February 5, 2026

IFB SI 021826 - 2026-2031 Specialized Water Treatment Services with Maintenance and Inspections in Richmond County

A signed addendum must be received with your proposal or within three (3) days of OPWDD request. Failure to submit the signed addendum including the completed, signed Revised Cost Proposal may result in the bid being disqualified.

Addendum 1

1. Within the Invitation for Bid on page 20, under Qualifications & Scope of Work, Section II. B. 1. will be updated to read, "Legionella testing once per month and no less than every 30 days to comply with New York City regulation. One test is to be completed between 3 and 45 days following the summertime hyperhalogenation."

2. The Cost Proposal Form has been updated to change the Annual Frequency of Legionella Testing to 12. **Bidders must submit their bids on the Revised Cost Proposal form appearing below along with a signed, completed Cost Proposal Signature Page.**

Please sign below in acknowledgement that you have read and understand this Addendum 1 to IFB SI 021826.

_____
(Firm Name)

_____ _____
(Signature) (Date)

_____ _____
(Print Name) (Title)

Respectfully,

Keith Ryer, CMS 1
Contract Management Unit
(845) 877-6821 x 3321
(845) 877-3044 (fax)
Keith.x.ryer@opwdd.ny.gov

Revised Cost Proposal

Instructions: In the space below, please provide a price for each indicated service as outlined above in the Qualifications and Scope of Work. All services must have a price provided in order for a bid to be considered. All equipment must be serviced at the frequencies indicated above in the Qualifications and Scope of Work.

Enter your cost for each service in the column labeled Cost per Service for All Applicable Equipment. Multiply this amount by the corresponding Annual Frequency to determine the Annual Total for each service. Add the Annual Total for each service and place that sum in the space for Total Annual Service Cost.

Service costs are to include the cost of furnishing all said services, travel time, mileage, materials, equipment, supplies, labor, fees, and all other ancillary costs to the satisfaction of the agency and the performance of all work.

Any alterations to the cost proposal form could result in your bid being disqualified. A completed and signed Signature Page must be included with your bid.

Specialized Water Treatment Services with Maintenance and Inspections			
Service	**Cost per Service for All Applicable Equipment**	**Annual Frequency**	**Annual Total**
Routine Inspection, Maintenance, and Treatment	$	**12**	$
Cooling Tower Cleaning and Disinfection	$	**2**	$
Summertime Hyperhalogenation	$	**1**	$
Legionella Testing	$	**12**	$
Monthly Bacteriological Testing	$	**12**	$
Total Annual Service Cost			**$**

VENDOR NAME: _____

Cost Proposal Signature Page

Effective December 30, 2024, in order to be qualified to work on public works projects covered by Article 8 of the Labor Law, all Contractors (including Subcontractors) must be registered with the New York State Department of Labor (NYSDOL) in accordance with Labor Law § 220-i. Contractors must be registered before submitting a bid. In addition, Contractors must be registered prior to commencing any new work. Contractors must submit their Certificate of Registration at the time the bid is made.

Please check the box below and place your initials confirming that you have included the NYSDOL Certificate of Registration.

☐ **_____ I certify that I have included a copy of my company's Certificate of Registration.**

Bidder Signature	Print Name & Title

This bid is valid for _____ days (Bids shall be valid for not less than 180 days)

Name of Company:			
Address:			
Federal ID Number:		Telephone:	
Date:		Email:	