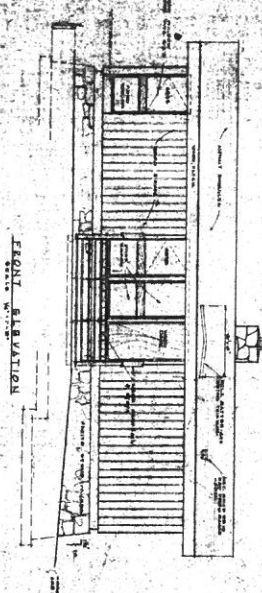
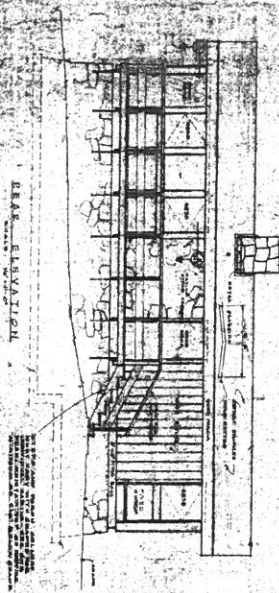
TYPICAL 4 BEDROOM CABIN FOUNDATION PLAN

TYPICAL 2 BEDROOM CABIN FOUNDATION PLAN

TYPICAL 4 BEDROOM CABIN FOUNDATION PLAN

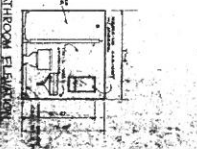
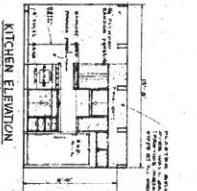
CEMETERY FENCE POST

	<p>IMPORTANT CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPLICABLE AGENCIES.</p>
	<p>STATE OF IDAHO DEPARTMENT OF PARKS AND RECREATION</p>
<p>TWIN FALLS STATE PARK CABINS SITE PLAN & FOUNDATION PLAN</p>	
<p>DATE: 11/19/79 DRAWN BY: [Name] CHECKED BY: [Name] SCALE: AS SHOWN</p>	

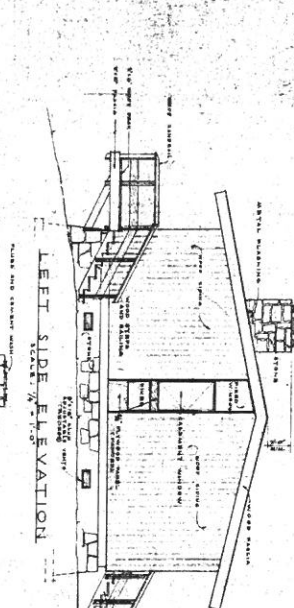
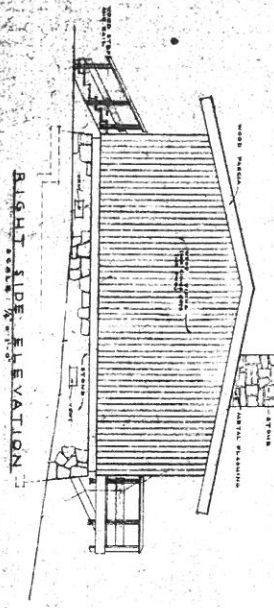


TWIN FALLS STATE
 REGISTERED PROFESSIONAL ENGINEER
 STATE OF IDAHO
 No. 12345
 EXPIRES 12/31/79

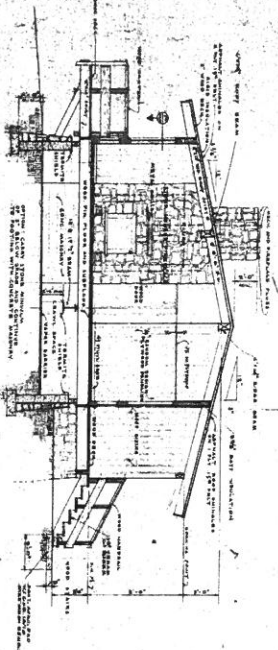
NOTES:
 1. SEE GENERAL NOTES ON DRAWING SHEET 19-79-1.
 2. ALL DIMENSIONS ARE IN FEET AND INCHES UNLESS OTHERWISE SPECIFIED.
 3. FINISHES ARE AS SHOWN ON DRAWING SHEET 19-79-1.



