# Golden Empire Affordable Housing, Inc. II

Invitation For Bids # 200-42

Fire Sprinklers–4<sup>th</sup> street Apartments

- Deadline for bids: Thursday, May 23,2024
  - To view plans, go to:

https://geahi.org/procurement-opportunities

- This project is **not** prevailing wage.
- Submit questions and bids to <a href="mailto:procurement@geahi.org">procurement@geahi.org</a>

# GOLDEN EMPIRE AFFORDABLE HOUSING, INC. II 601 24TH STREET, SUITE B BAKERSFIELD, CA 93301 OFFICE 661.633.1533 | EMAIL PROCUREMENT@GEAHLORG

### **SPECIFIC REQUIREMENTS**

| PROJECT:                          | DATE:          |  |
|-----------------------------------|----------------|--|
| 4 <sup>th</sup> Street Apartments | SUBCONTRACTOR: |  |
|                                   | LICENSE #      |  |
| TRADE: FIRE SPRINKLERS            | EMAIL:         |  |

Reference to Subcontractor shall mean **Fire Sprinklers Subcontractor** and reference to Owner shall mean **Golden Empire Affordable Housing, Inc.II** Subcontractor shall furnish all labor and equipment to perform the operations necessary to complete all Fire Sprinkler work of the units as indicated on the Contract Documents and specified herein, including but not limited to the following:

#### **CONTRACT WILL INCLUDE:**

- 1. Engineering design, calculations, and approval of submittals to appropriate authorities having jurisdictions.
- 2. Subcontractor to install complete above ground, stand alone, independent from potable water, fire sprinkler system, including complete fire sprinkler riser assembly.
- 3. As required by municipality, contract will include alarm bell, flow switch, check valve, pressure gauge and access panel.
- 4. Fire sprinkler lines and pipe shall be CPVC. Must conform to NFPA 13R Standards and/or CRC 313.3.
- 5. Subcontractor shall use "Quick flash Panel" product at all exterior penetration for weatherproofing.
- 6. Shall include all white flat plate concealed residential sprinkler heads in all living areas with pendent sprinklers and protective cages in attic over FAU.
- 7. Shall include all required signage. Subcontractor to use foam pipe insulation on all CPVC pipe above FAU.
- 8. Shall include all field tests and inspections.
- 9. Shall follow all fire notes. Any penetration through a fire wall must be of a noncombustible material and fire caulked on both sides.

| TOTAL CONTRACT PRICE: | (Price includes all tax. | , labor, material and delivery) |
|-----------------------|--------------------------|---------------------------------|
|-----------------------|--------------------------|---------------------------------|

| Total | \$ |
|-------|----|

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60% Frame inspection

40% FINISH COMPLETE

| Subcontractor | Date | Owner | Date |
|---------------|------|-------|------|

# GOLDEN EMPIRE AFFORDABLE HOUSING, INC.II 601 24TH STREET, SUITE B BAKERSFIELD, CA 93301 OFFICE 661.633.1533 | EMAIL PROCUREMENT@GEAHI.ORG

TRADE: FIRE SPRINKLERS

| Project: 4th Street Apartments | SCOPE OF WORK |
|--------------------------------|---------------|
|                                |               |

#### 1. GENERAL

Reference to Subcontractor shall mean **Fire Sprinklers Subcontractor**. Reference to Owner shall mean **Golden Empire Affordable Housing, Inc.**II Subcontractor shall furnish all labor, material and equipment to perform the operations necessary to complete all plumbing work as indicated on the Contract Documents and specified herein, including but not necessarily limited to the following:

#### 2. SCOPE

- a. Fire sprinkler lines and pipe shall be CPVC.
- b. White flat plate concealed residential sprinkler heads in all living areas with pendent sprinklers and protective cages in attic over FAU.
- c. Subcontractor should supply generator if needed. No temporary power will be provided onsite.
- d. Must conform to NFPA 13R Standards and/or CRC 313.3.
- e. Subcontractor shall follow all fire notes. Any penetration through a fire wall must be of a noncombustible material and fire caulked on both sides.
- f. Install foam pipe insulation in attic where required.

#### 3. MATERIAL

- a. All materials delivered to site shall be responsibility of Subcontractor until installed and accepted by Owner. Any loss, no matter what the cause, shall be the responsibility of Subcontractor.
- b. No room for bins or container on site.
- c. Subcontractor shall supply generator, at no additional charge to Owner. No Temp power on site.
- d. Subcontractor shall be responsible for delivery and storage of material until items are installed. Items delivered during rainy weather shall be protected by Subcontractor.

