

WAKE COUNTY EMS STATION RENOVATIONS

EAST RALEIGH STATION 7 | NCSU STATION 8 | WAKE FOREST STATION 10

SUBCONTRACTOR LISTING

PLUMBING CONTRACTOR

Name: _____ License Number: _____

\$ _____

HVAC CONTRACTOR

Name: _____ License Number: _____

\$ _____

ELECTRICAL CONTRACTOR

Name: _____ License Number: _____

\$ _____

ALTERNATES

Should any of the alternates as described in the specifications be accepted, the amount written below shall be the amount to "add to" of "deduct from" the Base Bid. If to be "deducted from" Base Bid, put minus sign (-) in parentheses at head of alternate and plus sign (+) in parentheses if to be added. Refer to Section 012300 for description of alternates.

Alternate No. G-1: Provide Owner Preferred Alternate for Door Hardware as Scheduled.

_____ Dollars (\$ _____)

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ALLOWANCES

See Specification Section 012100-Allowances for Schedule of Allowances.

No.	Description
1	Include an Allowance of \$48,000.00 for Data/Voice
2	Include an Allowance of \$240,000.00 for Security
3	Include an Allowance of \$24,000.00 for Signage
4	Include an Allowance of \$50,000.00 for Owner Contingency
5	Include an Allowance of \$60,000.00 for Cellular Booster Design and Installation

UNIT PRICES

Unit prices are complete for labor, equipment, material, overhead and profit. Base bid includes the stipulated allowance quantity of each item. Unused amount will be credited to the Owner by change order at the end of the project.

Description	Unit Price	Unit Measure	Allowance Units
UP#1: Exit Light		Per Each	1
UP#2: Wall Mounted Communications Outlet with Receptacle		Per Each	2
UP#3: 20 Amp Electrical Duplex Receptacle and Circuit		Per Each	2
UP#4: 6-Port Station Data Outlet		Per Each	1
UP#5: Phone Data Drop		Per Each	1