

**BOARD OF COUNTY COMMISSIONERS
ORANGE COUNTY, FLORIDA**

REQUEST FOR PROPOSALS (RFP) Y20-134; ADDENDUM # 5

ELEVATORS AND ESCALATORS MAINTENANCE SERVICE

This Addendum is hereby incorporated into the bid documents of the project referenced above. The following items are clarifications, corrections, additions, deletions, and/or revisions to and shall take precedence over the original documents. Additions are indicated by underlining and deletions via ~~strikethrough~~.

A. The Bid Opening Date is changed to Tuesday, February 4, 2020 at 2:00PM

B. The Fee Schedule Form is deleted in its entirety and replaced with the Revised – Fee Schedule Form as Attachment 2 to Addendum 5.

C. Appendix A- Elevators and Escalators Maintenance Services and Appendix B- Elevators and Escalators Maintenance Services are deleted in their entirety and replaced with Attachment 1 to Addendum 5, Revised-Appendix A- Elevators and Escalators Maintenance Services and Revised - Appendix B – Elevators and Escalators Maintenance Services.

D. Questions and Answers

- 1. Question:** Please confirm there are or are not Federal Funds being used in this contract.

Answer: No federal funds will be used in this contract.

- 2. Question:** Please provide service call historical data for all sites. The previous 2-years is requested if possible.

Answer: This information has not been maintained and is not available at this time.

- 3. Question:** If a subcontractor is not listed with the initial proposal and a contract is awarded, can awarded contractor still use a subcontractor?

Answer: Yes, however, the contractor shall obtain written approval from the County prior to using any subcontractor. The Contractor shall only invoice the County per the rates on the Revised - RFP Fee Proposal Form.

4. How will pre-existing deficiencies be handled? If the upon award incoming contractor finds a deficiency will county reimburse the contractor to abate the deficiency? Please describe how this situation will be managed.

Answer: Upon award, the equipment is accepted by the Contractor in “as is state”. The County will allow sixty (60) calendar days from the contract commencement date for the awarded contractor to identify and provide a quote to the County for all pre-existing elevator and escalator deficiencies. The burden of proof for all pre-existing deficiencies shall be the responsibility of the awarded Contractor. The County reserves the right to have all deficiencies identified by the Contractor confirmed by a qualified third party selected by the County. A delivery order will be issued to the Contractor to reimburse for bringing all pre-existing deficiencies into compliance with the contract within thirty (30) calendar days of the delivery order date or as mutually agreed to in writing. The delivery order will utilize the labor and material line items per the RFP Revised -Fee Proposal Form. The Contractor shall be responsible for all deficiencies not pre-existing and those identified after the sixty days.

The Contractor is responsible for performing according to the contract during the referenced sixty days.

5. **Question:** Page 1 – Hours of Performance. Will the County recognize the standard union billing schedule of Regular Time, Overtime and Double Time? We do not want to get caught in a semantics issue. All union companies follow the IUEC Collective Bargaining Agreement (CBA) labor description and not all work occurring outside contract work hours is deemed “Overtime”. Please confirm county will accept the union labor categories.

Answer: The Proposers shall incorporate expected labor expenses including union rates into the unit prices for labor on the RFP Revised - Fee Proposal Form. No adjustment shall be made to these unit prices after contract award unless otherwise noted in the RFP document.

6. **Question:** Page 4 – County specifically states it may use any means necessary to complete work, including but not limited to hiring another Contractor. Please explain when and if that situation would be considered applicable.

Answer: The situation would be applicable if the Contractor is unable to successfully correct a deficiency to any contracted unit, in addition to non-

performance, or any situations where the contractor is not performing according to the contract.

- a. **Question:** Please provide number of times in the last 5-years county has implemented this clause.

Answer: This is not frequently used. An exact number is not available. The County estimates that this clause has been implemented less than five times in the last five years.

- b. **Question:** Furthermore, the contract requires Contractors to provide additional insured as part of their insurance. Please note we cannot ensure work performed by other Contractors. Considering this scenario please confirm County will remove additional insured requirement or revise ability to bring in other Contractors to complete any/all work.

Answer: There shall be no change to the insurance language. The Contractor is not required to insure the work of contractors engaged directly by the contractor under separate order.

- c. **Question:** Liquidated Damages are also mentioned in this part of the specification; however, we did not see any additional reference to liquated damages in the scope documents. Please provide clarification whether liquated damages will or could be used as p [sic]

Answer: Liquidated damages will be used only where and as specified in the RFP.

7. **Question:** Page 5 – Travel Time – County states it will not pay for any travel time, please confirm this also applies for service calls and situations beyond a Contractors control. If yes, how can Contractors offset the real cost of travel time for situation they did not create?

Answer: The proposer shall include all estimated overhead cost, inclusive of travel time, in the unit prices on the RFP Fee Response Form. Refer to the Scope of Service, 6. TRAVEL TIME AND PARKING for additional details related to travel time reimbursement.

