

Buyer

UNIVERSITY OF CONNECTICUT HEALTH CENTER

Telephone Number

Procurement Operations & Contracts

E-mail Address

263 Farmington Avenue, MC4036

Farmington, CT 06032-4036

Fax Number

ITB NUMBER:	BID DUE DATE:	BID DUE TIME:	ITB SURETY:
		EST	
ITB TITLE:			

ADDENDUM NUMBER: _____

DATE ADDENDUM ISSUED: _____

FOR: The University of Connecticut Health Center

NOTE:

This Addendum must be Signed & Returned with your bid.

Authorized Signature of Bidder

Company Name

Approved By: _____

[_____]

Buyer

(Original Signature on Document in Procurement Files)

UConn Health - UCHC4-120090919 Project: 18-029 "F" Building CT Tower Floor 1 Psych Flooring Finish Improvements

Question Number	Supplier Question	UConn Health Response
1	Contractor requested a full set of drawings to scale for quantity take-offs, etc.?	Refer to plans and specifications dated May 15, 2019. Plans are NOT to SCALE. Refer A-1.0 - see general notes.
2	What are the allowable working hours?	Refer to plans and specifications dated May 15, 2019 - working hours are from 7:00am to 6:00pm, Monday through Thursday. Contractor responsible to verify per plans and specifications. UCHC will consider and review a formal a request to extend working hours.
3	Will a UCHC representative will be assigned to the project?	Yes, A UCHC representative will be assigned to the project as needed.
4	Is there a staging area for materials to be stored overnight and weekends?	Yes, material can be stored across from freight elevator #24 and #25 in the alcove. Material shall NOT be stacked nor stored upright. All material shall be secured, access shall not be obstructed. Contractor is responsible for all material stored including any damages to existing flooring, walls, windows etc. Contractor shall follow all OSHA standards, Section Materials Handling and Storage. Storage in the working areas is prohibited.
5	What are the badging requirements?	All contractors are required to wear a UCONN identification badges. Prior to receiving an identification badge background checks are required. Please see the attached "Background Information Sheet". The process takes approximately to weeks. Contractors with badges from previous projects must have updated badges.
6	What are the parking requirements?	Parking permits are required. UCHC and the Parking, Transportation and Event Services department will assist and assign parking for employees.
7	What elevator access shall the contractor have when moving material?	Elevator #24 and #25 will be available for material and employees.
8	Is there a loading dock to receive material?	Contractor shall coordinate with the UCHC representative including coordination with the shipping/receiving supervisor. All shipments shall be scheduled in advance at the West loading dock. Contractor shall be on-site to receive material, if not the material shipment will be rejected.
9	Contractor asked if material selection could be substituted?	Contractor to refer to the plans and specifications dated May 15, 2019, including the floor finish plan on A-2 for floor finishes.
10	Contractor questioned what means and methods are allowed to remove the carpet tile and mastic.	Refer to the plans and specifications dated May 15, 2019, including drawing A-2 Floor pattern plan notes -see subject titled execution - hand scrape.
11	There is a small section of VCT in the nurses station. Shall the VCT be removed?	The VCT shall remain in place, removal of all wax, debris and prepare to receive acoustic sheet vinyl as specified. The acoustic sheet vinyl will be installed over the existing VCT per the manufactures specifications.
12	Will the flooring terminate at the existing base? Will the existing base be removed and replaced with other material?	Refer to the plans and specifications dated May 15, 2019, including drawing A-3 Floor Construction Plan notes.
13	Is negative air required?	Refer to the plans and specifications dated May 15, 2019. Negative air is required for each single phase/all phases.
14	A question was asked if two seams can be welded if installed on the same day?	Welding of any/all seams can take place the same day of installation.
15	Is it allowable to take additional space to weld seams?	Refer to the plans and specifications dated May 15, 2019 for phasing, including phasing notes on drawing A-1.0 Phase Notes / Legend.
16	How will the seams be protected during none working hours?	Refer to the plans and specifications dated May 15, 2019, including drawing A-1.0 Phase Notes / Legend - MEANS AND METHODS.
17	A separate nurses is shown to be removed. Who is responsible?	Nurses Station shall remain in place.
18	What is the project's duration?	Refer to the plans and specifications dated May 15, 2019, The Contractor shall achieve Substantial completion within 90 calendar days from the date of notice to proceed.
19	Drawing A-3 note 4 shown a separate section of a nurse's to be removed and infill of penetrations in note 5. Who is responsible for the scope of work in note 4 and 5 drawing A-3.	Nurse's station shall remain in place.



