COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

MARK PESTRELLA, Director

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ADDRESS ALL CORRESPONDENCE TO:
P.O. BOX 1460
ALHAMBRA, CALIFORNIA 91802-1460

November 17, 2026

IN REPLY PLEASE
REFER TO FILE: BRC-2

NOTICE TO BIDDERS "B"

FIRE STATION 163 BELL PRIVACY AND ACCESS REFURBISHMENT PROJECT
PROJECT ID NUMBER: BRC0000699
SPECS NO. 7734

This Notice to Bidders "B" extends the bid due date and forms a part of the contract documents.

BID DUE DATE

Notice to Bidders "B" extends the deadline for submittal of bids for Fire Station 163 Bell Privacy and Access Refurbishment Project, Project ID Number BRC0000699. **The bid date is extended from Thursday, November 19, 2026, to Wednesday, November 25, 2026. Bids are due at 10:00 a.m., via Bid Express.** Bids will be publicly opened, examined, and declared by Public Works at or about 2:00 p.m., on November 25, 2026, via Microsoft Teams. The meeting link will be posted on Public Works' website under the Project ID Number BRC0000699 listing on November 25, 2026.

PROJECT MANUAL

1. Refer to Section 00 03 00, Form of Bid. **Delete** the section in its entirety and **replace** with the attached revised Section 00 03 00 (Attachment A).

Please notify your subcontractors to this effect. If you have any questions, please contact Mr. Aram Hakobyan at (626) 458-2181 or ahakobyan@pw.lacounty.gov.

Very truly yours,

MARK PESTRELLA, PE
Director of Public Works

Brian Soria
for
SOO KIM
Division Chief
Business Relations and Contracts Division

SK:ah

ATTACHMENT A

_____ _____

Name of Bidder (Firm Name) Vendor Identification Number

SECTION 00 03 00

FORM OF BID TO BE USED BY BIDDERS

The undersigned proposes to furnish all materials, labor, and equipment required for the construction to complete the **Fire Station 163 Bell Privacy and Access Refurbishment Project**, in accordance with Drawings and Specifications **7734**, including addenda thereto, if any, adopted by the Board of Supervisors, and on file in the office of the Board of Supervisors, as follows:

The lowest bid price shall be determined by adding the following items: Lump Sum Bid in Words (1) + [Extended Overhead Daily Rate (2) x Multiplied by 30 days] = Total Lump Sum Bid. Preference as stated in Section 00 01 00, 1.30, will be applied to the Total Lump Sum Bid, if applicable, to determine the final total bid amount.

1. LUMP SUM BID:

The lump sum bid for the work, including Best Management Practices (BMP) and Construction and Demolition Debris Recycling, and Mandatory Jobs Coordinator requirements completed according to the Drawings and Specifications, will be:

($_____) (_____)

Lump sum bid in figures Lump sum bid in words

2. EXTENDED OVERHEAD DAILY RATE:

The daily rate for the sum of the Contractor's field office and home office overhead applicable to this project, for each day of compensable delay will be:

($_____) (_____)

Daily rate in figures Daily rate in words

3. COUNTY PROGRAM PREFERENCE:

The Local Small Business Enterprise Program Preference is provided by the County for purposes of bid evaluation only, as specified in Article 1.30 of Section 00 01 00. If Bidder is a qualifying Local Small Business Enterprise, check "yes" in the box below. Section 00 04 38 Request for County Program Preference Consideration must be submitted at the time of bid with a copy of the certification letter issued by the County of Los Angeles Department of Economic Opportunity at time of bid. If non-qualifying, check "no" in the appropriate box.

LSBE Certification for Non-Federally Funded County Solicitations

LSBE Yes ☐ No ☐

4. RECEIPT OF NOTICE TO BIDDERS: (IF APPLICABLE)

I hereby certify and declare that I have received, reviewed and incorporated Notice to Bidders "A" dated November 5, 2026, and Notice to Bidders "B" dated November 17, 2026 into my Bid.

Executed this day of _____ (Month and Year)

By: _____
(Authorized Signature of a Principal Owner, Officer, or Manager)

_____

_____

NOTE: Any alteration or addition to the Form of Bid may invalidate same. All blank spaces shall be filled out completely. Line out nonapplicable blanks. An incomplete form may invalidate bid. The County reserves the right to waive any informalities or to reject any or all bids or to accept any alternatives when called for.

I (We) certify that on _____, 20____, License No. _____, license classification(s) _____, was issued to me (us), in the name of _____, by the Contractors' State License Board, pursuant to California Statutes of 1929, as amended, and that said license has not been revoked.

Firm Ownership Information
Check where applicable:

1. ( ) Minority-Owned
   ( ) Woman-Owned
   ( ) Disadvantaged-Owned
   ( ) Disabled Veteran-Owned
   ( ) LGBTQQ-Owned

2. ( ) An individual
   ( ) A corporation. Name state or territory of Incorporation
   _____
   ( ) A copartnership
   ( ) A joint venture

Race/Ethnic Composition
For statistical purposes only.
( ) Black/African American
( ) Hispanic/Latino
( ) Asian or Pacific Islander
( ) Native Americans
( ) Subcontinent Asian
( ) White

If a copartnership or joint venture, list names of individuals comprising same below
_____
_____
_____

Date signed _____, 20_____

Place _____
City and State

Respectfully submitted,

_____
Firm Name (if applicable)

Bidder's address, E-mail address, and telephone:

_____
Number and Street

_____
City and State Zip Code

_____
Telephone

_____
Fax

_____
Signature and Print Name

_____
Title and E-mail Address

_____
Signature and Print Name

_____
Title and E-mail Address