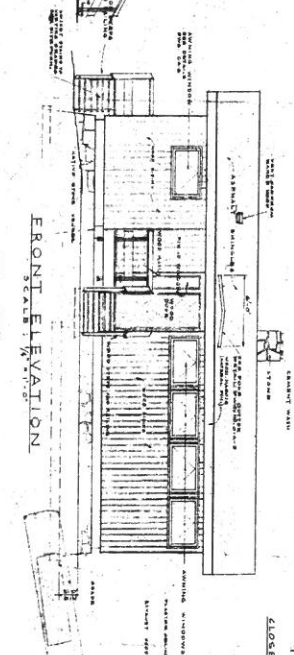
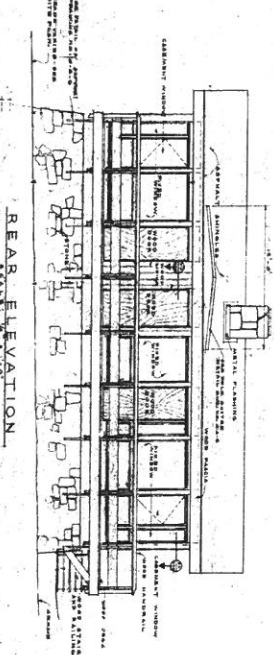
EXTERIOR SIDING DETAIL
 1. SEE GENERAL NOTES ON DRAWING SHEET 19-79-1.
 2. ALL DIMENSIONS ARE IN FEET AND INCHES UNLESS OTHERWISE SPECIFIED.
 3. FINISHES ARE AS SHOWN ON DRAWING SHEET 19-79-1.



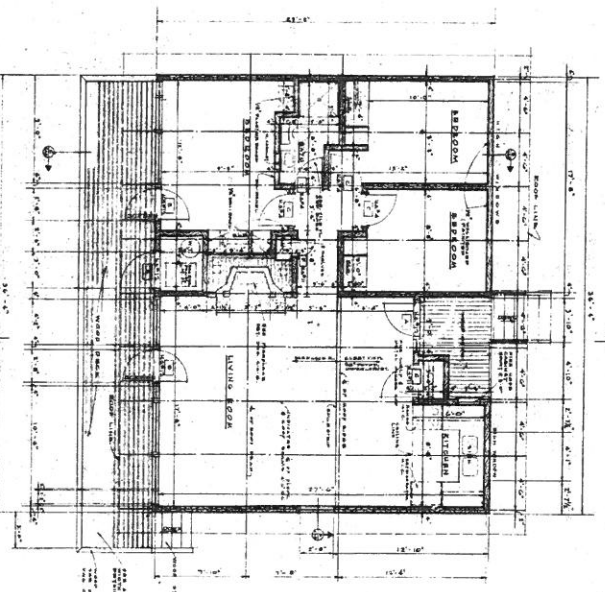
SECTION A-A





DETAIL X-X



FLOOR PLAN

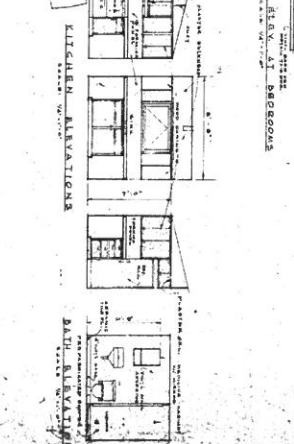


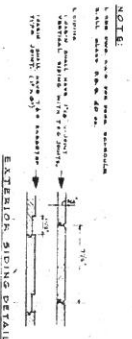
IMPORTANT!
 CONTRACTOR SHALL OBTAIN ALL NECESSARY PERMITS FROM THE LOCAL HEALTH DEPARTMENT AND COUNTY HEALTH DEPARTMENT BEFORE COMMENCING CONSTRUCTION.

