



Project Plans / RFP Documents:

<https://acrobat.adobe.com/id/urn:aaid:sc:US:c3cc5296-4786-484c-9550-7bf6290ab9cb>

We are pleased to invite your firm to submit a proposal for the new construction project identified below. This Request for Proposal (RFP) is being issued to solicit qualified Subcontractors to provide a complete proposal including pricing, qualifications, and project approach.

Project Name: NORTH CHESTER APARTMETNS

Project Location: 805 NORTH CHESTER

Project Description:

This project consists of the new Construction of a multifamily residential development consisting of **4 residential buildings** with a total of **15 dwelling units**. Each unit includes **1 bedroom, 1 bathroom, and an open-concept living room and kitchen**. The project also includes construction of the **parking lot**, as well as all associated site improvements, utilities, landscaping, and infrastructure necessary to complete the development in accordance with the approved plans and specifications.

SPECIAL REQUIREMENTS

PREVAILNG WAGE

TRADE: **HVAC**

The intent of this RFP is to select a Subcontractor based on overall value, including cost, experience, proposed schedule, and approach to the work.

RFP Schedule:

- RFP Issued: **Tuesday 9-22-26**
- Deadline for Questions (RFIs): **Monday 9/28/26**
- Proposal Due Date: **Wednesday 9/30/26 @ 2pm**

***Note:** If you plan to bid on this project, please notify us so we can keep you informed of any addenda, updates, or changes throughout the bidding process.

Proposal Submission Requirements:

Please submit your proposal in accordance with the instructions included in this RFP package. At a minimum, proposals shall include:

- Lump sum or GMP pricing with a detailed cost breakdown.
- Project schedule and duration.
- Proposed project team, including the number of crews and size.
- List of key subcontractors.
- Clearly identified assumptions, and exclusions.
- If is your first time doing business with GEAHI, please Fill out the Vendor information sheet, provide Company qualifications and relevant project experience, including 3 letters of recommendation from projects of similar size and scope.

Proposals shall be submitted electronically in PDF format to Arturo Aguilar. At procurement@geahi.org. Late submissions or incomplete forms may not be considered.

All questions or requests for clarification shall be submitted in writing to:
Arturo Aguilar
aaguilar@geahi.org
661.373.9506

Responses to RFIs will be issued via addenda to all invited proposers.

We appreciate your time and interest in this project and look forward to reviewing your proposal.

Sincerely,

ARTURO AGUILAR

Golden Empire Affordable Housing Inc

GOLDEN EMPIRE AFFORDABLE HOUSING, INC
601 24TH STREET, SUITE B
BAKERSFIELD, CA 93301
OFFICE 661.633.1533 | EMAIL: PROCUREMENT@GEAHL.ORG
SPECIFIC REQUIREMENTS

PROJECT:

North Village Apartments

TRADE: HVAC

DATE: _____

SUBCONTRACTOR: _____

LICENSE # _____

EMAIL: _____

Reference to Subcontractor shall mean **Heating and AC Subcontractor** and reference to Owner shall mean Golden Empire Affordable Housing, Inc. Subcontractor shall furnish all labor and equipment to perform the operations necessary to complete all heating and Air Conditioning work as indicated on the Contract Documents and specified herein, including but not limited to the following:

CONTRACT WILL INCLUDE:

1. Subcontractor is responsible to review contract document and approved plans.
2. Furnish and install Central AC -HVAC system for all units.
3. Thermostat to be HoneyWell – TH3110D1008 Pro non-programable standard display thermostat.
4. Please refer to plans for details on SEER & EER.
5. RR Exhaust, ducts, and termination.
6. Provide ducting for ceiling mounted exhaust fan.
7. Furnish and install ceiling mounted exhaust fan as per plan. Please refer to plans for more details.
8. Subcontractor shall install kitchen vent duct as per plans.
9. Subcontractor shall use UV resistant line set tape.
10. Subcontractor shall install all equipment as noted on the mechanical sheets.
11. Subcontractor must secure A/C units and label disconnects with brass tags by unit number.
12. No temp power Onsite.
13. Warranty for one year.

Initials _____ Initials _____

10/2018:AA

GOLDEN EMPIRE AFFORDABLE HOUSING, INC.
601 24TH STREET, SUITE B
BAKERSFIELD, CA 93301
OFFICE 661.633.1533 | FAX 661.633.1617

TRADE: HVAC

Subcontractor

SCOPE OF WORK

2. SCOPE

The Subcontractor shall coordinate his work with the Owners Housing Construction Superintendent and other trades affected by his work, to assure the adequate clearance for all building systems.

