

BID FORM

FOR: SOM ED1 DATA CENTER RENOVATION

PROJECT NUMBER: 950590

CONTRACT NUMBER: 950590-LF-2021-94 UNIVERSITY OF CALIFORNIA, RIVERSIDE

RIVERSIDE, CALIFORNIA

December 21, 2021

BID TO:

Planning, Design & Construction UNIVERSITY OF CALIFORNIA, RIVERSIDE 1223 University Avenue, Suite 240 Riverside, CA 92521

(951) 827-2610

BID FROM:	Cornerstone Renovation, INC.				
	(Name o	of Bidder)			
	Sam William President				
	(Contac	ct Name)			
	12754 Jessie Ct				
	(Address)				
	Rancho Cucamonga CA 91739				
	(City, State, Zip Code)				
	(909) 480 - 3240	(866) 866 - 6303			
	(Telephone Number)	(Facsimile Number)			
	sam@csrinc1.com				
	(E-r	mail)			
	02/10/2022				
	(Date Bid S	Submitted)			

Note: All portions of this Bid Form must be completed, and the Bid Form must be signed before the Bid is submitted. Failure to do so will result in the Bid being rejected as non-responsive.



1. 0 BIDDER'S REPRESENTATIONS

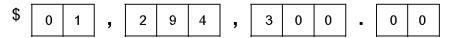
Bidder, represents that a) Bidder and all Subcontractors, regardless of tier, has the appropriate current and active Contractor's licenses required by the State of California and the Bidding Documents; b) it has carefully read and examined the Bidding Documents for the proposed Work on this Project; c) it has examined the site of the proposed Work and all Information Available to Bidders; d) it has become familiar with all the conditions related to the proposed Work, including the availability of labor, materials, and equipment; e) Bidder and all Subcontractors, regardless of tier, are currently registered with the California Department of Industrial Relations pursuant to California Labor Code Section 1725.5 and 1771.1. Bidder hereby offers to furnish all labor, materials, equipment, tools, transportation, and services necessary to complete the proposed Work on this Project in accordance with the Contract Documents for the sums quoted. Bidder further agrees that it will not withdraw its Bid within 60 days after the Bid Deadline, and that, if it is selected as the apparent lowest responsive and responsible Bidder, that it will, within 10 days after receipt of notice of selection, sign and deliver to University the Agreement in triplicate and furnish to University all items required by the Bidding Documents. If awarded the Contract, Bidder agrees to complete the proposed Work within 330 days after the date of commencement specified in the Notice to Proceed.

2.0 ADDENDA

Bidder acknowledges that it is Bidder's responsibility to ascertain whether any Addenda have been issued and if so, to obtain copies of such Addenda from University's Facility at the appropriate address stated on Page 1 of this Bid Form. Bidder therefore agrees to be bound by all Addenda that have been issued for this Bid.

3.0 NOT USED

4.0 <u>LUMP SUM BASE BID</u>



(Place figures in appropriate boxes.)

Bidder includes in the Lump Sum Base Bid the following allowances:

Allowance No. 1: Include an allowance of \$105,600.00 for 3 CRAC Units (1) AC-3/C-3, (1) FCU-1, (1) FCU-2, as specified in Specification Section 01 2100.

5.0 SELECTION OF APPARENT LOW BIDDER

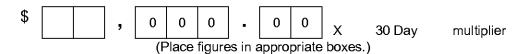
Refer to the Instructions to Bidders for selection of apparent low bidder.



6.0 <u>UNIT PRICES- NOT USED</u>

7.0 DAILY RATE OF COMPENSATION FOR COMPENSABLE DELAYS WITH TWO OPTIONS

Bidder shall determine and provide below the daily rate of compensation for any Compensable Delay caused by University at any time during the performance of the Work. A Facility may choose a minimum compensable delay in the best interests of the Project. If so, use the language in parentheticals { } and in grey highlight:



Failure to fill in a dollar figure for the daily rate for Compensable Delay shall render the bid non-responsive. University will perform the extension of the daily rate times the multiplier.

