

BID FORM

To: State of Delaware
Office of Management and Budget
Division of Facilities Management
122 Martin Luther King, Jr. Blvd. South
Dover, DE 19901

Phone No.: () - **Fax No.:** () -

\$ _____
(\$ _____)

ALLOWANCES

Contingency Allowance No. 1: One Hundred Thousand Dollars

(\$ 100,000.00)

Allowance Inclusion Acknowledged by: _____ (Bidder to Initial)

JTVCC New K-9 Facility
Smyrna, Delaware
MC3804000169

BID FORM

I/We acknowledge Addendums numbered _____ and the price(s) submitted include any cost/schedule impact they may have.

This bid shall remain valid and cannot be withdrawn for thirty (30) days from the date of opening of bids (60 days for School Districts and Department of Education), and the undersigned shall abide by the Bid Security forfeiture provisions. Bid Security is attached to this Bid.

The Owner shall have the right to reject any or all bids, and to waive any informality or irregularity in any bid received.

This bid is based upon work being accomplished by the Sub-Contractors named on the list attached to this bid.

Should I/We be awarded this contract, I/We pledge to achieve substantial completion of all the work within __ calendar days of the Notice to Proceed.

The undersigned represents and warrants that he has complied and shall comply with all requirements of local, state, and national laws; that no legal requirement has been or shall be violated in making or accepting this bid, in awarding the contract to him or in the prosecution of the work required; that the bid is legal and firm; that he has not, directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken action in restraint of free competitive bidding.

Upon receipt of written notice of the acceptance of this Bid, the Bidder shall, within twenty (20) calendar days, execute the agreement in the required form and deliver the Contract Bonds, and Insurance Certificates, required by the Contract Documents.

I am / We are an Individual / a Partnership / a Corporation

By _____ Trading as _____
(Individual's / General Partner's / Corporate Name)

(State of Corporation)

Business Address: _____

Witness: _____
(SEAL)

By: _____
(Authorized Signature)

(Title)

Date: _____

JAMES T. VAUGHN CORRECTIONAL CENTER
May, 2026

JTVCC NEW K-9 FACILITY
MC3804000169

ATTACHMENTS

Sub-Contractor List
Non-Collusion Statement
Affidavit of Employee Drug Testing Program
Affidavit of Contractor Qualifications
Bid Security
(Others as Required by Project Manuals)