



ADDENDUM NUMBER 1

MODIFICATIONS TO RIVERSIDE WTP HIGH SERVICE PUMPS

FOR

CITY OF WEST COLUMBIA

GMC PROJECT NO. VGRE220006

1. Revisions to Project Manual

- 1.1 The following revisions are hereby added as Addendum No. 1 to the referenced Project Manual and Plans and shall be considered when preparing bids.
- 1.2 C-111 – Advertisement to bid: Revised Bid Date

Thursday, February 15th, 2024 @ 2:00 PM.

- 1.3 Add C-451 (**Attachment 1**) to the project manual to be filled out and submitted with the bid.
- 1.4 Section C-410 – Bid Form: Delete Article 7 Item H – Illegal Immigration Form

2. Contractor Questions

- 2.1 What size conduit and wire will be going to the 125VFD from the new 1000A Panel? (reference E-961)
RESPONSE: The intent is to match existing. At minimum, conduit and conductors should be 3#4/0, 1#4(G) – 2-1/2" C
- 2.2 What size conduit and wire will be needed from the 125VFD to the motor? (reference E-961)
RESPONSE: The intent is to match existing. At minimum, conduit and conductors should be 3#4/0, 1#4(G) – 2-1/2" C
- 2.3 Where is the existing Motor Controller and what size conduit and wire will be needed from the 1000A Panel? (reference E-961)
RESPONSE: The existing motor controllers are sitting outside in their own enclosures next to the high service pumps on the clearwell. See above for conduit/conductors.
- 2.4 Will we be responsible for furnishing the fiber for the new SCADA Panel, or will this be furnished by others? (reference E-961)
RESPONSE: The SCADA panel, integration, fiber terminations, etc. will be by others, outside the scope of this contract.
- 2.5 What size enclosure will be needed for the 125HP Drive?
RESPONSE: The existing 125HP VFD shall be removed from the existing enclosure and wall mounted as is, with the custom wireway installed as shown on detail E-961.



2.6 Will VFD cable be needed or single conductor cables from the drive to the motors?

RESPONSE: As defined in specification 26 05 19, VFD output circuits shall be type XHHW-2 in metal conduit.

2.7 Please provide additional information on the 350 HP pump.

RESPONSE: See attached information (Attachment 2)

2.8 Article 7 of the Bid form, Section C-410, page 4, requires certain items to be submitted with the bid. However, items B, C, D, G, and H are not included in the contract documents. Please provide the required forms or confirm that these are not required.

RESPONSE:

- Item B and C – Include list with bid.
- Item D and G – See Section 1.3 above and Attachment 1.
- Item H – Not Required - See Section 1.4 above.

3. Acknowledgement of Receipt

3.1 Receipt of Addendum shall be acknowledged in two ways:

3.1.1 Note on (EJCDC C-410 Article 3) page 1 of Bid Form of the Project Manual – Bidder acknowledges receipt of “Addendum No. 1 and date of February 2, 2024.

AND

3.1.2 EMAIL GMC immediately at becca.pick@gmcnetwork.com confirming the addendum has been received and is legible.

4. Conclusion

4.1 This is the end of Addendum Number 1, dated Friday, February 2, 2024.

5. Attachments

5.1 Attachment 1: C-451 – Qualifications Statement (12 PGS).

5.2 Attachment 2: Motor information (2 PGS).

QUALIFICATIONS STATEMENT

THE INFORMATION SUPPLIED IN THIS DOCUMENT IS CONFIDENTIAL TO THE EXTENT
PERMITTED BY LAWS AND REGULATIONS

1. SUBMITTED BY:

Official Name of Firm:

Address:

2. SUBMITTED TO:

3. SUBMITTED FOR:

Owner:

Project Name:

TYPE OF WORK:

4. CONTRACTOR'S CONTACT INFORMATION

Contact Person:

Title:

Phone:

Email:

5. AFFILIATED COMPANIES:

Name:

Address:

6. TYPE OF ORGANIZATION:

☐ SOLE PROPRIETORSHIP

Name of Owner:

Doing Business As:

Date of Organization:

☐ PARTNERSHIP

Date of Organization:

Type of Partnership:

Name of General Partner(s):

☐ CORPORATION

State of Organization:

Date of Organization:

Executive Officers:

- President:

- Vice President(s):

- Treasurer:

- Secretary:

☐ LIMITED LIABILITY COMPANY

State of Organization:

Date of Organization:

Members:

☐ JOINT VENTURE

Sate of Organization:

Date of Organization:

Form of Organization:

Joint Venture Managing Partner

- Name:

- Address:

Joint Venture Managing Partner

- Name:

- Address:

Joint Venture Managing Partner

- Name:

- Address:

7. LICENSING

Jurisdiction: _____

Type of License: _____

License Number: _____

Jurisdiction: _____

Type of License: _____

License Number: _____

8. CERTIFICATIONS

CERTIFIED BY:

Disadvantage Business Enterprise: _____

Minority Business Enterprise: _____

Woman Owned Enterprise: _____

Small Business Enterprise: _____

Other (_____): _____

9. BONDING INFORMATION

Bonding Company: _____

Address: _____

Bonding Agent: _____

Address: _____

Contact Name: _____

Phone: _____

Aggregate Bonding Capacity: _____

Available Bonding Capacity as of date of this submittal: _____

EJCDC® C-451, Qualifications Statement.

Copyright © 2013 National Society of Professional Engineers, American Council of Engineering Companies,
and American Society of Civil Engineers. All rights reserved.

10. FINANCIAL INFORMATION

Financial Institution: _____

Address: _____

Account Manager: _____

Phone: _____

~~INCLUDE AS AN ATTACHMENT AN AUDITED BALANCE SHEET FOR EACH OF THE
LAST 3 YEARS~~

11. CONSTRUCTION EXPERIENCE:

Current Experience:

List on **Schedule A** all uncompleted projects currently under contract (If Joint Venture list each participant's projects separately).

Previous Experience:

List on **Schedule B** all projects completed within the last 5 Years (If Joint Venture list each participant's projects separately).

Has firm listed in Section 1 ever failed to complete a construction contract awarded to it?

☐ YES ☐ NO

If YES, attach as an Attachment details including Project Owner's contact information.

Has any Corporate Officer, Partner, Joint Venture participant or Proprietor ever failed to complete a construction contract awarded to them in their name or when acting as a principal of another entity?

☐ YES ☐ NO

If YES, attach as an Attachment details including Project Owner's contact information.

Are there any judgments, claims, disputes or litigation pending or outstanding involving the firm listed in Section 1 or any of its officers (or any of its partners if a partnership or any of the individual entities if a joint venture)?

☐ YES ☐ NO

If YES, attach as an Attachment details including Project Owner's contact information.

12. SAFETY PROGRAM:

Name of Contractor's Safety Officer: _____

Include the following as attachments:

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) OSHA No. 500- Log & Summary of Occupational Injuries & Illnesses for the past 5 years.

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all OSHA Citations & Notifications of Penalty (monetary or other) received within the last 5 years (indicate disposition as applicable) - IF NONE SO STATE.

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all safety citations or violations under any state all received within the last 5 years (indicate disposition as applicable) - IF NONE SO STATE.

Provide the following for the firm listed in Section V (and for each proposed Subcontractor furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) the following (attach additional sheets as necessary):

Workers' compensation Experience Modification Rate (EMR) for the last 5 years:

YEAR	_____	EMR	_____
YEAR	_____	EMR	_____
YEAR	_____	EMR	_____
YEAR	_____	EMR	_____
YEAR	_____	EMR	_____

Total Recordable Frequency Rate (TRFR) for the last 5 years:

YEAR	_____	TRFR	_____
YEAR	_____	TRFR	_____
YEAR	_____	TRFR	_____
YEAR	_____	TRFR	_____
YEAR	_____	TRFR	_____

Total number of man-hours worked for the last 5 Years:

YEAR	_____	TOTAL NUMBER OF MAN-HOURS	_____
YEAR	_____	TOTAL NUMBER OF MAN-HOURS	_____
YEAR	_____	TOTAL NUMBER OF MAN-HOURS	_____
YEAR	_____	TOTAL NUMBER OF MAN-HOURS	_____
YEAR	_____	TOTAL NUMBER OF MAN-HOURS	_____