The daily rate shown above will be the total amount of Contractor entitlement for each day of Compensable Delay caused by University at any time during the performance of the Work and shall constitute payment in full for all delay costs, direct or indirect (including, without limitation, compensation for all extended home office overhead and extended general conditions), of the Contractor and all subcontractors, suppliers, persons, and entities under or claiming through Contractor on the Project. The number of days of Compensable Delay shown as a "multiplier" above is not intended as an estimate of the number of days of Compensable Delay anticipated by the University. The University will pay the daily rate of compensation only for the actual number of days of Compensable Delay, as defined in the General Conditions; the actual number of days of Compensable Delay may be greater or lesser than the "multiplier" shown above.

8.0 <u>ALTERNATES</u>

In order for a Bid to be responsive, Bidder must submit an additive bid, a deductive bid, or a "no change" bid, for each Alternate listed below. The failure to do so shall result in the Bid being rejected as non-responsive. The failure to quote an amount, unless the bidder marks the "no change" box, will result in the bid being rejected as non-responsive.

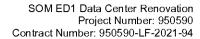
The Contract Time will change by the number of days, if any, specified for each accepted Alternate.

Alternate No. 1

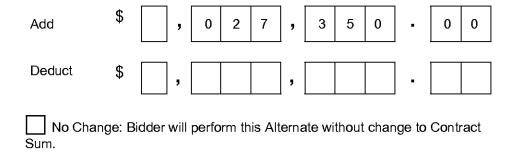
Wire mesh partitions; welded wire fence to ceiling, as specified in section 01 2300 and pages G0.01 and A2.03 of drawings.

Bid for Alternate No. 1

If "Add" or "Deduct" is intended, indicate by placing figures in the corresponding boxes. If "No Change" is intended, indicate by marking the "No Change" box







No extension of time will be granted if this Alternate is accepted.

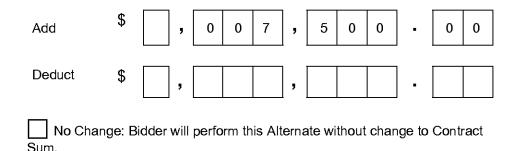
University reserves the right to accept this Alternate within 10 calendar days after the date University signs the Agreement:

Alternate No. 2

Paint walls to match existing, as specified in section 01 2300 and pages G0.01 and A2.03 of drawings.

Bid for Alternate No. 2

If "Add" or "Deduct" is intended, indicate by placing figures in the corresponding boxes. If "No Change" is intended, indicate by marking the "No Change" box



No extension of time will be granted if this Alternate is accepted.

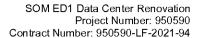
University reserves the right to accept this Alternate within 10 calendar days after the date University signs the Agreement:

Alternate No. 3

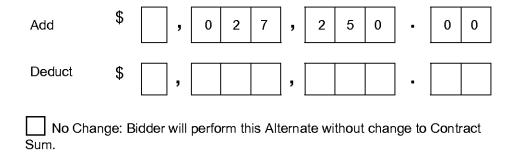
Replace acoustical ceiling tile to match existing, as specified in section 01 2300 and pages G0.01 and A2.04 of drawings.

Bid for Alternate No. 3

If "Add" or "Deduct" is intended, indicate by placing figures in the corresponding boxes. If "No Change" is intended, indicate by marking the "No Change" box







No extension of time will be granted if this Alternate is accepted.

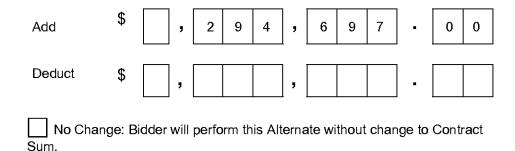
University reserves the right to accept this Alternate within 10 calendar days after the date University signs the Agreement:

Alternate No. 4

CHW in-row cooling unit. Set airflow to direct inward towards racks. Extend CHW piping from the taps in underfloor plenum and connect to units., as specified in section 01 2300 and pages M2.12, P2.11 and E2.11 of drawings.