JAMES W. WHITE
 PROFESSIONAL ENGINEER
 No. 12,345
 State of Tennessee

TWIN FALLS STATE
 3 BEDROOM CABIN
 FLOOR PLAN, SECTIONS
 & ELEVATIONS

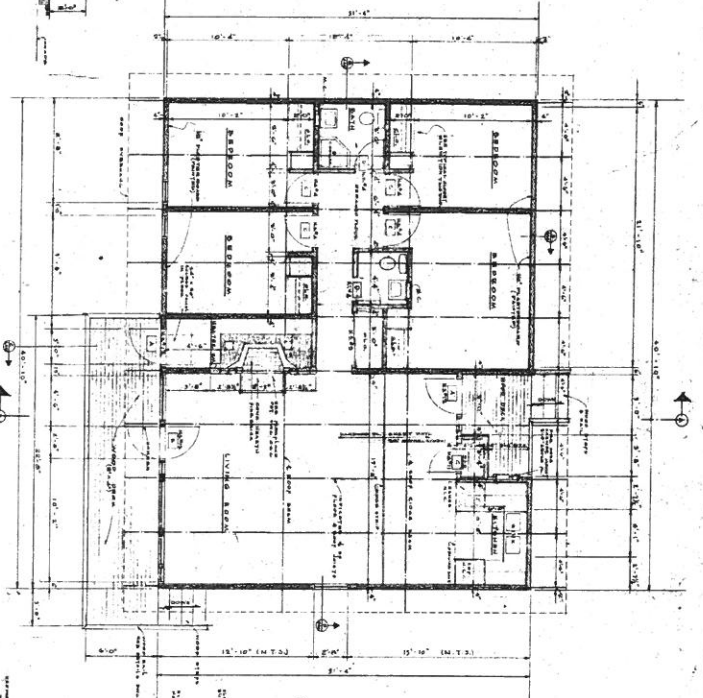
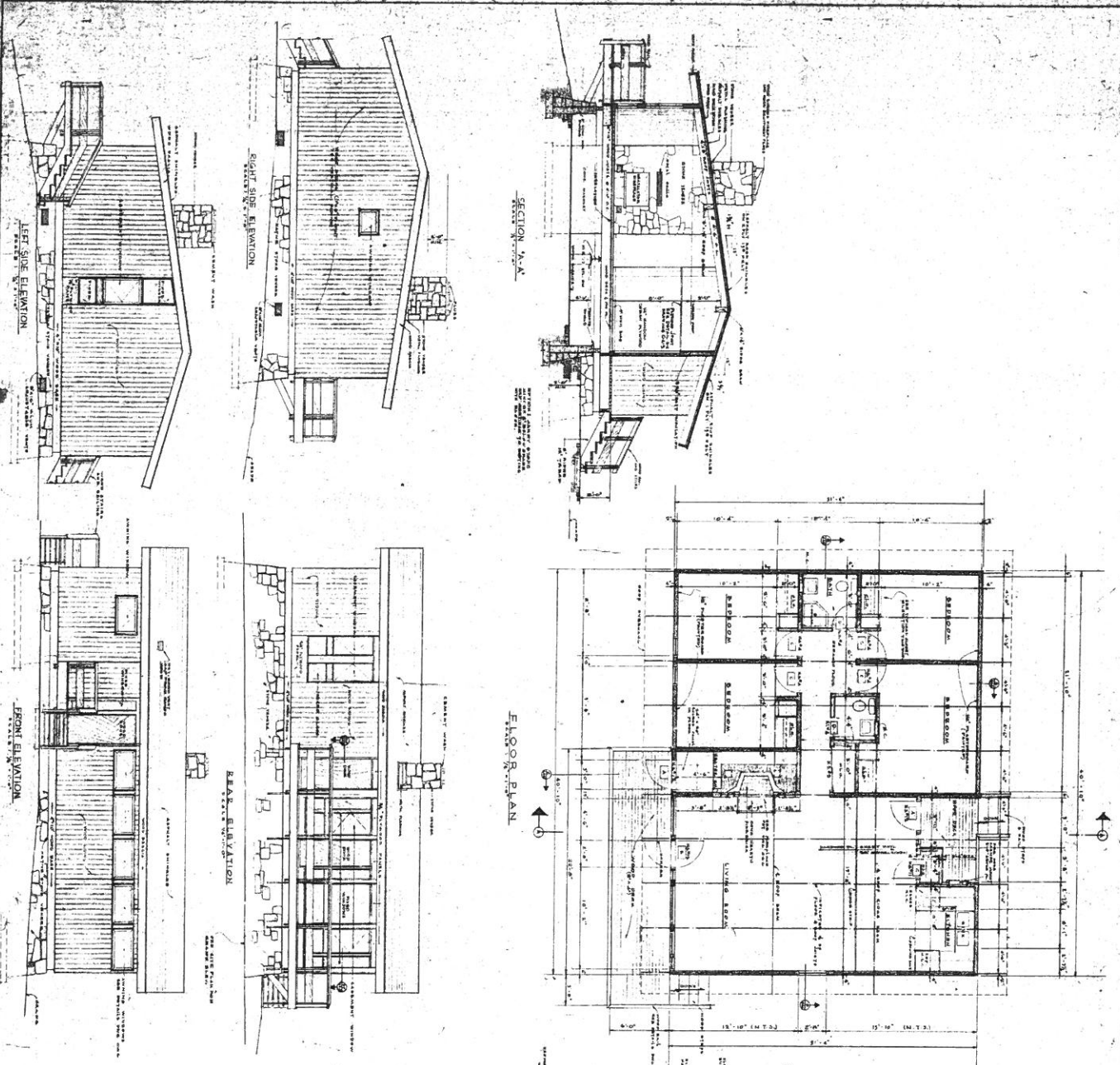