Provide Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) Days Away From Work, Days of Restricted Work Activity or Job Transfer (DART) incidence rate for the particular industry or type of Work to be performed by Contractor and each of Contractor's proposed Subcontractors and Suppliers) for the last 5 years:

YEAR	_____	DART	_____
YEAR	_____	DART	_____
YEAR	_____	DART	_____
YEAR	_____	DART	_____
YEAR	_____	DART	_____

~~13. EQUIPMENT:~~

~~MAJOR EQUIPMENT:~~

~~List on Schedule C all pieces of major equipment available for use on Owner's Project.~~

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HERewith, INCLUDING ANY ATTACHMENTS, IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NAME OF ORGANIZATION: _____

BY: _____

TITLE: _____

DATED: _____

NOTARY ATTEST:

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____, 20____

NOTARY PUBLIC - STATE OF _____

MY COMMISSION EXPIRES: _____

REQUIRED ATTACHMENTS

1. Schedule A (Current Experience).
2. Schedule B (Previous Experience).
- ~~3. Schedule C (Major Equipment).~~
- ~~4. Audited balance sheet for each of the last 3 years for firm named in Section 1.~~
5. Evidence of authority for individuals listed in Section 7 to bind organization to an agreement.
6. Resumes of officers and key individuals (including Safety Officer) of firm named in Section 1.
7. Required safety program submittals listed in Section 13.
8. Additional items as pertinent.

SCHEDULE A

CURRENT EXPERIENCE

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

SCHEDULE B

PREVIOUS EXPERIENCE (Include ALL Projects Completed within last 5 years)

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

SCHEDULE B

PREVIOUS EXPERIENCE (Include ALL Projects Completed within last 5 years)

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

~~SCHEDULE C - LIST OF MAJOR EQUIPMENT AVAILABLE~~

[illegible]

RIVERSIDE WTF

HS #1

PRODUCT



SECTION: 505

PAGE: 8

RECEIVED IN
DEC 14 1983
PURCHASING

CUSTOMER NAME LAYNE & BOWLER, INC.

CUSTOMER ORDER NO. 9430

U.S.E.M. ORDER NO. J3180029 QUANTITY 1 H.P. 350

FRAME 5808PH TYPE HU PHASE 3 HERTZ 60

R.P.M. 1200 VOLTS 460 ASSY. POS.

MARKS: WEST COLUMBIA, S.C., -HIGH SERVICE PUMP TAG NOS.: S.O.# 83H-5057

FEATURES: 1.15 SF. SIZE BEARINGS FOR 9438 LBS. DOWNTHRUST AT DESIGN, 14,478
MAX. DOWNTHRUST AT SHUT-OFF, WINDING TEMPERATURE DETECTORS, 120 SPACE HEATERS, NRR

24-1/2" BD 7228 UPPER BEARING

2-3/16" BX 143112 6220 LOWER BEARING

SEND (11) COPIES: L&B MEMPHIS ATTN: RONNIE HAYNES

EXCEPTIONS & CLARIFICATIONS (IF ANY):