Bid for Alternate No. 4

If "Add" or "Deduct" is intended, indicate by placing figures in the corresponding boxes. If "No Change" is intended, indicate by marking the "No Change" box



No extension of time will be granted if this Alternate is accepted.

University reserves the right to accept this Alternate within 10 calendar days after the date University signs the Agreement:



9.0 LIST OF SUBCONTRACTORS

Bidder will use Subcontractors for the Work:

☐ No 🗹 Yes

If "yes", provide in the spaces below (a) the name, the location of the place of business, and the California contractor license number of each subcontractor who will perform work or labor or render service to the prime contractor in or about the construction of the work or improvement, or a subcontractor licensed by the state of California who, under subcontract to the prime contractor, specially fabricates and installs a portion of the work or improvement according to detailed drawings contained in the plans and specifications, in an amount in excess of one-half of 1 percent of the prime contractor's total bid, (b) the portion of the work which will be done by each subcontractor. The prime contractor shall list only one subcontractor for each such portion as is defined by the prime contractor in its bid.

	Subcontractor			
Portion of the Work Activity (e.g. electrical, mechanical, concrete)	Name of Business	Location of Business (City)	License No.	DIR Registration No.
Electric and low voltage	Joseph electric	Pomona	1014699	10000421011
HVAC	Los Angeles air conduc	la verne	208872	1000000594
plumbing	ABQ Plumbing	woodland hills	1081727	1000833272
fire alarm	Johnson control	Rancho Cucamonga	986047	1000000576

(Note: Add additional pages if required.)

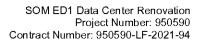


10.0 <u>LIST OF CHANGES IN SUBCONTRACTORS DUE TO ALTERNATES</u>

The information below must be provided for all changes in first-tier Subcontractors if University selects Alternates. List changes in Subcontractors only for those portions of the Work valued in excess of one-half of 1 percent of prime contractor's total bid.

	Subcontractor			
Portion of the Work Activity (e.g. electrical, mechanical, concrete)	Name of Business	Location of Business (City)	License No.	DIR Registration No.
N/A				

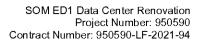
(Note: Add additional pages if required.)





BIDDER'S NAME: Cornerstone Renovation, INC.				
11.0 BIDDER INFORMATION				
TYPE OF ORGANIZATION				
Corporation				
(Corporation, Partnership, Individual, Joint Ve	nture, etc.)			
IF A CORPORATION, THE CORPORATION IS ORGANIZE	ED UNDER THE LAWS C	F:		
THE STATE OF California (State)	·			
NAME OF PRESIDENT OF THE CORPORATION	N:			
Samih Barsoum				
(Insert Name) NAME OF SECRETARY OF THE CORPORATION:				
Mariam Barsoum .				
(Insert Name)				
IF A PARTNERSHIP, NAMES OF ALL GENERAL PARTNERS:				
(Insert Name(s))				
CALIFORNIA CONTRACTORS LICENSE(S):				
A&B	1009891	12/31/2023		
(Classification(s))	(License Number)	(Expiration Date)		

(For Joint Venture, list Joint Venture's license and licenses for all Joint Venture partners.)





