ADDENDUM #1

Project Name:
ISD Elem. School & Outreach Bld. Fire Alarm Replacement
DAS# 9381.00
RFB 938100-01
Addendum #1
Dated: February 14, 2024

This Addendum forms a part of the bidding and contract documents. This Addendum supersedes and supplements all portions of the original bidding and contract documents dated <u>Feb. 02, 2024</u> with which it conflicts.

ACKNOWLEDGE RECEIPT OF THIS ADDENDUM IN THE SPACE PROVIDED ON THE BID FORM. FAILURE TO DO SO MAY SUBJECT THE BIDDER TO DISQUALIFICATION.

1) CLARIFICATIONS

A. The Pre-bid meeting will be held at the Infirmary Building (AKA Outreach Building). See attached map for location and parking.

2) PLANS

A. No items.

3) QUESTIONS AND CLARIFICATIONS

A. No items.

4) SUBSTITUTION REQUESTS

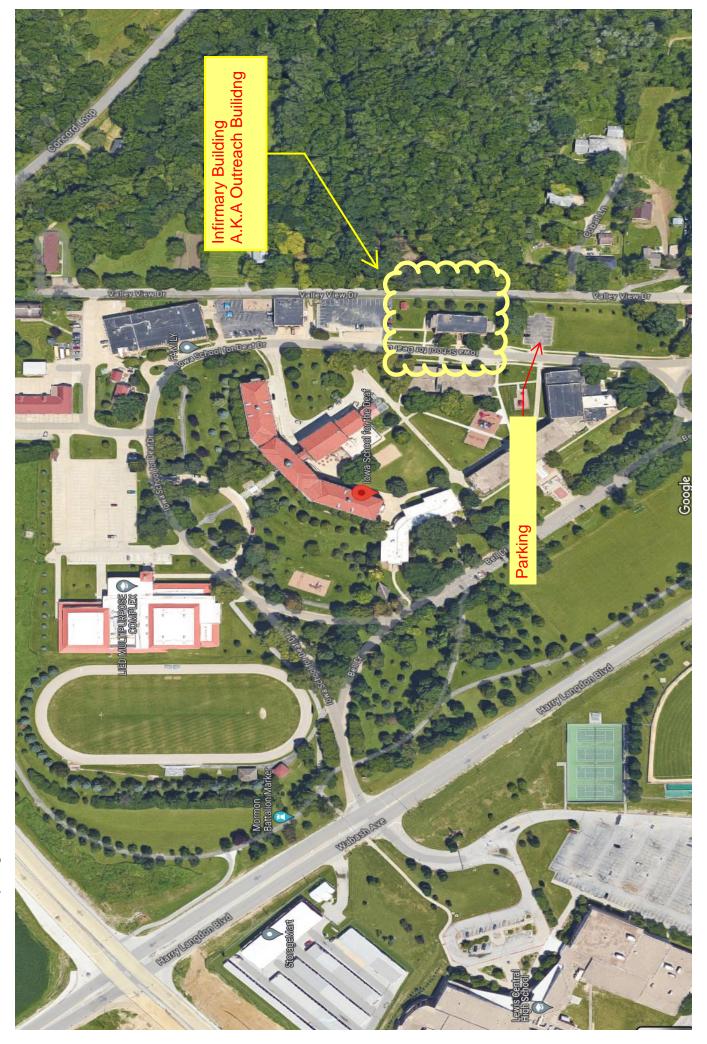
A. Siemens Desigo - Approved

5) ATTACHMENTS

- A. Pre-bid Meeting Location and Parking (1 page)
- B. Subst. Request Siemens Desigo System (2 pages)

END OF ADDENDUM

Iowa School for the Deaf 3501 Harry Langdon Blvd, Council Bluffs, IA 51503



SUBSTITUTION REQUEST FORM

| Project: | IA School for the Deaf Fire Panel Replaceme | Substitution Request Number: |
|---|--|--|
| | | From: Siemens |
| To: | Michael Bradbury – Issuing Officer | Date: 2/13/2024 |
| | | A/E Project Number: |
| Re: | Fire Panel Subsitution | |
| | 268100 | Manufacturers |
| Specific | ation Title: 268100 152 | Description: |
| | Section: 2.1 Page: | Article/Paragraph: |
| Droposs | Add Siemens to fire alarm spec | c'd manufacturer |
| - | | rchwood Ct Johnston, IA Phone: 1800-832-6569 |
| | Desigo ame: | EC/EV 2025 |
| | | |
| History: ☐ New product ☐ 2-5 years old ☐ X5-10 yrs old ☐ More than 10 years old | | |
| Differences between proposed substitution and specified product: | | |
| See attached flyers of products | | |
| | | |
| Point-by-point comparative data prepared by contractor and attached - REQUIRED BY A/E | | |
| December and providing an aritical items | | |
| Reason for not providing specified item: | | |
| Similar I | nstallation: | |
| | Project: Woodward Resource Center | Architect: Shive-Hattery Inc. |
| | Address: 34 Cedar St | Owner: State of IA |
| | | Date Installed: Multiple panels being installed phase1 and 2 |
| Propose | ed substitution affects other parts of Work: | XXNo ☐ Yes; explain |
| | | |
| | | |
| Supporting Data Attached: ☐ Drawings | | |
| Capporting Data / Maderica. Diamings Maj i reduct Data Camples Tests Treports | | |

SUBSTITUTION REQUEST FORM

(Continued)

The Undersigned certifies:

- Proposed substitution has been fully investigated and determined to be equal or superior in all respects to specified product.
- Same warranty will be furnished for proposed substitution as for specified product.
- Same maintenance service and source of replacement parts, as applicable, is available.
- Proposed substitution will have no adverse effect on other trades and will not affect or delay progress schedule.
- Cost data as stated above is complete. Claims for additional costs related to accepted substitution which may subsequently become apparent are to be waived.
- Proposed substitution does not affect dimensions and functional clearances.
- Payment will be made for changes to building design, including A/E design, detailing, and construction costs caused by the substitution.
- Coordination, installation, and changes in the Work as necessary for accepted substitution will be complete in all respects. Submitted by Keith Martin Signed by: Firm: 7901 Birchwood Ct Johnston, IA 50131 Address: 515-314-9998 Direct cell Telephone: Attachments: A/E's REVIEW AND ACTION X Substitution approved - Make submittals in accordance with Specification Section 01 3300. ☐ Substitution approved as noted - Make submittals in accordance with Specification Section 01 3300. ☐ Substitution rejected - Use specified materials. ☐ Substitution Request received too late - Use specified materials. Signed by: Date: 2/13/24 Additional Comments: ☐ Contractor ☐ Subcontractor ☐ Supplier ☐ Manufacturer ☐ A/E ☐ _____