IF PROPERLY ENDORSED THIS PRINT IS CORRECT
FOR FRAME & ASSEMBLY POSITIONS INDICATED
11 10 77

3/78
 versedes 6/1/77

SECTION 8200
 CURVE NO. 2/83H-5

LAYNE & BOWLER, INC.
 MEMPHIS, TENN. 38108



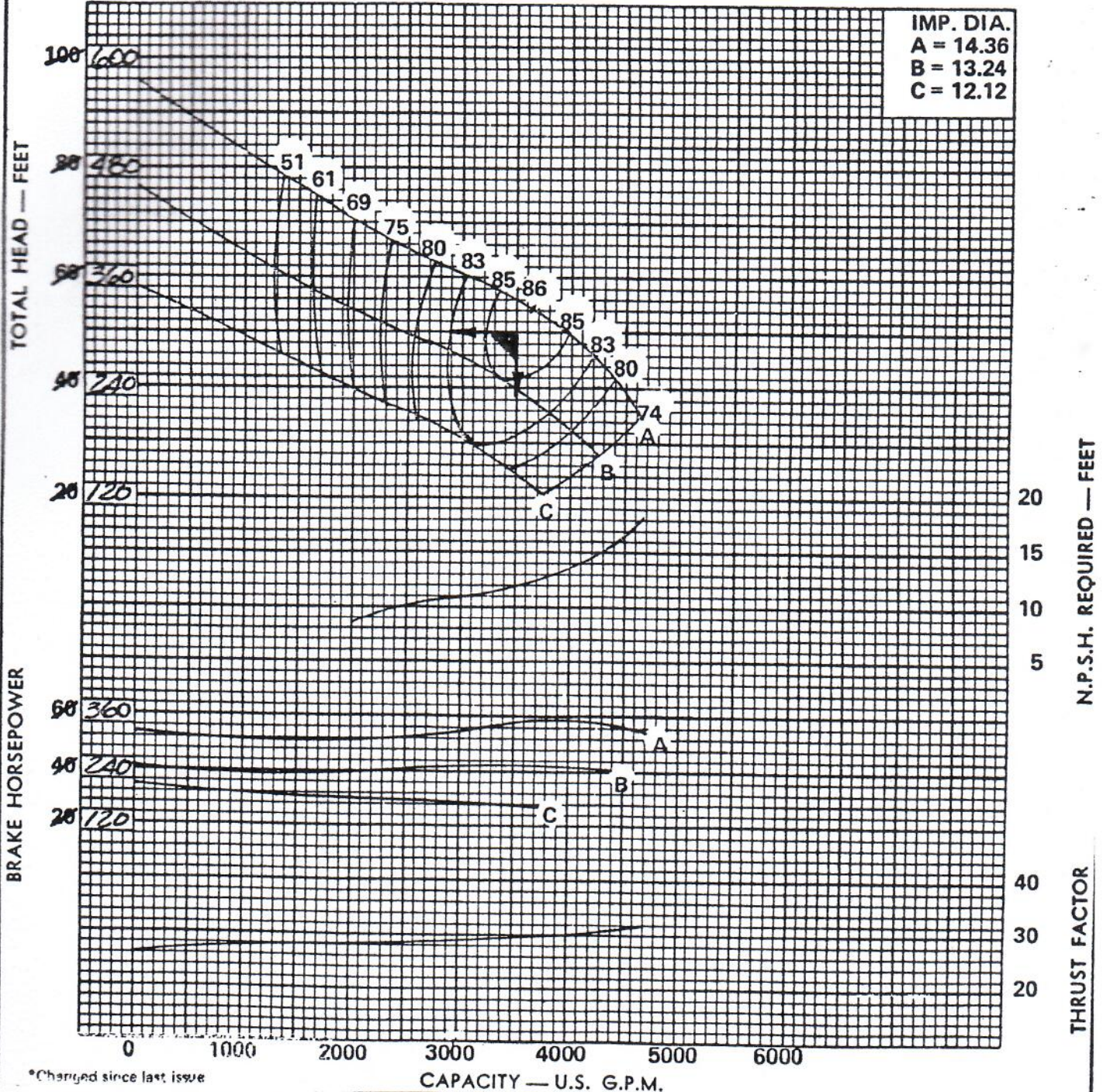
No. Stages	Eff. Change	MATERIAL	Eff. Change
1	0	IMP.—C.I.	-1
2		IMP.—NI-RI	-1
3		BOWL—BRZ.	-1
4		BOWL—NI-R.	-1

19 GM

1180 R.P.M.

SINGLE STAGE LAB PERFORMANCE WITH STANDARD MATERIALS. EFFICIENCY SHOWN FOR 1 OR MORE STAGES. HORSE POWER SHOWN FOR ONE STAGE BASED ON 1 STAGE EFFICIENCY. CORRECTIONS SHOULD BE MADE FOR STAGES AND MATERIAL.

~~ONE~~ (6)
 STAGE STAGES



*Changed since last issue

CUSTOMER: NORAM CONSTRUCTORS CUSTOMER NO: BA14-001-NM LIQUID: WATER
 LOCATION: COLUMBIA, S.C. REF JOB NO:
 JOB NAME: 1.155 12.1 1.155 GPM: 3500