#### 4. GENERAL REQUIREMENTS

Subcontractor shall guarantee that all work and equipment are in accordance with OSHA regulations.

#### 5. WORKMANSHIP

Workmanship shall be in compliant with all requirements of local, state and federal codes and manufacturers specifications whether specifically mentioned in these specifications or not, at no additional cost to Owner.

a. All workmanship shall meet the standard of good practice acceptable within the industry.

#### 6. CLEAN UP

Subcontractor shall clean- up and dispose daily all debris, waste material, rubbish, etc. to trash bins or as directed to by Owners Housing Construction Superintendent. The site shall be left in a neat and clean condition acceptable to Owner. Subcontractor is responsible to sweep house when completed and or as directed by Owners Housing Construction Superintendent.

#### 7. PERFORMANCE STANDARDS

- a. Anything not meeting the following standards will be repaired or replaced by Subcontractor at no additional cost to Owner.
- b. Subcontractor will check wiring circuits for conformity with applicable national, state, or local code requirements. The Subcontractor will correct circuitry not conforming to applicable code specification or plans.

## 8. WARRANTY

| Subcontractor       | Date                       | Owner       | Date |
|---------------------|----------------------------|-------------|------|
|                     |                            |             |      |
|                     |                            |             |      |
|                     |                            |             |      |
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|                     |                            |             |      |
|                     |                            |             |      |
|                     | ·                          | ·           |      |
| The subcontractor s | hall warranty installation | for 1 year. |      |
| o. WARRANTI         |                            |             |      |

# Golden Empire Affordable Housing, Inc. II 601 24<sup>th</sup> Street, Suite B, Bakersfield, CA 93301 • 661.633-1533 • FX: 661.366-1617

# **VENDOR INFORMATION SHEET**

| Date:  | ate: Prepared By:              |                          |              |                 |   |  |  |
|--|--------------------------------|--------------------------|--------------|-----------------|---|--|--|
| Official Business Name:  |                                |                          |              |                 | - |  |  |
| DBA:   |                                |                          |              |                 | - |  |  |
| Location Address:  |                                |                          |              |                 | _ |  |  |
| Street   | City                           |                          | State        | Zip             |   |  |  |
| Remit Address:   |                                |                          |              |                 | _ |  |  |
| Street   | City                           | State                    | Zip          |                 |   |  |  |
| Contact Person:  | Title:                         |                          |              |                 | - |  |  |
| Phone #:   | Accts. Receiva                 | ble Phone #:             |              |                 | _ |  |  |
| Fax #:   | Customer Serv                  | vice Phone #:            |              |                 | _ |  |  |
| E-mail Address:  |                                |                          |              |                 | - |  |  |
| Federal ID # or SS#:   | Contractor Lic                 | #:                       |              |                 | - |  |  |
| Business Lic #:  | City L                         | icense Issued <u>:</u>   |              |                 | - |  |  |
| General Liability Insurance Carrier & Polic  | ey #:                          |                          |              |                 | - |  |  |
| Auto Liability Insurance Carrier & Policy #  | :                              |                          |              |                 | - |  |  |
| Workers Compensation Insurance Carrier   | & Policy #:                    |                          |              |                 | - |  |  |
| FEDERAL TAX CLASSIFICATION:  |                                |                          |              |                 |   |  |  |
| ☐ Individual/Sole Proprietor ☐ C Co  | rporation $\square$ S Corporat | ion $\square$ Partnershi | p 🗌 Trust,   | /Estate         |   |  |  |
| ☐ Limited Liability Co. ☐ Other:   |                                |                          |              |                 |   |  |  |
| SBA CLASSIFICATION:  |                                |                          |              |                 |   |  |  |
| It is the policy of Golden Empire Afford<br>encourage the development, particip<br>Enterprises, Women's Business Enterpris | ation, and continued e         | expansion of Small       |              | •               |   |  |  |
| ☐ Minority-Owned ☐ Small Busines   | s Uveteran-Owned               | ☐Woman-Owned             |              |                 |   |  |  |
| Years in Business:   |                                | Accept P                 | urchase Ord  | ers: 🗌 Yes 🗌 No |   |  |  |
| If your business has a   | Social Security number as      | Tax ID, we require th    | ne signature | of the owner.   |   |  |  |
| Authorized Signature:  |                                | Print Name:              |              |                 | _ |  |  |
| Titlo:   |                                | Nate:                    |              |                 |   |  |  |