8. **Question:** Page 5 – please identify all sites were Contractors will need to pay to park.

Answer: Currently, only the Downtown District Courthouse locations require Contractors to pay for parking.

9. Question: Please identify the County's elevator consultant.

Answer: The County's elevator consultant is Lerch Bates.

10. Question: Page 11 – paragraph C – states County will not pay for items 1-5, however please confirm County will pay for items 1-5 if the reason for the service call is due to conditions beyond the Contractor's control.

Answer: No reimbursement shall be made to the Contractor for callback services performed under the awarded contract unless the callback is due to an exclusion as outlined in Scope of Service, Section 15. CONTRACT EXCLUSIONS.

11. Question: Page 14 – paragraph F – states Contractor shall possess all diagnostic tools required to maintain, test and troubleshoot equipment. However, we were not allowed to see all equipment please identify what tooling is required to meet his requirement.

Answer: All proposers were invited to a walkthrough to view the equipment in the Courthouse and all of the equipment at the Corrections Department Complex. The equipment at both facilities are representative of the equipment throughout the County. The Contractor shall use their expertise in the selection of the diagnostic tools.

Appendix A and B attached are revised to provide the unit controller manufacturers, model numbers, and serial numbers.

12. Page 14 – paragraph M

a) **Question:** Does the County want bidding Contractors to identify obsolete equipment within their proposal for equipment that was reviewed at the walkthrough?

Answer: No. The awarded contractor shall notify the County of any systems, material, or parts within all units that are obsolete within the first (60) sixty calendar days of contract commencement. The Contractor shall notify the County in advance of obsolescence during the term of the awarded contract.

b) **Question:** Please provide a list of all equipment the County has already identified as obsolete. If a list does not exist, should

bidding Contractors assume the County has not received any notice of obsolescence regarding any piece of equipment in service?

Answer: A list does not exist, however, the following modernization projects are in progress:

- County Administration Elevator Modernization
- Courthouse Elevator Modernization
- Courthouse Escalator Modernization
- IOC II Elevator Modernization

The following modernization projects are in the planning phase:

- Regional History Center Elevator Modernization

The awarded Contractor will not be responsible for modernization of equipment and any pre-existing equipment obsolescence. Any pre-existing obsolescence shall be identified by the Contractor within the first sixty (60) calendars days of Contract commencement.

13. Question: Page 14 – paragraph O Special Note...please provide specific regulations for parts, lubricants and material storage?

Answer: Only small parts as approved by the County shall be stored in cabinets in the machine rooms. Flammables and lubricants are not to be stored in the machine rooms but may be stored in the County's warehouse with County's approval and is dependent upon space availability.

14. Question: Page 21 – item 11 – under escalator maintenance requirements mention is made to remote monitoring devices. Please confirm if contract escalators have any working, remote monitoring devices.

Answer: Remote maintenance monitoring devices are not applicable at this time but may become applicable during the term of the contract.

15. Question: Page 21 – paragraph C Escalator Clean-Down – during the site visit contractors were informed they could use area adjacent to the escalators to stack escalator steps for the clean-downs, please confirm Contractors can use the adjacent space to store steps throughout the clean-down process.

Answer: The area adjacent to the escalators may be used for stacking of approximately five steps. The County will provide additional space as needed for the clean-down process.

16. Question: Page 21 – paragraph C Escalator Clean-Down – please confirm when the last annual clean-down was performed and if all steps were pulled out.

Answer: This information is not available. The Contractor shall be responsible for performing a clean-down within the first sixty days of contract commencement.

17. Question: Page 23 – paragraph E – Please provide an estimate of how often each of the 6-items listed in this paragraph occur. Contractors not familiar with the contract need to have an idea how much time they need to budget to meet this requirement.

Answer: Items 1-3 occur annually. Items 4-6 occur on an as-needed basis.

18. Question: Page 24 – 26 Performance Requirements – please confirm all contract equipment is currently operating at specified performance criteria.

Answer: An equipment audit is not available for all units to confirm this. Please refer to question 12-b, for a list of modernization projects and their status.

19. Question: Page 4 Submittal Requirements paragraph C, subparagraph B – non-OEM bidders are required to provide documentation from the manufacturer that they are authorized service partner to maintain the TKE Destination Dispatch equipment. However, TKE is a competitor and does not consider any other elevator/VTE contractor an authorized service partner. Please confirm without this documentation contractors will not be considered for award even if they bid on Lot B.

Answer: The solicitation requires the equipment to be serviced by a firm duly authorized by the manufacturer. This requirement ensures applicable warranties are maintained and all diagnostics and repairs are factory authorized. The County does not actively monitor a manufacturer's third party relationships (authorized resellers, dealers, distributors or service partners), these may emerge at any time, therefore this solicitation is

issued in the interest of achieving maximum competition from all qualified proposers.

20.Question: MBE/WBE/ SDV – Please confirm if incumbent elevator contractors are meeting MBE/WBE and/or SDV requirements. Please confirm award can be made to contractors who do not meet the 24% goal.

