

REQUEST FOR PROPOSAL

FOR CONSTRUCTION OF A CORE FACILITY ROOM AT THE DOWNSTATE ADVANCED BIOTECHNOLOGY INCUBATOR

By

**Downstate Technology Center, Inc. (DTCI) for
SUNY Downstate Medical Center**

Project Name:	Core Facility Room Advanced Biotechnology Incubator
Location:	760 Parkside Avenue, Room 312 Brooklyn, New York
Project Manager:	Tim Herzog
Date:	October 25, 2010

Request for Proposal

Downstate Technology Center, Inc. ("DTCI") is seeking proposals from qualified, licensed firms to provide construction services related to the Core Facility Room at the Advanced Biotechnology Incubator in Brooklyn, New York. The scope of work includes mechanical, electrical, plumbing, HVAC and other infrastructure elements as set forth in the attached drawings to prepare the room for installation of an autoclave and dishwasher. The Core Facility Room currently contains a water filtration system, an ice machine and a flask scrubber.

Background

The State University of New York Health Science Center at Brooklyn, SUNY Downstate Medical Center, is one of four health science centers within the 64-campus SUNY system. SUNY Downstate has implemented an ambitious and comprehensive initiative to foster biotechnology research and development in New York City. The cornerstone of this initiative is the Biotechnology Incubator. The Downstate Advanced Biotechnology Incubator, which is overseen by Downstate Technology Center, Inc., a 501(c)(3) non-profit organization, provides start-up and early stage companies affordable wet laboratory / office and medical space. The building is fully occupied.

The Core Facility Room is approximately 377 square feet located in Room 312 on the third floor of the Incubator building.

***** This project is financed with public funds. All contractors must comply with New York City grant requirements, including, but not limited to, VENDEX, insurance coverage and Employment Reporting.*****

Scope of Work

Construction of the Core Facility Room for the installation of an autoclave and dishwasher includes, but is not limited to:

- Replace existing PVC tile floor with rubber flooring system
- Upgrade mechanical, electrical, plumbing, HVAC, etc. according to architect's plan
- Install floor drain according to plan
- Install new wall according to plan
- Relocate light fixtures and sprinkler heads
- Ensure compliance with all applicable codes, obtain all required permits and make all appropriate filings with the Department of Buildings and other New York City agencies
- Consider methods to minimize disturbance to tenants from vibrations, noise, odors, etc., including days and hours of work

The scope of work is set forth in detail in the attached plans, which are incorporated as a part of this Request for Proposal.

INSTRUCTIONS

Review the Scope of Work to ascertain the requirements and other pertinent information.

Proposals must include:

Description of services
Description of the qualifications of individuals who will comprise the service team, including years at firm and total bioscience experience
Identification of the kinds of subcontractors to be included on the project team
Identification of the person or company your firm would expect to use for each role and qualifications of each subcontractor
Indicate whether subcontractors have VENDEX clearance
Resumes and project lists for each team member
Timeline
Cost proposal

Provide the firm's brochure and/or a letter describing the firm's size, structure, and disciplines, the firm's experience and a description of its experience in constructing biotechnology and/or bioscience laboratory and availability of each member of the team (i.e., how much time each team member will be able to devote to the project).

Incomplete proposals will not be considered.

For inquiries contact Tim Herzog at Therzog@downstate.edu or (718) 270-2704

Submit four (4) copies of the RFP package **by 3:00 PM on Monday, November 8, 2010** to:

**Tim Herzog
SUNY Downstate Medical Center
450 Clarkson Avenue, Box 13
Brooklyn, NY 11203-2098
Phone: 718-270-2704**

Allow sufficient time for delivery of your proposal. Late proposals will not be considered. DTCl reserves the right to reject any or all proposals.

Any costs incurred by the bidder in the preparation, duplication or delivery of the submittal are the sole responsibility of the bidder and will not be reimbursed.

All proposals and accompanying documentation submitted in response to this RFP shall become the property of DTCl and will not be returned to the respondents.

