



2640 Fountain View Drive, Houston, Texas 77057 | 713.260.0600 | David A. Northern, Sr., **President & CEO**
Houston Housing Authority Board of Commissioners: LaRence Snowden, *Chair* | Kristy M. Kirkendoll, *Vice Chair*
Dr. Max Miller, Jr. | Stephanie Ballard | Andrea Hillard Cooksey | Kris Thomas | Guillermo "Will" Hernandez

The Houston Housing Authority (HHA), has issued this Amendment No. 2 to IFB 23-30 Replacement of Heaters at Cuney Homes for the purposes of:

1. Revising:
 - 1.1 Exhibit E Price Sheet to change the order of the items to be quoted.
 - 1.2 Exhibit F Supplemental Price Sheet to add the price for one (1) blower accessory unit.
2. Answering the following Round 1 Questions submitted to HHA in writing by the specified due date:

Question 1: IFB 23-30 has lines to quote a Top Vent Natural Gas Furnace, 35,000 BTU, Williams Model No. 3509622A – and - Top Vent Natural Gas Thermostat, Williams Part No. P322016, would you also like to quote the blower from the previous IFB earlier in the year?

Answer 1: Yes, please add the price for one (1) blower accessory unit on Exhibit F Supplemental Sheet. The Supplemental Price Sheet has been revised to include one (1) unit price for the blower accessory. It should be understood that the blower installation would be ‘as need’ and will be treated as ‘case by case’ as a Change Order.

Question 2: Can you confirm that this scope of work will be a like for like Wall Heater Replacement – and if no blower is currently present – then no blower accessory will be installed?

Answer 2: This project is to be quoted w/o the blower accessory. If a blower accessory is needed, that installation will be issued as a Change Order (using the price provided on Supplemental Price Sheet). See Answer 1.

Question 3: IFB 23-30 p. 276 – photo 01 shows an existing wall heater. The wall heater fan is shown in the photo. In this situation – no blower would be installed – since no blower is existing. Is that correct?

Answer 3: See Answer # 1 and Answer #2.

Question 4: Project schedule may last 90 days – with an estimated start date of November 2023. Assuming this timeline works, is it ok to NOT work the week of Thanksgiving and the week of Christmas?

Answer 4: HHA honors all federal and state holidays. The specific schedule for this project will be discussed with the winning contractor at a scheduled post-conference meeting.

Question 5: Is HHA accepting any alternates for the scope equipment? If so can those alternates be a heat pump or electric resistance heating source?

Answer 5: HHA is not accepting any alternates for the material/supplies and/or equipment listed within Exhibit B Scope of Work. Please quote the items as specified.

Question 6: Will we be notified of any amendments to the solicitation?

Answer 6: HHA will post all amendments on HHA's website in the applicable solicitation. HHA will send out Notice of Amendment to potential bidders from the bidder's list for this project, and those who acknowledge receipt of the Notice of Solicitation. We recommend monitoring current solicitations for any amendments that may affect any solicitation(s).

All other terms and conditions shall remain the same.

Date

Julinda Turner, J.D.
Contracts Administrator
Houston Housing Authority (HHA)



A Fair Housing and Equal Employment Opportunity Agency. For assistance: Individuals with disabilities may contact the 504/ADA Administrator at 713-260-0353, TTY 713-260-0547 or 504ADA@housingforhouston.com

Exhibit E IFB 23-30

Price Sheet Revised

The undersigned agrees to provide all the necessary labor, personnel, supervision, equipment, signage, warning tape, insurance, transportation, licenses, permits, materials, tools, supplies, barricades, and any other ancillary item(s), or resource(s) needed to perform all the work specified in **Exhibit B Scope of Work (SOW)** at the following fixed price:

This form is fillable

Item	Description	Total
1	Material	\$ _____
2	Labor Includes Davis Bacon Wages (See Attachment J)	\$ _____
3	Overhead	\$ _____
4	Profit	\$ _____
5	<u>Total</u>	\$ _____

NAME OF CONTRACTOR / OFFEROR / FIRM / INDIVIDUAL / CORPORATION

COMPLETE ADDRESS

CITY, STATE, ZIP CODE

E-MAIL ADDRESS

PHONE NUMBER / FAX NUMBER

MANUAL OR E-SIGNATURE

TITLE

Exhibit F IFB 23-30

Supplemental Price Sheet Revised (Fillable)

The undersigned on page 2 of this Exhibit agrees to deliver (F.O.B Destination), and install the following **new** (i.e., previously unused) items, in accordance with the requirements specified in Exhibit B Scope of (SOW) at the following price, which is used as the baseline in the event of escalation:

<u>Item</u>	<u>Description</u>	<u>Quantity</u>	<u>Unit Price</u>	<u>Extension Price</u>
1	Top Vent Natural Gas Furnace, 35,000 BTU, Williams Model No. 3509622A or HHA Approved Equivalent (Note: Must Meet HUD Energy requirements per Exhibit D)	651	\$ _____	\$ _____

Insert Full Description Below:

Manufacturer: _____ **Model / Part No.:** _____

<u>Item</u>	<u>Description</u>	<u>Quantity</u>	<u>Unit Price</u>	<u>Extension Price</u>
2	Top Vent Natural Gas Thermostat, Williams Part No. P322016 or HHA Approved Equivalent (Note: Must Meet HUD Energy requirements per Exhibit D)	651	\$ _____	\$ _____

Insert Full Description Below:

Manufacturer: _____ **Model / Part No.:** _____

<u>Item</u>	<u>Description</u>	<u>Quantity</u>	<u>Unit Price</u>	<u>Extension Price</u>
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3	Blower Accessory, Williams Part No. 2901/2907 or HHA Approved Equivalent	1	\$ _____	\$ _____
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(Note: Must Meet HUD Energy requirements per Exhibit D)

Insert Full Description Below:

Manufacturer: _____ **Model / Part No.:** _____

NAME OF CONTRACTOR / OFFEROR / FIRM / INDIVIDUAL / CORPORATION

ADDRESS, CITY, STATE, ZIP **TITLE**

E-MAIL ADDRESS **PHONE NUMBER / FAX NUMBER**

MANUAL SIGNATURE **DATE**

Note: This Form must have a manual signature.