Answer: The current contracts Y14-1054 and Y14-1055, that are being combined into this RFP Y20-134-AV were Invitation for Bids and not Request for Proposals, therefore there were no MBE/WBE and/or SDV requirements to meet. Participation in the achievement of MWBE goals is encouraged, however, firms will not be disqualified for not meeting the 24% goal.

21.Question: We request a date and time to survey the elevators.

Answer: All proposers were invited to a walkthrough to view the equipment in the Courthouse and all of the equipment at the Corrections Department Complex, per Addendum #2. The equipment at both facilities are representative of the equipment throughout the County. There shall be no additional site visits. However, the Contractor will be allowed sixty (60) days from the contract commencement date to identify and provide a quote to the County for all pre-existing elevator and escalator deficiencies.

E. ACKNOWLEDGEMENT OF ADDENDA

- a. The bidder shall acknowledge receipt of this addendum by completing that applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned no later than the date and time for receipt of the bid.
- b. All other terms and conditions of the RFP remain the same.
- c. Receipt acknowledge by:

Authorized Signature

Date

Title

Name of Firm

ATTACHMENT 1

Revised - APPENDIX A

Y20-134-AV

Elevators and Escalators Maintenance Services

LOT A - NON-OEM ELEVATORS AND ESCALATORS				UNIT TYPE	*Minimum Monthly Maintenance Hours					
FACILITY		UNIT DESIGNATION	STATE #		6am-6pm	6pm-6am				
					Mon-Fri	Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
DOWNTOW DISTRICT										
IOC 1	1	Elevator 1 Passenger	36743	H	1	-	Otis	MCE	HMC-2000	3307984
450 E South St., Orlando, 32801	2	Elevator 2 Passenger	36744	H	1	-	Otis	MCE	HMC-2000	3307982
IOC 2	3	Elevator E-1 Passenger	38963	H	1	-	Otis	MCE	HMC-2000	
400 E South St., Orlando, 32801	4	Elevator E-2 Passenger	38964	H	1	-	Otis	MCE	HMC-2000	3427793
County Administration Center	5	Elevator 1 Commissioner's	34322	T	-	2	Otis	Otis	E411MMS	7659928
201 S Rosalind Ave.,	6	Elevator 2 Main Lobby	34324	T	2	-	Otis	Otis	E411MMS	6359921
Orlando, 32801	7	Elevator 3 Main Lobby	34321	T	2	-	Otis	Otis	E411MMS	6289921
	8	Elevator 4 Mayor's	34323	T	-	2	Otis	Otis	E411MMS	7089925
Regional History Center 65 E Central Ave.,	9	Elevator 1 South	57083	T	2	-	Otis	Otis	A**21290R	52469924
Orlando, 32801	10	Elevator 2 North	57084	T	2	-	Otis	Otis	A**21290R	52479924
Courthouse Building A - Defender 435 N Orange Ave.,	11	Elevator E16 Passenger	50366	T	-	2	Dover	Dover	T - IV	US216670

Orlando, 32801	12	Elevator E17 Passenger	50367	T	2	-	Dover	Dover	T - IV	US216671
Courthouse Building B - Attorney 415 N Orange Ave., Orlando, 32801	13	Elevator E18 Passenger	50362	T	-	2	Dover	Dover	T - IV	US216672
	14	Elevator E19 Passenger	50363	T	2	-	Dover	Dover	T - IV	US216673
Courthouse Building C - Tower 425 N Orange Ave., Orlando, 32801	15	#1 Escalator UP 1-2	50354	E	4 team	-	O&K	O&K	OK-Tronic 301	US220967
	16	#2 Escalator DOWN 2-1	50355	E	4 team	-	O&K	O&K	OK-Tronic 301	US220968
	17	#3 Escalator UP 2-3	50356	E	4 team	-	O&K	O&K	OK-Tronic 301	US220969
	18	#4 Escalator DOWN 3-2	50357	E	4 team	-	O&K	O&K	OK-Tronic 301	US220970
	19	#5 Escalator UP 3-4	50358	E	4 team	-	O&K	O&K	OK-Tronic 301	US220971
	20	#6 Escalator DOWN 4-3	50359	E	4 team	-	O&K	O&K	OK-Tronic 301	US220972
	21	Elevator E7 Passenger	50360	T	2	-	Dover	Dover	T - IV	US216662
	22	Elevator E8 Passenger	50361	T	2	-	Dover	Dover	T - IV	US216663
	23	Elevator E9 Judge North	50369	T	-	2	Dover	Dover	T - IV	US216664
	24	Elevator E10 Inmate North	50370	T	-	2	Dover	Dover	T - IV	US216665
	25	Elevator E11 Inmate South	50371	T	-	2	Dover	Dover	T - IV	US216666
	26	Elevator E12 Judge South	50372	T	-	2	Dover	Dover	T - IV	US216667
	27	Elevator E13 Judge North	50364	T	-	1	Dover	Dover	T - IV	US216668
	28	Elevator E14 Judge South	50365	T	-	1	Dover	Dover	T - IV	US216669
	29	Elevator E15 Freight	50733	H	-	1	Dover	TK	TAC 32	US200257
Courthouse Building E - Plant	30	Elevator E-24 Pass/Freight	50368	T	2	-	Dover	Dover	T - IV	US216674