Prior to making an award, DTCl reserves the right to require a respondent to submit additional information bearing on the respondent's ability to perform the work, as DTCl deems appropriate. In making its evaluation, DTCl may consider any information available to it concerning the qualifications of the respondent.

DTCl may cancel this RFP, in whole or in part, at any time before contract award. Issuance of this RFP creates no obligations on the part of DTCl to award a contract.

**Amendment 1
to
REQUEST FOR PROPOSAL**

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Walk-Through:

Non-mandatory walk-through of the site: 11:00 AM on Wednesday, November 3 at 760 Parkside Avenue, Brooklyn, NY 11226. Please contact the office of Tim Herzog if you plan to attend the walk-through.

Bid Documents:

One copy of Bid Documents can be picked up in the office of Tim Herzog at SUNY Downstate Medical Center, 450 Clarkson Avenue, Brooklyn, NY 11203; additional copies are available from National Reprographics, Inc, 193 Joralemon Street, Brooklyn, NY 11201 (718) 875-0696, reference Order No. 016918.

Bid Response Form:

All bidders must complete and submit the attached Bid Response Form.

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Bid Response Page

Contractor Name:

Contact Person:

Name:

Telephone:

E-mail:

Is Contractor a Minority/Woman owned Business Enterprise (M/WBE): ____ Yes ____ No

Contract Duration: _____ (# of weeks)

All respondents must attach a proposed schedule indicating sequence and duration of all construction details, including equipment acquisition lead times.

Guaranteed Maximum Price:

By submitting a response to the Request for Proposal, the Contractor represents that it is familiar with the project, including existing conditions at the site, and the bid assumes full familiarity with site project conditions.

Contractor agrees to comply with all grant requirements of the New York City Economic Development Corporation, including, but not limited to, completion of VENDEX clearance, proof of appropriate insurance, filing of Employment Reports, etc.

For a "No-Bid" response, please return only the signature page signed and marked "No-Bid."

I/We certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free competition; that no attempt has been made to induce any other person or firm to submit or not to submit a bid; that this bid has been independently arrived at without collusion with any other bidder, competitor, or potential competitor; that this bid has not been knowingly disclosed prior to the opening of bids of any other bidder or competitor; that the above statement is accurate under penalty of perjury. We will comply with all terms, conditions, and specifications required by the State of New York in this request for bid and all terms of our bid.

Authorized Name (type or print)

Authorized Signature

Title

Telephone

Date

Vendor Name

Information concerning the availability of New York State subcontractors and suppliers is available from the New York State Empire State Development agency, including a directory of certified M/WBEs. We encourage the use of New York State subcontractors and suppliers and participation of certified M/WBEs where possible.

Contractor's services shall be subject to a mutually acceptable services agreement and the attached minimum insurance terms, to be negotiated after award.

INSURANCE REQUIREMENTS

The Contractor shall purchase and maintain at a minimum the following types of insurance coverage and limits of liability:

1. Commercial General Liability (CGL) with limits of insurance of not less than \$1,000,000 each Occurrence and \$2,000,000 Annual Aggregate.

If the CGL coverage contains a General Aggregate Limit, such General Aggregate shall apply on a per project basis.

Health Science Center at Brooklyn Foundation, Inc., State University of New York Downstate Medical Center, Downstate Technology Center, Inc. and the Research Foundation of State University of New York shall be included as Additional Insureds on the Contractor's CGL using ISO Additional Insured Endorsement CG 20 10 11 85 or an endorsement providing equivalent coverage to the Additional Insureds. The CGL insurance for the Additional Insureds shall be as broad as the coverage provided for the named insured Contractor. It shall apply as primary and non-contributing insurance before any insurance maintained by the Additional Insureds.

2. Business Automobile Liability (AL) with limits of insurance of not less than \$1,000,000 each accident.

AL coverage must include coverage for liability arising out of all owned, leased, hired and non-owned automobiles.