12.0 <u>REQUIRED COMPLETED ATTACHMENTS</u>	
The following documents are submitted with and made a condition of thi	s Bid:
Bid Security in the form of Bid Bond Certificate	
(Bid Bond or	Certified Check)
13.0 <u>DECLARATION</u>	
ı, Samih Barsoum	, hereby declare that I am the
(Printed Name)	
President of Cornerstone Renovation, INC. (Nar	ne of Bidder)
submitting this Bid Form; that I am duly authorized to execute this Bid	
information set forth in this Bid Form and all attachments hereto are, to the	
and complete as of its submission date.	e best of my knowledge, tide, accurate
·	on bohalf of any undisclosed parson
I further declare that this bid is not made in the interest of, or	•
partnership, company, association, organization, or corporation; that the	· ·
sham; that the bidder has not directly or indirectly induced or solicited an	•
bid, and has not directly or indirectly colluded, conspired, connived, or a	
to put in a sham bid, or that anyone shall refrain from bidding; that the bi	•
indirectly, sought by agreement, communication, or conference with any	•
any other bidder, or to fix any overhead, profit, or cost element of the bid	
to secure any advantage against the public body awarding the contract	
contract; that all statements contained in the bid are true; and, further	•
indirectly, submitted his or her bid price or any breakdown thereof,	
information or data relative thereto, or paid, and will not pay, any fee to	
association, organization, bid depository, or to any member or agent the	ereof to effectuate a collusive or sham
bid.	
I declare, under penalty of perjury, that the foregoing is true and o	correct and that this Declaration was
executed at:	
Rancho Cucamonga CA 91739 , in the Sta	
(Name of City if within a City, otherwise Name of County) on 01/21/2022	(State)
on 01/21/2022	

Bid Form - 9

(Signature)

UC LF/BF/MP-BF, April 29, 2015 UCR Rev. 2015-10-02 LF

(Date)

Bond No.: CMGB00012701



SOM ED1 Data Center Renovation Project Number: 950590 Contract Number: 950590-LF-2021-94

BID BOND

KNOW ALL	PERSONS	BY THESE	PRESENTS
NIVE JVV ALL	L L L'OL MAG	DI INCOL	LIZEDEIN 13

KNOW ALL PERSONS BY TH	ESE PRESENTS:			
That we,as Principal, andArgo REGENTS OF THE UNIVERS Sum Base Bid amount for pay ourselves, our heirs, executors,	naut Insurance Company ITY OF CALIFORNIA, here ment of which in lawful mo	einafter called THE RE oney of the United Sta	GENTS, in the sum ates, well and truly to	of 10% of the Lump be made, we bind
THE CONDITION OF THE work described as follows:	ABOVE OBLIGATION IS	SUCH THAT, WHERE	AS, Principal has sul	bmitted a Bid for the
Project Num	e: SOM ED1 Data Center R ber: 950590, Contract Num 0 University Ave, Riverside,	ber: 950590-LF-2021-9	94	
NOW, THEREFORE, if Pri defined in the Bidding Documer the apparent lowest responsible following:		ne Bid Deadline if no tin	ne period be specified	d, and, if selected as
(2) File two bonds w payment for labor	written agreement, in the provith THE REGENTS, one of and materials, as required ficates of insurance and all	to guarantee faithful p by the Bidding Docum	performance and the ents.	
In the event of the withdraw or the disqualification of said Bio of insurance, and all other items equal to the difference, not to ex for which THE REGENTS prod obligation shall be null and void	s as required by the Bidding cceed the amount hereof, be ure the required work cover	o enter into such agree Documents, if Principa etween the amount spe red by said Bid, if the la	ment and furnish suc al shall pay to THE RE ecified in said Bid and	ch bonds, certificates EGENTS an amount I such larger amount
In the event suit is brought incurred by THE REGENTS in s	upon this bond by THE RE such suit.	EGENTS, Surety shall p	oay reasonable attorr	neys' fees and costs
IN WITNESS WHEREOF,	we have hereunto set our h	nands this <u>7th</u> day o	f <u>January</u> , 20	0 <u>22</u> .
PRINCIPAL:		SURETY:		
Cornerstone Renovation, Inc.	ð.	Argonaut Insurance	e Company	
(Name of Com			(Name of Company)	: 12
Du Comult		Bv:		一. 当. 5
(Sign	ature)	Бу.	(Signature)	
	ala	√ <mark>.</mark>	9 5 1 2	The same of the sa
- SAMIH BAR	Soum	Stephanie Ho	ppe Shear (Printed Name)	
(Printed	rwame)		(riinted ivame)	
preside	-217	Attorney-in-F		-14.007.38
(Ti	tle)	No. of the second secon	(Title)	** * - * * * *

Address for Notices:

c/o CMGIA, 20335 Ventura Blvd., Ste. 426

Woodland Hills, CA 91364 (City, State & Zip Code)

NOTE: Notary acknowledgement for Surety and Surety's Power of Attorney must be attached.