1. All ducts shall be sized for proper air delivery in compliance with all applicable codes, standards, and plans. Fasten and construct all ducts airtight per manufacturer's specifications. Ducts shall be installed per manufacturer's installation instructions and shall be supported at joints and at each bend and wired in place when required. Furnish and install all duct work and/or screened areas require for furnace combustion air.
2. All roof flashing furnish and install by roofer.
3. Subcontractor to install air conditioning unit on concrete pad. Pads will be installed level and condenser units shall be attached securely. All low voltage wiring from the condenser to house will be enclosed in waterproof seal tight flexible conduit.
4. Subcontractor shall furnish and install furnace and thermostat.
5. All equipment shall be installed horizontal style; furnaces in attics complete with drip pans.
6. All thermostats shall be in location shown on plans. If Subcontractor changes location without written permission from Owner, Subcontractor shall relocate at Subcontractor's expense.
7. The Subcontractor shall supply and install the first 12 inches of the primary and secondary condensate drain lines. Plumber will run the rest as per code.
8. Subcontractor shall supply and install a Safe-T-Switch in all primary condensate lines. Connection to unit to be performed by Mechanical Subcontractor. Electrical service and high voltage hook-up to condensing units shall be provided by electrical Subcontractor.
9. Subcontractor is responsible for having system fully charge and operational at completion of finish.
10. Subcontractor is responsible for startup of system.
11. Subcontractor shall install kitchen vent duct as per plan.
12. Provide support for all mechanical work.

Initials _____ Initials _____

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3. MATERIALS

- 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 the Subcontractor.
- b. Any storage container staying on the premises needs to be approve by Owner.
- c. Subcontractor shall supply generator, if necessary, at no additional charge to Owner.
- d. Subcontractor shall be responsible for delivery and storage of material until items are installed.
- e. Items delivered during rainy weather shall be protected by contractor.
- f. All materials shall meet code requirements and Contract Documents.
- g. Subcontractor shall furnish and install all material noted on the Mechanical pages of the approved set of plans.

4. START-UP

- a. Subcontractor shall check function of both heating and air conditioning system. Subcontractor shall also check thermostat function.
- b. Subcontractor shall check refrigerant line pressure.
- c. Subcontractor shall check return air grills.
- d. Subcontractor shall check to make sure all condensers are level.
- e. Subcontractor shall check that the 120 volt is wired correctly.
- f. Start up must be complete 48 hours after being notified by Owners Housing Construction Superintendent.

5. WARRANTY

Subcontractor shall warranty installation for 1 year minimum.

6. GENERAL REQUIREMENTS

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

7. WORKMANSHIP

Workmanship shall be in compliance 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. Installation shall be by skilled installers and in accordance with the best of trade standards.

Initials _____ Initials _____

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8. PERFORMANCE STANDARD

If at any time a procedure is not in accordance with the contract documents or Industry standards, Subcontractor is responsible for stopping the work and notifying the Owners Housing Construction Superintendent.

- a. Prior to starting work, Subcontractor must inspect those areas prepared for your work and notify superintendent of any deficiencies which impact your work.
- b. Anything not meeting the following standards will be repaired or replaced by Subcontractor at no additional cost to Owner.
- c. Subcontractor will replace any defective part at no cost to Owner.
- d. All shall be judged defective if it fails to meet contract documents. Such work shall be corrected by Subcontractor in a manner and by such means as is satisfactory to Owner at no additional cost.

9. Clean up

Subcontractor shall clean- up and dispose daily all debris, waste material, rubbish, etc. The site shall be left in a neat and clean condition acceptable to Owner.

- a. Subcontractor is responsible to sweep when completed and or as directed by Owners Housing Construction Superintendent.
- b. Subcontractor is responsible for the continuous and daily clean up of their construction activities. Failure to perform clean up activities will result in back-charges for supplemental labor to complete this requirement.

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

TOTAL \$ _____

Payment Schedule:
(Refer to Contract, Article 5 "Progress Payments")

90% Rough & Finish complete.
10% Building Inspection signed off

Subcontractor

Date

Owner

Date

Initials _____ Initials _____

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Request for Taxpayer Identification Number and Certification

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

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

Print or type. See Specific Instructions on page 3.	1 Name (as shown 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	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor or single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. ☐ Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting 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, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

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 taxpayer 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, later.

VENDOR INFORMATION SHEET

Date: _____ Prepared By: _____

Official Business Name: _____

DBA: _____

Location Address: _____

Street

City

State

Zip

Remit Address: _____

Street

City

State

Zip

Contact Person: _____ Title: _____

Phone #: _____ Accts. Receivable Phone #: _____

Fax #: _____ Customer Service Phone #: _____

E-mail Address: _____

Federal ID # or SS#: _____ Contractor Lic #: _____

Business Lic #: _____ City License Issued: _____

General Liability Insurance Carrier & Policy #: _____

Auto Liability Insurance Carrier & Policy #: _____

Workers Compensation Insurance Carrier & Policy #: _____

FEDERAL TAX CLASSIFICATION:

☐ Individual/Sole Proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/Estate

☐ Limited Liability Co. ☐ Other: _____

SBA CLASSIFICATION:

It is the policy of Golden Empire Affordable Housing, Inc. II, consistent with Federal, State and local laws, to promote and encourage the development, participation, and continued expansion of Small Business Enterprises, Minority Business Enterprises, Women's Business Enterprises and Veteran Business Enterprises.

☐ Minority-Owned ☐ Small Business ☐ Veteran-Owned ☐ Woman-Owned

Years in Business: _____

Accept Purchase Orders: ☐ Yes ☐ No

If your business has a Social Security number as Tax ID, we require the signature of the owner.

Authorized Signature: _____ Print Name: _____

Title: _____ Date: _____