BASE DETAIL AT CLOSET

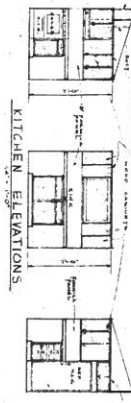


NOTE

1. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.
 2. ALL MATERIALS SHALL BE APPROVED BY THE LOCAL HEALTH DEPARTMENT.
 3. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE TENNESSEE BUILDING CODE.
 4. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS.
 5. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AT ALL TIMES.



FLOOR PLAN



NOTES:
 1. ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.
 2. FINISHES TO BE DETERMINED BY THE ARCHITECT.
 3. SEE SPECIFICATIONS FOR MATERIALS AND METHODS OF CONSTRUCTION.
 4. THIS DRAWING IS THE PROPERTY OF THE ARCHITECT AND IS NOT TO BE REPRODUCED OR COPIED WITHOUT HIS WRITTEN CONSENT.

INDICATED
 CONSTRUCTION TO MEET ALL
 REQUIREMENTS OF THE
 STATE OF NEW YORK
 DEPARTMENT OF NATURE CONSERVATION

TWIN FALLS STATE PARK
 4 BEDROOM CASH
 FLOOR PLAN SECTION
 B. ELEVATIONS

STATE OF NEW YORK
 DEPARTMENT OF NATURE CONSERVATION
 DIVISION OF LAND USE AND PLANNING
 100 STATE STREET
 ALBANY, N.Y. 12242

DATE: 10/1/79

SCALE: AS SHOWN

9A

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: ARFQ DNR19*79

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input checked="" type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Authorized Signature

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.