# **Request for Taxpayer Identification Number and Certification**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

|   | I Name (as snown on your income tax return). Name is required on this line, do not leave this line blank.   |   |          |               |              |          |             |               |    |  |
|---|---|---|----------|---------------|--------------|----------|-------------|---------------|----|--|
|   | 2 Business name/disregarded entity name, if different from above  |   |          |               |              |          |             |               |    |  |
| on page 3.  | 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Ch following seven boxes.  Individual/sole proprietor or C Corporation S Corporation Partnership  | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): |          |               |              |          |             |               |    |  |
| ns e  | single-member LLC   |   |          | Exem          | pt payee     | code     | (if any)    |               |    |  |
| ty<br>tio   | Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partne   | rship) ▶  |          |               |              |          | _           |               |    |  |
| Print or type.<br>See Specific Instructions on page | Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its own | owner of the Li<br>gle-member Ll  | LC is    | sode (if any) |              |          |             |               |    |  |
| eci   | ☐ Other (see instructions) ▶  |   |          | (Applies      | s to account | s mainta | ined outsid | e the U.S     | .) |  |
| Sp  | 5 Address (number, street, and apt. or suite no.) See instructions.   | Requester's   | name a   | and ad        | dress (op    | tiona    | )           |               |    |  |
| See   |   |   |          |               |              |          |             |               |    |  |
| 0,  | 6 City, state, and ZIP code   |   |          |               |              |          |             |               |    |  |
|   |   |   |          |               |              |          |             |               |    |  |
|   | 7 List account number(s) here (optional)  |   |          |               |              |          |             |               |    |  |
|   |   |   |          |               |              |          |             |               |    |  |
| Par   |   |   |          |               |              |          |             |               |    |  |
|   | your TIN in the appropriate box. The TIN provided must match the name given on line 1 to au up withholding. For individuals, this is generally your social security number (SSN). However, 1  |   | cial sec | curity i      | number       | _        |             |               | _  |  |
|   | ap withholding. For individuals, this is generally your social security humber (3314). However, it<br>ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other  | or a  |          | _             |              | _        |             |               |    |  |
|   | es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>  | et a  |          |               |              | ]        |             | $\perp \perp$ |    |  |
| TIN, la   |   | or  |          |               |              | —.       |             |               |    |  |
|   | If the account is in more than one name, see the instructions for line 1. Also see What Name per To Give the Requester for guidelines on whose number to enter.   | and Em  | ployer   | identi        | fication     | numb     | er          | =             |    |  |
| INUITIL   | ier to dive the nequester for guidelines off whose number to enter.   |   |          | _             |              |          |             |               |    |  |
|   |   |   |          |               |              |          |             |               |    |  |
| Par   |   |   |          |               |              |          |             |               |    |  |
|   | r penalties of perjury, I certify that:   |   |          |               |              |          |             |               |    |  |
| 2. I ar<br>Ser                                      | e number shown on this form is my correct taxpayer identification number (or I am waiting for not subject to backup withholding because: (a) I am exempt from backup withholding, or (brvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest longer subject to backup withholding; and  | ) I have not b  | een n    | otified       | by the       | Inter    |             |               | .m |  |
| 3. I ar   | m a U.S. citizen or other U.S. person (defined below); and  |   |          |               |              |          |             |               |    |  |
| 4. The  | e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting  | na is correct.  |          |               |              |          |             |               |    |  |

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid,

| other than   | 1 1 2/                        | utions to an individual retirement arrangement (IRA), and generally, payments, but you must provide your correct TIN. See the instructions for Part II, later. |  |
|--------------|-------------------------------|--|--|
| Sign<br>Here | Signature of<br>U.S. person ▶ | Date ►   |  |

## **General Instructions**

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

#### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN). individual taxpaver identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

#### GOLDEN EMPIRE AFFORDABLE HOUSING, INC. II

Instructions for Submitting a Bid:

- 1. Thoroughly review all specifications, the Scope of Work, site plans and all other documents in the bid packet.
- 2. Complete the bid sheet with a breakdown of costs per property and the total costs for all properties. This bid must include all tax, labor, material, and deliveries.
- 3. Sign, date, and initial all places where indicated.
- 4. Complete the Vendor Information Sheet to the fullest extent possible.
- 5. Complete and sign the form W-9.
- 6. Submit all documents (the entire bid packet, Vendor Information Sheet, and form W-9) to Golden Empire Affordable Housing, Inc. II no later than May 23, 2024 at 3:00 p.m. You are encouraged to submit these documents via email to <a href="mailto:procurement@geahi.org">procurement@geahi.org</a>. However, if you are unable to submit your bid via email, you can mail the packet to our office or fax it. We must receive all documents by the aforementioned deadline.

\*If you have any questions, please call our office or email <a href="mailto:procurement@geahi.org">procurement@geahi.org</a>