|  |
| --- |
| **Design - Bid - Build Projects** |
| **Date:** | Insert |
| **To:** | **Paralegal Specialist: Alison Kulas** | **Suite:** | 1307 |
| **From:** | **DAS/CS Project Manager:** Insert | **Suite:** | 1201 |
| **Project Title:** | Insert Project Title |
| **Project Location:** | Insert Project Location |
| **DAS/CS Project Number:** | Insert Project Number |
| **Bid Opening Date:** | Insert |
| **Award Contract To:** | **Insert** |
|  | *(Firm Name)* |
|  | **Insert** |
|  | *(Firm Address)* |
| **Consultant’s Total Construction Cost Estimate:**(See 6005 Consultant Bid Data Statement) | **$** | Insert |
| **Maximum Available Construction Funding:**(See 6010 Bid Release Form) | **$** | Insert |

|  |
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| **Bid Amounts:****(See 00 41 00 Bid Proposal Form)** |
| **Proposed Lump Sum Base Bid Amount:** | $ | Insert |
| **Checked Boxes Are Supplemental Bids Included In Recommended Contract Award**(See Notes Below) |[ ]  **Supplemental Bid No. 1:** | **$** | Insert |
|  |[ ]  **Supplemental Bid No. 2:** | **$** | Insert |
|  |[ ]  **Supplemental Bid No. 3:** | **$** | Insert |
|  |[ ]  **Supplemental Bid No. 4:** | **$** | Insert |
|  | **Total Checked Supplemental Bids:** | $ | Insert |

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| **Recommended Contract Award Amount:** |
| **Proposed Lump Sum Base Bid Amount** plus**Total Checked Supplemental Bids:** | **$** | **Insert** |
|  |
| **Notes:** The **Supplemental Bids** that are checked above and are to be awarded (1) must be in **sequential numerical order**, and (2) shall not exceed the **Maximum Available Construction Funding** amount as indicated above.The Project Manager shall confirm that the **Supplemental Bids** are in **Sequential Order** and do not exceed the **Maximum Available Construction Funding**. The “Lowest Responsible and Qualified Bidder” shall be Awarded the Construction Contact. The **Contract Award Amount** shall consist of the **Proposed Lump Sum Base Bid Amount** plus **Total Checked** **Supplemental Bids** and shall **not** exceed the **Maximum Available Construction Funding**. No Funds shall be added or subtracted from the **Maximum Available Construction Funding** after Bid Opening.Significant differences between the **Consultant’s Total Construction Cost Estimate** indicated above and the **Proposed Lump Sum Base Bid Amount** are to be explained in "Remarks" section on Page 2 of this Form.  |
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| **Remarks:** Insert |
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| --- | --- | --- | --- |
| **Building Permit Received:** |[ ]  **Yes** | **Date Received:** | Insert |
|  |  |  |  |  |
|  |[ ]  **Not Applicable (as determined by OSBI)** |
|  |  |  |
|  |  |  |
| **Submitted By:** | **DAS/CS Project Manager:** | Insert |
|  |  | *(Name)* |
|  |  |  |
|  | **Signature:** |  | **Date:** |  |
|  |  |  |
| **Reviewed By:** | **Construction Administrator:** | Insert |
|  |  | *(Firm Name/person signing)* |
|  |  |
|  | **Signature:** |  | **Date:** |  |
|  |  |  |  |  |
|  |  |  |
| **Approved By:** | **Assistant Director Of Project Management:** | Insert |
|  |  | *(Name)* |
|  |  |  |
|  | **Signature:** |  | **Date:** |  |
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| **NOTES TO PROJECT MANAGER:** * Save a PDF of this form into **G:\COREGROUP\1. PROJECT MANUALS FOR BIDDING\ [Project Number].**
* Email a PDF of this form to the following:
 |
|  | DAS Deputy Commissioner: | D. Hobbs | darren.hobbs@ct.gov  |
| DAS/CS Agency Legal Director: | J. Padula | jenna.padula@ct.gov  |
| DAS/CS Director of Project Management: | P. Simmons | peter.simmons@ct.gov |
| DAS/CS Chief Architect:  | D. Barkin | david.barkin@ct.gov  |
| DAS/CS Policy & Procurement Unit:  | A. Kulas | alison.kulas@ct.gov  |
| DAS/CS ADPM for Project:  | Insert Name | Insert Email Address |
| CHRO:  | A. Bingham | alvin.bingham@ct.gov |
| Project File:  | File Folder**:** Insert Project No. |  |

**END**