BACKGROUND INFORMATION SHEET

PLEASE COMPLETE ALL SECTIONS AND SIGN AT THE BOTTOM

The following information is being solicited for purposes of conducting pre-employment criminal and/or other background checks only and is not used in employment decisions unrelated to the results of the background check.

Name: _____
Last First Middle (spell out)
Social Security Number: _____
Contact Phone: _____ Home Phone: _____
e-mail: _____
Marital Status: ___ Single ___ Married ___ Divorced
Maiden Name: _____ Aliases: _____
Race Eyes Height Physically Disabled:
Sex Hair Weight Yes No
Identifying Scars/marks/tattoos (type & location): _____

Home Address: _____
Number Street City/Town State Zip
Date of Birth: _____
MM/DD/YYYY
Place of Birth: _____
City and State or Country
Citizenship: _____ Visa Status: _____
Drivers License ___ Yes ___ No
State: _____ License #: _____
List the states that you have lived in the last 7 years: _____

Are you related to, or an unmarried partner of, an employee at UConn Health? ___ YES ___ NO

If "YES" list below. Continue on the reverse side if necessary. Per UConn Health Policy #2002-51 a relative is a spouse, father, mother, sister, brother, child, the spouse of a child, or any relative who is domiciled in the employee's household.

Table with 3 columns: Name, Relationship, Department

Have you ever been CONVICTED of an offense against criminal or military law, or are there criminal charges currently pending against you? Exclude minor traffic violations, or any offense settled in juvenile court or under a youth offender law. ___ YES ___ NO

If "YES" list all cases below, providing details as indicated. Continue on the reverse side if necessary. Special Note: Under the provisions of (C.G.S. § 46a-80 a person is not disqualified from state employment solely because of a prior conviction of a crime. The state can deny employment if a person is found unsuitable after considering (1) the nature of the crime, (2) information relating to the degree of rehabilitation, and (3) the time elapsed since the conviction. You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes §46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolleed, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a).

Table with 5 columns: Date, Place, Court Location, Offense(s), Disposition

Have you ever been excluded, disbarred, restricted, disqualified, or sanctioned from any Federal or State programs or government organizations? ___ YES ___ NO

If "YES" list all cases below, providing details as indicated. Continue on the reverse side if necessary. For the CMHC program, fingerprints taken by the Department of Correction will be submitted to the Connecticut State Police and the FBI for a criminal history check.

Table with 5 columns: Date, Place, Agency, Funding, Current Status

Have there ever been any actions against your professional license(s)? ___ YES ___ NO ___ N/A

If "YES" list all cases and details below, as indicated. Continue on the reverse side if necessary.

Table with 5 columns: Date, Place, Agency, Funding, Current Status

Have you brought or will you be bringing, or have transported, to UConn Health any chemicals, radioactive materials and/or any biological materials that are pathogenic viruses, bacteria, biological toxins, fungi, rickettsia, mycoplasma or parasitic organisms? ___ YES ___ NO

IF YES, IMPORTANT REQUIREMENT: You must contact Environmental Health & Safety at 860-679-2723 or jacobs@uchc.edu upon arrival.

I certify that the information provided by me in the Background Information sheet is COMPLETE and TRUE to the best of my knowledge and is made in good faith. I understand that if I knowingly make any misstatement of facts or fail to provide required information I am subject to disqualification or dismissal and other penalties as they may be prescribed by law, policy, or regulation. This sheet is not complete without a wet signature. Digital signatures are not acceptable.

SIGNATURE: _____ DATE SIGNED: _____

OFFICIAL USE ONLY
MUST BE COMPLETED BY HIRING DEPARTMENT
PUBLIC SAFETY USE ONLY
submitted by: Bartis L, D'Angelo E, Duggal J, Leone M, Logan N, Parrette J, Rucker P, Seklecki D, Smith J, Other:
return to: Bartis L, D'Angelo E, Duggal J, Leone M, Logan N, Parrette J, Rucker P, Seklecki D, Smith J, Other:
area: CMHC, Clinical Operations, Clinical Faculty, Day Care, Dental Clinics, IT, Non-Clinical, Research
employee type: Paid, Volunteer, Grad Assistant, Dental Resident/Non-Surgical, Unpaid, Student, Contractor:
job title:
Result/Date
Cleared
Rejected - failure to disclose
Rejected - criminal history
Administrative Review Pending
Administrative Review Complete