

# Public Bid Advertisement (Electronic Bidding)

## State of Ohio Standard Forms and Documents

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**DRC-23F016.01 // DRC-23F016.02**  
**Ohio Department of Rehabilitation and Correction**  
**AOCI Shower & General Renovations // AOCI Chiller Replacement**  
Lima, Allen County

**Bids Due:** 11:00 a.m. local time, April 9, 2023; through the State's electronic bidding system at <https://bidexpress.com>

**EDGE Participation Goal:** 5.0% of contract

**Domestic steel use is required per ORC 153.011.**

DRC-23F016.01 AOCI Shower & General Renovations

<u>Bid Package 101</u>	<u>Estimated Cost</u>
General Trades Contract	\$3,492,000.00
Allowance 01	\$20,000.00
Base Bid (General Contract + Allowances)	\$3,512,000.00

Alternates:

Alternate 01	\$163,375.00
Alternate 02	\$49,295.00
Alternate 03A	\$72,500.00
Alternate 03B	\$69,575.00
Alternate 03C	\$69,575.00
Alternate 03D	\$69,575.00
Alternate 03E	\$92,250.00
Alternate 03F	\$110,450.00

DRC-23F016.02 AOCI Chiller Replacement

<u>Bid Package 102</u>	<u>Estimated Cost</u>
General Trades Contract	\$693,000.00

DRC-23F016.01 AOCI Shower & General Renovations // DRC-23F016.02 AOCI Chiller Replacement

Bid Package 101 & Bid Package 102

Combination Bid – Refer to Bid Form for details.

And any proper combination submitted on electronic Bid Form

**Pre-bid Meeting:** March 25, 2024, 10:00 am-12:00 pm, at project site. Gate passes are required, maximum of two (2) people per organization. Submit list of names to Chip Stanish ([cstanish@spgbarch.com](mailto:cstanish@spgbarch.com)) prior to meeting by 12:00 p.m. on March 22<sup>nd</sup>.

**Bid Documents:** Electronically at <https://bidexpress.com>.

**More Info:** A/E contact: Tom Gates, SPGB Architects, Phone: (614) 771-8963 x 403, Fax: (614) 522-6763 E-mail: [tgates@spgbarch.com](mailto:tgates@spgbarch.com)

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**APPROVED FOR PUBLICATION**

**In:** The Lima News  
**On:** 3/16/24, 3/23/24 and 3/30/2024

Ohio Department of Rehabilitation and Correction

Sylvia Slivo 3.12.24  
Sylvia Slivo Date  
Project Coordinator

**RECEIVED BY:**

\_\_\_\_\_  
Type or print name of authorized representative

\_\_\_\_\_  
Signature Date