



TOWN OF WESTON
DEPARTMENT OF
PUBLIC WORKS & FACILITIES

78 Old Hyde Road - Weston, CT 06883 - (203) 222-2662

JULY 31, 2024

ROOF REPLACEMENT AT DEPARTMENT OF PUBLIC WORKS

ADDENDUM #01

DESCRIPTION OF CHANGE(S)

- This Addendum includes the following:
 - a. In the TECHNICAL SPECIFICATIONS SECTION:
 - Change to Section 100.10 EXECUTION Paragraph D “Installation of Underlayments”
 - b. In the BID FORM Section:
 - Section added to account for replacement of wood trim with plastic simulated wood trim. Unit will be time and materials. Revised bid form attached.

Section 100.10 EXECUTION Paragraph D “Installation of Underlayments”

- Change Section D1 to read: General: Install using methods recommended by the manufacturer, in accordance with local building codes. When local codes and application instructions are in conflict, the more stringent requirements shall take precedence. Install two full courses (72”) coverage with an approved self-sealing leak barrier (ice and water) such as GAF WEATHERWATCH.
- Section D5 shall be referenced for the remainder of the roof deck protection.

BID FORM

Office of Town Clerk
 Weston Town Hall
 56 Norfield Road
 Weston, CT 06833

PROJECT: Roof Replacement at Weston Department of Public Works

The undersigned declares he/she has carefully examined all Contract Documents and sites of work for the referenced project and hereby proposes to furnish all labor, materials and equipment and perform all work necessary to complete the project in strict accordance with the requirements of the Contract Documents.

BASE BID

ITEM	QTY	UNIT	BID PRICE (written with words, not numbers)	COMPUTED TOTAL (written with words, not numbers)
Removal and disposal of existing asphalt shingles, installation of Lifetime asphalt shingles, weather watch the entire roof, drip edge and roof boot. (Lump Sum)	1	L.S.		
Installation of gutters. (Lump Sum)	1	L.S.		
Replacement of plywood (Per Sheet)	5	Sheet		
Removal, disposal and replacement of rotten wood trim with plastic wood (AZEK). Time and materials.	1	Hourly Rate		
BID TOTAL (written with words, not numbers)				

I attest that accompanying this bid is a certified check or cashier's check in the amount of 10% of the Total Price indicated above.

Bidder's legal business name: _____

Bidder's principal office address: _____

State in which bidder is incorporated / organized: _____

Date of incorporation / formation: _____

Address from which Bidder's forces will be mobilized: _____

The names and residence addresses and titles of bidder's principal officers, members, managers, or owners are as follows:

NAME	RESIDENCE	ADDRESS	TITLE

If additional pages are necessary, please write "see attached" above.

The undersigned is duly authorized to execute this bid on behalf of the Bidder and hereby designates the following individual as the Bidder's contact person for all purposes related to this bid.

NAME	TITLE	E-MAIL	MOBILE PHONE NUMBER

Signature of Authorized Representative

Name

Title

Date