76 E Amelia St., Orlando, 32801										
33rd STREET DISTRICT	ITEM #	UNIT DESIGNATION	STATE #	UNIT TYPE	6am-6pm Mon-Fri	6pm-6am Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
Cassady Building 2450 W 33rd St., Orlando, 32819	31	Elevator Passenger	47255	H	1	-	otis	Nide MCE	HMC-2000	3374502
Sheriff's Sector 4 Sub Station 2400 W 33rd St., Orlando, 32819	32	Elevator Passenger	26530	H	1	-	Otis	Nidecc MCE	HMC-2000	3374500
Corrections - D Building	33	Elevator East Passenger D2	34075	H	2	-	otis	Kone	KCM831	20056447
3741 Vision Blvd., Orlando, 32819	34	Elevator West Passenger D1	34074	H	2	-	otis	Kone	KCM831	20556453
Corrections - E Building	35	Elevator East Passenger E2	37538	T	2	-	otis	Kone	ReSolve 100	20056279
3741 Vision Blvd., Orlando, 32819	36	Elevator West Passenger E1	37537	T	2	-	otis	Kone	ReSolve 100	20056273
Corrections - F Building	37	Elevator East F2	38064	H	2	-	otis	Kone	KCM831	20056288
3741 Vision Blvd., Orlando, 32819	38	Elevator West F1	38063	H	2	-	otis	Kone	KCM831	20556284
Correctional Support	39	Elevator #1 Passenger	45290	H	1	-	otis	MCE	HMC-2000	336699
3741 Vision Blvd.,	40	Elevator #2 Passenger	45291	H	1	-	otis	MCE	HMC-2000	336699
Orlando, 32819	41	Elevator #3 Staff	45289	H	1	-	otis	MCE	HMC-2000	336725
Corrections - Horizons Bldg	42	Elevator Food Service	45030	T	1	-	otis	Nidec	i-AC-01	3402163
3851 Vision Blvd.,	43	Elevator Passenger	45031	T	1	-	otis	Nidec	i-AC-01	3402165
Orlando, 32819	44	Elevator Passenger	45032	T	1	-	otis	Nidec	i-AC-01	3402169
	45	Elevator Passenger	45033	T	1	-	otis	Nidec	i-AC-01	3402167

Corrections - Phoenix Bldg 3883 Vision Blvd., Orlando,	46	Elevator Passenger	46191	H	1	-	otis	MCE	HMC-2000	3307986
Corrections - Booking & Release 3663 S John Young Pkwy. Orlando, 32819	47	Elevator 1 Staff	85532	H	2	-	ThyessnKrupp	TAC-20	ET1223	E-T1223
	48	Elevator 3 Loading Dock	85538	H	2	-	ThyessnKrupp	TAC-20	ET229	E-T229
	49	Elevator 4 Inmate Movement	85533	H	2	-	ThyessnKrupp	TAC-20	ET224	E-T224
	50	Elevator 5 Inmate Movement	85537	H	2	-	ThyessnKrupp	TAC-20	ET1228	E-T1228
	51	Elevator 6 Release Lobby	85536	H	2	-	ThyessnKrupp	TAC-20	ET1227	E-T1227
	52	Elevator 8 Staff	85535	H	1	-	ThyessnKrupp	TAC-20	ET1226	E-T1226
	53	Elevator 9 Public	85534	H	1	-	ThyessnKrupp	TAC-20	ET1225	ET-1225
CENTRAL DISTRICT	ITEM #	UNIT DESIGNATION	STATE #	UNIT TYPE	6am-6pm Mon-Fri	6pm-6am Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
Sheriff's Central Complex 2500 W Colonial Dr. Orlando, 32804	54	Elevator Passenger #1 (A)	62680	H	1	-	ECC	Elevator Controls	H-800	8278
	55	Elevator Passenger #2 (B)	62681	H	1	-	ECC	Elevator Controls	H-800	8277
	56	Elevator Freight	5495	H	1	-	ECC	Elevator Controls	H-800	10737
	57	Elevator West #4 Passenger	85194	H	1	-	Schindler	Schindler	B1863	6993C02G02
Michigan - HFS Mable Butler 2100 E Michigan St., Orlando, 32806	58	Elevator Passenger 1 (A)	46857	H	1	-	Otis	Otis	9440	HC15247
	59	Elevator Passenger 2 (B)	46858	H	1	-	Otis	Otis	9440	HC15248
Health Department 832 W Central Blvd.,	60	Elevator Passenger 1 (A)	12362	H	1	-	ECC	Elevator Controls	H-800	12000
	61	Elevator Passenger 2 (B)	12363	H	1	-	ECC	Elevator Controls	H-800	12001

