



2021 Life Safety Systems Maintenance, Monitoring, and Testing BID PROPOSAL

Proposals due by 2 pm, Thursday, April 1, 2021

Bids may be submitted in person or by U.S. Mail, facsimile or email to: City of Sedro-Woolley, 325 Metcalf Street, Sedro-Woolley, WA 98284, (360) 855-0771, facsimile 360-855-0733, email jrosario@ci.sedro-woolley.wa.us.

We, the undersigned, hereby agree to bid the following per the "Invitation for Bid – 2021 Life Safety Systems Maintenance, Monitoring, and Testing":

Item	Description	Quantity	Unit Price	Total
SCHEDULE 1: Annual Monitoring & Reporting:				
1.	Sedro-Woolley Municipal Building, 325 Metcalf Street		Lump Sum	\$ _____
2.	Sedro-Woolley Ball Street Building, 802 Ball Street		Lump Sum	\$ _____
3.	Sedro-Woolley Community Center, 703 Pacific Street		Lump Sum	\$ _____
4.	Sedro-Woolley Senior Center, 715 Pacific Street		Lump Sum	\$ _____
5.	Sedro-Woolley Wastewater Treatment Plant		Lump Sum	\$ _____
6.	Police Evidence Garage, 300 Metcalf Street		Lump Sum	\$ _____
7.	Fire Station No. 2, 1218 Township Street		Lump Sum	\$ _____
SUBTOTAL SCHEDULE 1				\$ _____
SCHEDULE 2: Annual Confidence Testing:				
1.	Sedro-Woolley Municipal Building		Lump Sum	\$ _____
2.	Sedro-Woolley Ball Street Building		Lump Sum	\$ _____
3.	Sedro-Woolley Community Center		Lump Sum	\$ _____
4.	Sedro-Woolley Senior Center		Lump Sum	\$ _____
5.	Sedro-Woolley Wastewater Treatment Plant		Lump Sum	\$ _____
6.	Fire Station No 2		Lump Sum	\$ _____
SUBTOTAL SCHEDULE 2 (Tax Exempt)				\$ _____
SCHEDULE 3: Unit Price Repair Services (Typical call out):				
1.	Technician, per hour Straight Time	8 HRS	\$ _____/HR	\$ _____
2.	Technician, per hour Overtime	2 HRS	\$ _____/HR	\$ _____
3.	Service Vehicle & Tools, per hour	10 HRS	\$ _____/HR	\$ _____
4.	Mobilization/Demobilization (if not included in rates)		*Each	\$ _____
<i>** Unit price shall be full compensation for furnishing all mobilization service"</i>				
SUBTOTAL SCHEDULE 3				\$ _____
TOTAL SCHEDULE 1, 2 and 3				\$ _____
WA STATE SALES TAX AT 8.5% (Schedule 1 and 3 Only)				\$ _____
TOTAL BID				\$ _____
Markup on Materials _____ %				
BIDDER COMPANY NAME: _____				
ADDRESS: _____				

CONTACT: _____				
TELEPHONE: _____				
EMAIL: _____				
UBI NUMBER: _____				

Bidder Checklist: Statement of Bidder's Qualification (included with bid) _____, Certificate of Compliance with Wage Payment Statutes (included with bid) _____, Public Works Training Requirement Complete (RCW 39.04.350(f)) (prior to bid) _____ MRSC Small Works Roster (registered prior to bid) _____, Rate Sheet (included with bid) _____, Acknowledged Addendum(s)_____