Bond No.: CMGB00012701

Argonaut Insurance Company

Deliveries Only: 225 W. Washington, 24th Floor

Chicago, IL 60606

United States Postal Service: P.O. Box 469011, San Antonio, TX 78246
POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the Argonaut Insurance Company, a Corporation duly organized and existing under the laws of the State of Illinois and having its principal office in the County of Cook, Illinois does hereby nominate, constitute and appoint:

Gabriella Grady, Shilo Lee Losino, Stephanie Hope Shear, Elizabeth Santos, Stacey Garcia, Matthew Dionisio

Their true and lawful agent(s) and attorney(s)-in-fact, each in their separate capacity if more than one is named above, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all bonds, contracts, agreements of indemnity and other undertakings in suretyship provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed the sum of:

\$15,000,000.00

This Power of Attorney is granted and is signed and sealed under and by the authority of the following Resolution adopted by the Board of Directors of Argonaut Insurance Company:

"RESOLVED, That the President, Senior Vice President, Vice President, Assistant Vice President, Secretary, Treasurer and each of them hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer or attorney, of the Company, qualifying the attorney or attorneys named in the given power of attorney, to execute in behalf of, and acknowledge as the act and deed of the Argonaut Insurance Company, all bond undertakings and contracts of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, Argonaut Insurance Company has caused its official seal to be hereunto affixed and these presents to be signed by its duly authorized officer on the 1st day of June, 2021.

Argonaut Insurance Company

STATE OF TEXAS COUNTY OF HARRIS SS: ру: _____

Joshua C. Betz , Senior Vice President

On this 1st day of June, 2021 A.D., before me, a Notary Public of the State of Texas, in and for the County of Harris, duly commissioned and qualified, came THE ABOVE OFFICER OF THE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of same, and being by me duly sworn, deposed and said that he is the officer of the said Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate Seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said corporation, and that Resolution adopted by the Board of Directors of said Company, referred to in the preceding instrument is now in force.

IN TESTIMONY WHEREOF, I have hereunto set my hand, and affixed my Official Seal at the County of Harris, the day and year first above written.

KATHLEEN M MEEKS
NOTARY PUBLIC
STATE OF TEXAS
MY COMM. EXP. 07/15/25
NOTARY ID 55/902-8

Kathun M. Mulo

(Notary Public)

I, the undersigned Officer of the Argonaut Insurance Company, Illinois Corporation, do hereby certify that the original POWER OF ATTORNEY of which the foregoing is a full, true and correct copy is still in full force and effect and has not been revoked.

IN WITNESS WHEREOF, I have hereunto set my hand, and affixed the Seal of said Company, on the 7th day of January , 2022.



James Bluzard , Vice President-Surety

A notary public or other officer completing this certifi	cate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document.
State of California County of Los Angeles On JAN 0 7 2022 before me, Date personally appeared) Lucas Patterson, Notary Public Here Insert Name and Title of the Officer Stephanie Hope Shear
	Name(s) of Signer(s)
subscribed to the within instrument and acknow	y evidence to be the person(s) whose name(s) is/are wledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s), acted, executed the instrument.
LUCAS PATTERSON Notary Public - California Los Angeles Councy Commission = 1352264 My Comm. Extires Mar 19, 2025	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature Signature of Notary Public
Place Notary Seal Above	
Though this section is optional, completing thi	PTIONAL is information can deter alteration of the document or is form to an unintended document.
Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Th	Document Date:
Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:	Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:

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