Orlando, 32805	62	Freight	12364	H	1	-	ECC	Elevator Controls	H-800	11476
Work Release - Building 130 W Kaley St., Orlando, 32806	63	Elevator Passenger	55280	H	1	-	Miami	Dover	DMC-1	E-J8093
Public Works Complex	64	Elevator Passenger	44614	H	1	-	MCE	Motion Controls	2000	3415765
4200 S John Young Pkwy. Orlando, 32839	65	Elevator Passenger	44615	H	1	-	MCE	Motion Controls	2000	3415763
Medical Clinic - Office	66	Elevator Passenger	46862	H	1	-	Otis	Otis	9410	HC152250
CO-OP Ext. - Admin. Building 6021 S Conway Rd., Orlando, 32812	67	Wheelchair Lift	90286	O	.5 Quarterly	-	Garaventa	Garaventa	X3	N/A
Mosquito Control - Building C 2715 Conroy Road, Orlando	68	Material Lift	None	O	.5 Quarterly	-	Curlee	Curlee	EB	ES08
WEST DISTRICT	ITEM #	UNIT DESIGNATION	STATE #	UNIT TYPE	6am-6pm Mon-Fri	6pm-6am Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
Barnett Park 4801 W Colonial Dr., Orlando, 32808	69	Elevator Passenger	51012	H	1	-	Montgomery Kone	Miprom	2100	951012)cp- mx-83667
Fleet Management 4400 S Vineland Rd., Orlando, 32811	70	Elevator Passenger	47420	H	1	-	Dover Elevtors	DMC-I		(47420)- EE1876
FIRE RESCUE DEPARTMENT	ITEM #	UNIT DESIGNATION	STATE #	UNIT TYPE	6am-6pm Mon-Fri	6pm-6am Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
Fire/Rescue Headquarters	71	Elevator Passenger	47667	H	1	-	Dover	Dover	EP-60-20	E-E3129
6590 Amory Ct., Winter Park, 32792	72	Elevator Passenger	47668	H	1	-	Dover	Dover	EP-60-20	E-E3128
	73	Elevator Passenger	47669	H	1	-	Dover	Dover	EP-80-25	E-E3128

UTILITIES DEPARTMENT	ITEM #	UNIT DESIGNATION	STATE #	UNIT TYPE	6am-6pm Mon-Fri	6pm-6am Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER			
Utilities Administration Center 9150 Curry Ford Road, Orlando, Florida, 32825	74	Elevator Passenger	85238	H	1	-	Thyssen Krupp	Motion 2000	HMC-2000	85238
	75	Elevator Passenger	85239	H	1	-	Thyssen Krupp	Motion 2000	HMC-2000	85239
Utilities Operation Center, 8100 Presidents Drive, Orlando, Florida 32800	76	Elevator Passenger	31532	H	1	-	Dover	Smart Rise	Smart Rise	
T=Traction		H=Hydraulic	O = Other							
*The minimum time noted is not intended to dictate the actual amount of time required to perform the services outlined in this Contract. Should additional time be required to ensure compliance with the Contract, the Contractor shall provide additional time at no additional cost to the County.										

Revised- APPENDIX B

Y20-134-AV
Elevators and Escalators Maintenance Services

LOT B - OEM ELEVATORS AND ESCALATORS				UNIT TYPE	*Minimum Monthly Maintenance Hours					
FACILITY		UNIT DESIGNATION	STATE #		6am-6pm	6pm-6am				
					Mon-Fri	Mon-Sun	ELEVATOR/ESCALATOR MANUFACTURER	CONTROLLER MANUFACTURER	MODEL #	SERIAL #
DOWNTOW DISTRICT										
Courthouse Building C – Tower 425 N Orange Ave., Orlando, 32801	1	Elevator E1 Passenger	50727	T	-	4	Dover	TK	TAC 55	US220540
	2	Elevator E2 Passenger	50728	T	-	4	Dover	TK	TAC 54	US220541
	3	Elevator E3 Passenger	50729	T	-	4	Dover	TK	TAC 50	US220542
	4	Elevator E4 Passenger	50730	T	-	4	Dover	TK	TAC 51	US220543
	5	Elevator E5 Passenger	50731	T	-	4	Dover	TK	TAC 52	US220544
	6	Elevator E6 Freight	50732	T	-	4	Dover	TK	TAC 53	US220545
T=Traction		H=Hydraulic	O = Other							
*The minimum time noted is not intended to dictate the actual amount of time required to perform the services outlined in this Contract. Should additional time be required to ensure compliance with the Contract, the Contractor shall provide additional time at no additional cost to the County.										

ATTACHMENT 2

Revised -FEE SCHEDULE FORM RFP#Y20-134-AV

The Contractor shall provide all labor, equipment, manpower and other resources necessary to provide the goods or services in strict accordance with the scope of services, specifications defined in this solicitation for the amounts specified in this Fee Schedule Form.

