

NOTE TO BIDDERS:

Bidders are responsible for ensuring that all required forms and supporting documentation are completed and submitted with its Bid. Failure to submit all required documents may result in the Bid being determined non-responsive.

The following documents shall be uploaded as an attachment(s) on HiePRO before the bid closing:

1. Completed Offer and Bid Form (Pages 1 thru 6)
2. Proof of insurance (COI)
3. Copies of all applicable contractor licenses
4. Copy of bid security

**HONUAKAHA HOT WATER RETURN SYSTEMS MODIFICATIONS
LOCATED AT 545 QUEEN STREET, HONOLULU, HAWAI'I
IFB HCDA CIP-2026-03**

Hawaii Community Development Authority
547 Queen Street
Honolulu, Hawaii 96813

The undersigned has carefully read and understands the terms and conditions specified in the Invitation for Bids attached hereto and hereby submits the following Bid to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this quote, 1) he/she is declaring his/her Bid is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) he/she is certifying that the price(s) submitted was (were) independently arrived at without collusion.

The undersigned represents: (Check ✓ one **only**)

- ☐ A **Hawaii business** incorporated or organized under the laws of the State of Hawaii.
- ☐ A **Compliant Non-Hawaii** business not incorporated or organized under the laws of the State of Hawaii, but registered at the State of Hawaii, Department of Commerce and Consumer Affairs Business Registration Division to do business in the state of Hawaii.

State of Incorporation: _____

Offeror is: ☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ Joint Venture ☐ Other : _____

Federal I.D. No.: _____ Hawaii General Excise Tax License I.D. No.: _____

Payment address (other than street address below): _____

City, State, Zip Code: _____

Business address (street address): _____

City, State, Zip Code: _____

Respectfully submitted on _____, 2026

Phone No.: _____ By: _____

Authorized Original Signature

Email: _____

Printed name and title

**** Exact Legal Name of Company ("Bidder"):** _____

****If Bidder shown above is a "dba" or a "division" of a corporation, furnish the exact legal name of the corporation under which the awarded contract will be executed:**

Bidder Shall Provide the Following Information:

1. Permanent **Oahu** Office Location (Address): _____

2. Office Number: _____ Email Address: _____

3. Point of Contact:

Primary

Name & Title: _____

Telephone Number: _____ Cell Number: _____

Email Address: _____

Secondary

Name & Title: _____

Telephone Number: _____ Cell Number: _____

Email Address: _____

4. Years of Experience (must have a minimum of five (5) consecutive years): _____

5. List of current license(s):

License

License No.

Bidder: _____

Name of Company

Insurance Requirements

<u>Insurance Type</u>	<u>Carrier</u>	<u>Policy No.</u>
Commercial General Liability	_____	_____
Automobile Liability	_____	_____
Workman's Compensation	_____	_____
Temporary Disability	_____	_____
Prepaid Health Care	_____	_____
Unemployment Insurance	State of Hawaii Labor No.:	_____

If you are not required to have one or more of the above coverages, please explain below:

Company and/or Governmental Agency References

List a minimum of three (3) companies and/or government agencies to which Bidder has provided or is currently providing similar services as listed in this IFB. Do not list the HCDA as a reference. The HCDA reserves the right to contact these references to ascertain the quality and timeliness of services provided.

<u>Name of Site /Company/ Agency</u>	<u>Name & Title of Contact Person</u>	<u>Telephone No.</u>	<u>Check if Currently Providing Services To</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Bidder: _____
Name of Company

BID FORM

Bidders shall complete all portions of this Bid Form. Failure to provide a Base Bid and all requested Unit Prices may render the Bid non-responsive.

PART A: BASE BID

The undersigned Bidder agrees to furnish all labor, materials, equipment, supervision, permits, testing, startup, restoration, commissioning, closeout documents, applicable taxes (including the Hawaii General Excise Tax), and all other labor, materials, services, equipment, and incidentals necessary to complete the Honuakaha Hot Water Return System Modifications in accordance with the Invitation for Bids, Drawings, Specifications, Addenda, and all Contract Documents.

Bid Item	Amount
Base Bid (Lump Sum)	*\$

**** The Base Bid (Lump Sum) above shall be the amount entered into HlePRO.***

PART B: UNIT PRICES (FOR CHANGE ORDERS ONLY)

The Unit Prices listed below are for use in negotiating approved change orders and will not be used in determining the lowest responsive bidder. The Unit Prices shall remain valid for the duration of the Contract unless otherwise approved by HCDA.

Item No.	Description	Unit	Unit Price
1	1 1/4" Type L Copper Pipe (installed)	Per LF	\$
2	Concrete Core Drill	Each	\$
3	Wall/Ceiling Repair	Per SF	\$
4	Journeyman Plumber	Per Hour	\$
5	Apprentice	Per Hour	\$

PART C: ACKNOWLEDGEMENTS

The Bidder acknowledges that it has examined the site, reviewed the Drawings, Specifications, Addenda, and all Contract Documents, has verified existing field conditions to the extent reasonably observable, and that the Lump Sum Base Bid includes all labor, materials, equipment, supervision, permits, taxes, overhead, profit, incidentals, and all work necessary to complete the Project.

Bidder: _____

Authorized Signature: _____

Printed Name/Title: _____

Date: _____

**WAGE CERTIFICATE
FOR SERVICE CONTRACTS**

Subject: IFB No.: HCDA CIP-2026-03

Title of IFB: Honuakaha Hot Water Return Systems Modification
Located at 545 Queen Street, Honolulu, Hawai'i

Pursuant to Section 103-55, Hawaii Revised Statutes (HRS), I hereby certify that if awarded the contract in excess of \$25,000, the services to be performed will be performed under the following conditions:

1. All applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety will be fully complied with; and
2. The services to be rendered shall be performed by employees paid at wages or salaries not less than the wages paid to public officers and employees for similar work, with the exception of professional, managerial, supervisory, and clerical personnel who are not covered by Section 103-55, HRS.
3. Chapter 104 HRS Wages and Hours of Employees on Public Works Law, applies to every public works construction project over \$2,000.

I understand that failure to comply with the above conditions during the period of the contract shall result in cancellation of the contract, unless such noncompliance is corrected within a reasonable period as determined by the procurement officer. Payment in the final settlement of the contract or the release of bonds, if applicable, or both shall not be made unless the procurement officer has determined that the noncompliance has been corrected; and

I further understand that all payments required by Federal and State laws to be made by employers for the benefit of their employees are to be paid in addition to the base wage required by section 103-55, HRS.

Bidder: _____

Authorized Signature: _____

Printed Name/Title: _____

Date: _____