3. Workers Compensation (WC) (statutory limits of coverage) & Employers Liability (EL) with limits of insurance of not less than \$500,000 each accident for bodily injury by accident, \$500,000 each employee for injury by disease and \$500,000 policy limit for disease.

The Policy shall include an All States coverage endorsement.

4. Commercial Umbrella Liability (UL) with limits of insurance of not less than \$5,000,000.

UL coverage must include as Additional Insureds all entities that are Additional Insureds on the CGL policy. The UL coverage for the Additional Insureds shall apply as primary and non-contributing insurance before any other insurance or self-insurance, including any deductible, maintained by or provided to the Additional Insureds other than the CGL and EL coverage maintained by the Contractor.

5. Professional Liability Insurance (where applicable – when the Contractor is providing Asbestos Abatement services, Air Quality Testing services and/or any other Professional Advisory / Consulting services) with limits of insurance of not less than \$1,000,000 per claim.

6. Professional Liability Insurance (where applicable – Architectural, Engineering, Environmental, Surveying related services) with limits of insurance of not less than \$1,000,000 per claim.

7. Waiver of Subrogation:

Contractor waives all rights against Health Science Center at Brooklyn Foundation, Inc. State University of New York Downstate Medical Center, Downstate Technology Center, Inc. and the Research Foundation of State University of New York, as well as these entities' directors and employees for recovery of damages to the extent these damages are covered by CGL, AL, WC & EL or UL insurance maintained per the requirements stated above.

ADDENDUM #2

NADASKAY KOPELSON ARCHITECTS

ARCHITECTURE | ENGINEERING PLANNING INTERIORS



Date: October 22, 2010
To: Tim Herzog & David Norton
Company: Downstate Technology Center
From: Tamara Iwaseczko
Project No.: #Y165.001
Project Name: Advanced Biotechnology Incubator – Core Facility
Intent: This Addendum is issued for the purpose of amending certain requirements of the contract documents. Unless otherwise specified herein, all work shall conform to the applicable provisions of the contract documents.

ITEM NO.	REMARKS
2.1	Bonding not required; remove specification Section 006150 Bonds from Project Manual.
2.2	See revised specification Section 003000 Bid Form (attached).

END OF ADDENDUM #2

SECTION 003000 - BID FORM

TO: SUNY Downstate Medical Center
Facilities Management and Development
450 Clarkson Avenue
Brooklyn, New York 11203
ATTN : Tim Herzog
Phone: 718-270-2704
Fax: 718-270-4130

The undersigned _____
(Name of Bidder) (Phone #)

hereby proposes to furnish all labor and materials and perform all work for the SUNY Downstate, Downstate Technology Center, Advanced Biotechnology Incubator – Core Facility project, Brooklyn, New York.

BASE BID _____
(\$ _____) DOLLARS

BID BREAKDOWN

The bidder shall break down the Lump Sum Contract Base Bid as follows:

General Conditions	\$ _____
Insurance	\$ _____
General Construction	\$ _____
Architectural Finishes	\$ _____
HVAC	\$ _____
Plumbing	\$ _____
Electrical	\$ _____
Fire Protection	\$ _____
TOTAL	\$ _____

TIME TO COMPLETE: (not to exceed 90 calendar days)

- i. If awarded this contract, the undersigned will complete the work within 90 days (number of calendar days) from the date of the contract. (Note: Bidder shall insert time of completion.)

If written notice of the acceptance of this Bid is mailed, emailed or delivered to the undersigned within 30 days after the date of opening of bids, the undersigned will, within ten (10) days after acceptance, execute and deliver a contract, in accordance with the Specifications and Bid as accepted.

Receipt of the following Addenda to the Drawings and Specifications is acknowledged:

<u>Addenda No.</u>	<u>Date</u>	<u>Addenda No.</u>	<u>Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signed Signature _____

Typed Signature
(and Title) _____

Name of Firm _____

Federal I.D. No. _____

Address of Firm _____

Actual Address of
Designated Officer
(Do not use
P.O. Box No.;
Use Street Address) _____

Dated _____

END OF SECTION 003000