LOT A - DOWNTOWN DISTRICT						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month	Estimated Quantity	Total
1	IOC 1	36743	Elevator 1 Passenger Levels 1 to 3	\$_____/mo.	X 12	= \$_____
2	IOC 1	36744	Elevator 2 Passenger Levels 1 to 3	\$_____/mo.	X 12	= \$_____
3	IOC 2	38963	Elevator E-1 Passenger Levels 1 to 5	\$_____/mo.	X 12	= \$_____
4	IOC 2	38964	Elevator E-2 Passenger Levels 1 to 5	\$_____/mo.	X 12	= \$_____
5	County Administration Building	34321	Elevator 1 Commissioner s	\$_____/mo.	X 12	= \$_____
6	County Administration Building	34322	Elevator 2 Main Lobby	\$_____/mo.	X 12	= \$_____
7	County Administration Building	34323	Elevator 3 Main Lobby	\$_____/mo.	X 12	= \$_____
8	County Administration Building	34324	Elevator 4 Mayor's	\$_____/mo.	X 12	= \$_____
9	Regional History Center	57083	Elevator 1 South Level 1 to 5	\$_____/mo.	X 12	= \$_____
10	Regional History Center	57084	Elevator 2 North Level 1 to 5	\$_____/mo.	X 12	= \$_____
11	Courthouse Building A - Public Defender	50366	Elevator E16 Passenger Levels B to 5	\$_____/mo.	X 12	= \$_____
12	Courthouse Building A - Public Defender	50367	Elevator E17 Passenger Levels 1 to 5	\$_____/mo.	X 12	= \$_____

Company Name:_____

LOT A - DOWNTOWN DISTRICT (Continues)						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month	Estimated Quantity	Total
13	Courthouse Building B - State Attorney	50362	Elevator E18 Passenger Levels B to 5	\$ _____/mo.	X 12	= \$ _____
14	Courthouse Building B - State Attorney	50363	Elevator E19 Passenger Levels 1 to 5	\$ _____/mo.	X 12	= \$ _____
15	Courthouse Building C - Tower	50354	#1 Escalator UP 1-2	\$ _____/mo.	X 12	= \$ _____
16	Courthouse Building C - Tower	50355	#2 Escalator DOWN 2-1	\$ _____/mo.	X 12	= \$ _____
17	Courthouse Building C - Tower	50356	#1 Escalator UP 2-3	\$ _____/mo.	X 12	= \$ _____
18	Courthouse Building C - Tower	50357	#2 Escalator DOWN 3-2	\$ _____/mo.	X 12	= \$ _____
19	Courthouse Building C - Tower	50358	#1 Escalator UP 3-4	\$ _____/mo.	X 12	= \$ _____
20	Courthouse Building C - Tower	50359	#2 Escalator DOWN 4-3	\$ _____/mo.	X 12	= \$ _____
21	Courthouse Building C - Tower	50360	Elevator E7 Passenger Levels 1 to 4	\$ _____/mo.	X 12	= \$ _____
22	Courthouse Building C - Tower	50361	Elevator E8 Passenger Levels 1 to 4	\$ _____/mo.	X 12	= \$ _____
23	Courthouse Building C - Tower	50369	Elevator E9 Judge North Levels B to 21	\$ _____/mo.	X 12	= \$ _____
24	Courthouse Building C - Tower	50370	Elevator E10 Inmate North Levels B to 21	\$ _____/mo.	X 12	= \$ _____
25	Courthouse Building C - Tower	50371	Elevator E11 Inmate South Levels B to 21	\$ _____/mo.	X 12	= \$ _____
26	Courthouse Building C - Tower	50372	Elevator E12 Judge South Levels B to 21	\$ _____/mo.	X 12	= \$ _____

Company Name: _____

LOT A - DOWNTOWN DISTRICT (Continues)						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
27	Courthouse Building C - Tower	50364	Elevator E13 Judge North Levels 19, 21, 23	\$_____/mo.	X 12	= \$_____
28	Courthouse Building C - Tower	50365	Elevator E14 Judge South Levels 19, 21, 23	\$_____/mo.	X 12	= \$_____
29	Courthouse Building C - Tower	50733	Elevator E15 Freight Levels B to 1	\$_____/mo.	X 12	= \$_____
30	Courthouse Building E - Central Plant	50368	Elevator E-24 Elevator Pass/Freight Level B to 4	\$_____/mo.	X 12	= \$_____
LOT A - 33RD DISTRICT						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
31	Cassady Building	47255	Elevator Passenger	\$_____/mo.	X 12	= \$_____
32	Sheriff's Sector 4 Sub Station	26530	Elevator Passenger	\$_____/mo.	X 12	= \$_____
33	Corrections - D Building	34075	Elevator East Passenger D2	\$_____/mo.	X 12	= \$_____
34	Corrections - D Building	34074	Elevator West Passenger D1	\$_____/mo.	X 12	= \$_____
35	Corrections - E Building	37538	Elevator East Passenger E2	\$_____/mo.	X 12	= \$_____
36	Corrections - E Building	37537	Elevator West Passenger E1	\$_____/mo.	X 12	= \$_____
37	Corrections - F Building	38064	Elevator East F2	\$_____/mo.	X 12	= \$_____

