

Exhibit F

Respondent’s Pricing Proposal Form

RFP No.: HHS0013346A

Project Name: Project 22-147-WFH – Building 700 Mechanical Upgrade, North Texas State Hospital, Wichita Falls Campus

To: Health and Human Services Commission (“Owner”)

From: Respondent’s Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone: _____

The Respondent having carefully examined the Texas Uniform General Conditions for Construction Contracts with HHSC Supplementary General Conditions (“UGCs”), the Drawings and Specifications, and any addenda thereto, as prepared by the Owner, and the Project Architect/Engineer for this Project, as well as the premises and all the conditions affecting the work, if applicable to this Project, does hereby propose to furnish all supervision, labor, materials, equipment, tooling, and permits necessary to achieve Substantial Completion of the work in accordance with the “Contract Documents” (as that term is defined in the UGCs) for the following sum: *(All amounts shall be written in number form.)*

1. Total Base Proposal Cost:

The Total Base Proposal Cost amount becomes the Respondent’s “Total Cost” if allowances and/or if Additive Alternate Costs are not included and must total from the amounts listed below within this section.

The “Total Base Proposal Cost” amount must be used in the Respondent’s Historically Underutilized Business Subcontracting Plan (“HSP”), if applicable, to determine subcontractor participation levels for the established HUB procurement goals.

Item A Replacement of HVAC Systems \$ _____ +/-

Total Base Proposal Cost: \$ _____

2. Additive Alternate Costs:

The “Additive Alternate Costs” are awarded at the Owner’s discretion and should not be included in the “Total Base Proposal Cost” as referenced in Section 1 above. Negotiation may be a part of the award discussions. Should Additive Alternate Costs be awarded, the awarded Respondent shall be given an opportunity to revise the originally submitted HSP, if applicable, to allow for a Good Faith

Effort outreach to determine subcontractor participation levels for the Additive Alternate Costs and services.

Alternate #1 Cost: **Reinsulate HW Piping on Roof**

\$ _____

Alternate #2 Cost: **Extended 5-Year Warranty on Rooftop Units**

\$ _____

3. Unit Prices:

“Unit Prices” listed within this section are independent of any totals in Sections 1 and 2 above and are for tracking of unexpected and unanticipated costs associated with the activities listed below.

Masonry Restoration

Masonry Restoration for First Floor levels: Price per 100 LF \$ _____

Masonry Restoration for Second Floor levels: Price per 100 LF \$ _____

Replace Wood Window Substrate

Replace Wood Substrate: Price per each window \$ _____

MEP Penetrations

Relocation of Insulated Refrigerant Line: Price each occurrence: \$ _____

Relocation of Condensate Line: Price each occurrence \$ _____

Relocation of Electrical Conduit and Wire: Price each occurrence: \$ _____

Relocation of Gas Piping, 2” or smaller: Price each occurrence: \$ _____

4. **Construction Milestone Schedule:** The undersigned agrees, if awarded the Contract, to achieve Substantial Completion of the Work as described in the UGCs, the Drawings and Specifications, and any addenda thereto.

4.1 Owner anticipates the Notice to Proceed for construction to be issued within two weeks of the Contract being executed.

4.2 Contractor will mobilize within ten calendar days after receiving the Notice to Proceed.

4.3 Contractor shall achieve Substantial Completion of the Work no later than **240 days** of the commencement date set forth in the Notice to Proceed; however, this is an estimate only. The Contract will specify the number of days from commencement date (as stated in Notice to Proceed) to Substantial Completion.

5. **RFP Addenda:** The Respondent hereby acknowledges receipt of the following RFP addenda issued by the Owner: *(Initial all that are applicable.)*

RFP No. 1 _____ RFP No. 2 _____ RFP No. 3 _____ RFP No. 4 _____ RFP No. 5 _____