Company Name:_____

LOT A - 33RD DISTRICT (continues)						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
38	Corrections - F Building	38063	Elevator West F1	\$ _____/mo.	X 12	= \$ _____
39	Corrections - Correctional Support	45290	Elevator #1 Passenger	\$ _____/mo.	X 12	= \$ _____
40	Corrections - Correctional Support	45291	Elevator #2 Passenger	\$ _____/mo.	X 12	= \$ _____
41	Corrections - Correctional Support	45289	Elevator #3 Staff	\$ _____/mo.	X 12	= \$ _____
42	Corrections - Horizons Bldg.	45030	Elevator Food Service	\$ _____/mo.	X 12	= \$ _____
43	Corrections - Horizons Bldg.	45031	Elevator Passenger	\$ _____/mo.	X 12	= \$ _____
44	Corrections - Horizons Bldg.	45032	Elevator Passenger	\$ _____/mo.	X 12	= \$ _____
45	Corrections - Horizons Bldg.	45033	Elevator Passenger	\$ _____/mo.	X 12	= \$ _____
46	Corrections - Phoenix Building	46191	Elevator Passenger	\$ _____/mo.	X 12	= \$ _____
47	Corrections - Booking and Release	85532	Elevator 1 Staff Transportation / Property	\$ _____/mo.	X 12	= \$ _____
48	Corrections - Booking and Release	85538	Elevator 3 Loading Dock Service Elevator	\$ _____/mo.	X 12	= \$ _____
49	Corrections - Booking and Release	85533	Elevator 4 Inmate Movement	\$ _____/mo.	X 12	= \$ _____
50	Corrections - Booking and Release	85537	Elevator 5 Inmate Movement	\$ _____/mo.	X 12	= \$ _____
51	Corrections - Booking and Release	85536	Elevator 6 Release Lobby	\$ _____/mo.	X 12	= \$ _____

Company Name:_____

LOT A - 33RD DISTRICT (continues)

	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
52	Corrections - Booking and Release	85535	Elevator 8 Public Lobby Staff	\$_____/mo.	X 12	= \$_____
53	Corrections - Booking and Release	85534	Elevator 9 Public Lobby Public Elevator	\$_____/mo.	X 12	= \$_____

LOT A - CENTRAL DISTRICT

	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
54	Sheriff's Central Complex – Sheriff's Operations	62680	Elevator Passenger #1 (A)	\$_____/mo.	X 12	= \$_____
55	Sheriff's Central Complex – Sheriff's Operations	62681	Elevator Passenger #2 (B)	\$_____/mo.	X 12	= \$_____
56	Sheriff's Central Complex – Sheriff's Operations	5495	Elevator Freight	\$_____/mo.	X 12	= \$_____
57	Sheriff's Central Complex – Sheriff's Operations	85194	Elevator West #4 Passenger	\$_____/mo.	X 12	= \$_____
58	Michigan - HFS Mable Butler Building	46857	Elevator Passenger 1 (A)	\$_____/mo.	X 12	= \$_____
59	Michigan - HFS Mable Butler Building	46858	Elevator Passenger 2 (B)	\$_____/mo.	X 12	= \$_____
60	Health Department - Bldg. 1	12362	Elevator Passenger #1 (A)	\$_____/mo.	X 12	= \$_____
61	Health Department - Bldg. 1	12363	Elevator Passenger #2 (B)	\$_____/mo.	X 12	= \$_____
62	Health Department - Bldg. 1	12364	Elevator Freight	\$_____/mo.	X 12	= \$_____

Company Name:_____

LOT A - CENTRAL DISTRICT (continues)						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
63	Work Release - Building	55280	Elevator Passenger	\$_____/mo.	X 12	= \$_____
64	Public Works Complex - Bldg 1 Administration	44614	Elevator Passenger	\$_____/mo.	X 12	= \$_____
65	Public Works Complex - Bldg 1 Administration	44615	Elevator Passenger	\$_____/mo.	X 12	= \$_____
66	Medical Clinic - Office	46862	Elevator Passenger	\$_____/mo.	X 12	= \$_____
				Unit Price Per Quarter		Total
67	CO-OP Ext. - Administrative Building	90286	Wheelchair Lift	\$_____/qtr.	X 4	= \$_____
68	Mosquito Control - Building C	None	Material Lift	\$_____/qtr.	X 4	= \$_____
LOT A - WEST DISTRICT						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
69	Barnett Park - Main Office Admin	51012	Elevator Passenger	\$_____/mo.	X 12	= \$_____
70	Fleet Management - Shop Building	47420	Elevator Passenger	\$_____/mo.	X 12	= \$_____

Company Name:_____

	LOT A - FIRE RESCUE					
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month		Total
71	Fire/Rescue Headquarters Complex	47667	Elevator Passenger	\$_____/mo.	X 12	= \$_____
72	Fire/Rescue Headquarters Complex	47668	Elevator Passenger	\$_____/mo.	X 12	= \$_____
73	Fire/Rescue Headquarters Complex	47669	Elevator Passenger	\$_____/mo.	X 12	= \$_____
	LOT A – UTILITIES					
74	Utilities Administration Center	85238	Elevator Passenger	\$_____/mo.	X 12	= \$_____
75	Utilities Administration Center	85238	Elevator Passenger	\$_____/mo.	X 12	= \$_____
76	Utilities Operation Center	31532	Elevator Passenger	\$_____/mo.	X 12	= \$_____
	LOT A - LABOR AND MATERIALS			Unit Price Hourly Rate	Estimated Quantity	Total
77	Mechanic - Straight Time			\$_____/hr	x150	= \$_____
78	Mechanic - Overtime - 1.5x			\$_____/hr	x100	= \$_____
79	Helper - Straight Time			\$_____/hr	x100	= \$_____
80	Helper - Overtime - 1.5x			\$_____/hr	x100	= \$_____
81	Crew - Straight Time			\$_____/hr	x150	= \$_____
82	Crew -Overtime - 1.5x			\$_____/hr	x100	= \$_____

Company Name:_____

		Unit Price Percent	Total
83	Parts (Percent Markup or Markdown) off list price Back-up documentation required for reimbursement. Calculation <u>example</u> is as follows: If the mark-down is 10% your calculation should be \$50,000 - 10%= \$45,000 If the mark-up is 10% your calculation should be \$50,000 + 10%= \$55,000. Maximum mark-up allowed is 10% .	 _____ % + or - \$50,000 = \$ _____ (percent)	
84	Unforeseen Fees (Applicable taxes, and approved shipping charges) – Reimbursed at cost. Back-up documentation required for reimbursement.		\$5,000

ANNUAL ESTIMATED TOTAL OF ALL LINES (1-84) \$ _____

X 3 Years =

LOT A -TOTAL ESTIMATED BID - ALL LINES (1-84) \$ _____

Company Name: _____

**Revised -FEE SCHEDULE FORM
RFP#Y20-134-AV**

The Contractor shall provide all labor, equipment, manpower and other resources necessary to provide the goods or services in strict accordance with the scope of services, specifications defined in this solicitation for the amounts specified in this Fee Schedule Form.

LOT B – DESTINATION DISPATCH ELEVATORS						
	Facility Name	State Serial #	Elevator Designation	Unit Price Per Month	Estimated Quantity	Total
1	Courthouse Building C - Tower	50727	Elevator E1 Passenger Levels B to 23	\$_____/mo	X 12	\$_____
2	Courthouse Building C - Tower	50728	Elevator E2 Passenger Levels 1 to 23	\$_____/mo	X 12	\$_____
3	Courthouse Building C - Tower	50729	Elevator E3 Passenger Levels 1 to 23	\$_____/mo	X 12	\$_____
4	Courthouse Building C - Tower	50730	Elevator E4 Passenger Levels 1 to 23	\$_____/mo	X 12	\$_____
5	Courthouse Building C - Tower	50731	Elevator E5 Passenger Levels 1 to 23	\$_____/mo	X 12	\$_____
6	Courthouse Building C - Tower	50732	Elevator E6 Freight Levels B to 23	\$_____/mo	X 12	\$_____
LOT B - LABOR AND MATERIALS				Unit Price Hourly Rate	Estimated Quantity	Total
7	Mechanic - Straight Time			\$_____/hr	x100	\$_____
8	Mechanic - Overtime - 1.5x			\$_____/hr	x100	\$_____
9	Helper - Straight Time			\$_____/hr	x100	\$_____
10	Helper - Overtime - 1.5x			\$_____/hr	x100	\$_____

Company Name: _____

LOT B - LABOR AND MATERIALS (continues)				Unit Price Hourly Rate	Estimated Quantity	Total
11	Crew - Straight Time			\$_____/hr	x100	= \$_____
12	Crew -Overtime - 1.5x			\$_____/hr	x50	= \$_____
				Unit Price Percent		Total
13	Parts (Percent Markup or Markdown) off list price Back-up documentation required for reimbursement. Calculation example is as follows: If the mark-down is 10% your calculation should be \$20,000 – 10% = \$18,000 If the mark-up is 10% your calculation should be \$20,000 + 10%= \$22,000. Maximum mark-up allowed is 10% .			_____ % + or - \$20,000		= \$_____
14	Unforeseen Fees (Applicable taxes, and approved shipping charges) – Reimbursed at cost. Back-up documentation required for reimbursement.					\$2,000

ANNUAL ESTIMATED TOTAL OF ALL LINES (1-14) \$ _____

X 3 Years =

LOT B -TOTAL ESTIMATED BID - ALL LINES (1-14) \$ _____

Company Name: _____