

CERTIFIED BID TABULATION FORM

Project #: 427-015	Bid Date: 10/12/2023	Time: 2:00:00 p.m.
Project Title: ARPA Mitigation South Mississippi State Hospital *(EMSH)		
Institution/Agency: Mississippi Department of Health		
Professional: <u>Corbett Legge & Associates, PLLC</u>		(UA PM & clerical initials <u>HN/JO</u>)

Contractors

Terry Services, Inc.

Certificate of Responsibility # 08838-MC
 5% Bid Security: Travelers Casualty
 Addenda Received: (# 1) (# 2) (# 3) (#) (#)
 Days: 210 Electronic Bid: yes no

Powers of Mississippi, Inc.

Certificate of Responsibility # _____
 5% Bid Security: _____
 Addenda Received: (# 1) (# 2) (# 3) (#) (#)
 Days: 210 Electronic Bid: yes no

Certificate of Responsibility # _____
 5% Bid Security: _____
 Addenda Received: (#) (#) (#) (#) (#)
 Days: _____ Electronic Bid: yes no

Certificate of Responsibility # _____
 5% Bid Security: _____
 Addenda Received: (#) (#) (#) (#) (#)
 Days: _____ Electronic Bid: yes no

Certificate of Responsibility # _____
 5% Bid Security: _____
 Addenda Received: (#) (#) (#) (#) (#)
 Days: _____ Electronic Bid: yes no

Certificate of Responsibility # _____
 5% Bid Security: _____
 Addenda Received: (#) (#) (#) (#) (#)
 Days: _____ Electronic Bid: yes no

Base Bid

\$ 435,999
 CR Expires: _____
 Mechanical: McClain 03556-MC
 Plumbing: _____
 Electrical: Allied Industrial 21507-MS
 Modification on envelope: _____

\$ _____
 CR Expires: _____
 Mechanical: _____
 Plumbing: _____
 Electrical: _____
 Modification on envelope: _____

\$ _____
 CR Expires: _____
 Mechanical: _____
 Plumbing: _____
 Electrical: _____
 Modification on envelope: _____

\$ _____
 CR Expires: _____
 Mechanical: _____
 Plumbing: _____
 Electrical: _____
 Modification on envelope: _____

\$ _____
 CR Expires: _____
 Mechanical: _____
 Plumbing: _____
 Electrical: _____
 Modification on envelope: _____

\$ _____
 CR Expires: _____
 Mechanical: _____
 Plumbing: _____
 Electrical: _____
 Modification on envelope: _____

Alternates

±
 1. 222,600 (~~48~~)
 2. 33,475 (+)
 3. _____ ()
 4. _____ ()
 5. _____ ()

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 5. _____ ()

* see Proposal Form for any Unit Prices that do not affect base bid nor alternates, if applicable

I certify that this a correct tabulation of all bids received for this Project on the date stated above. (having checked the Contractor's name and certificate number with the Contractor's Board at www.msdoc.state.ms.us / MID at <https://www.mid.ms.gov/licensing-search/company-search.aspx>

 (Authorized Signature)

 (Date) last revision



BUREAU OF BUILDING, GROUNDS AND REAL PROPERTY MANAGEMENT

Date: 10-12-23 Project Number & Name: 427-015 ARPA Mitigation

Sign-in Sheet

	Date:	Name:	Company:	Phone:	Time:	Item Description:
1.	10-12-23	Heith Newman	BoB	601-622-2248	2:00pm	Bid Opening
2.	10-12-23	John Bowman	CUA	662 8719286	2:00pm	BID
3.	10.12.23	JESSE O'QUINN	TRoB	10013995760	1:51PM	BID OPENING
4.	10/12/23	FERRILL SPICER	TERRY SERVICE	601 955 3778	1:52 PM	BID
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

Agenda:

Terry Service, Inc.
PO Box 1557
Ridgeland, MS 39158
Certificate of Responsibility # 08838-MC

570 94212110924

HJD
KW

Bureau of Building, Grounds and Real Property Management
501 North West Street, Suite 1401B [Woolfolk Building]
Jackson, Mississippi 39201

Bid for Project # 427-015
Title: ARPA Mitigation
South Mississippi State Hospital
COR# 08838-MC

Document A310™ – 2010

Conforms with The American Institute of Architects AIA Document 310

Bid Bond

CONTRACTOR:

(Name, legal status and address)

Terry Service, Inc.
P.O. Box 1557
Ridgeland, MS 39158

SURETY:

(Name, legal status and principal place of business)

Travelers Casualty and Surety Company of
America
One Tower Square
Hartford, CT 06183

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

OWNER:

(Name, legal status and address)

Bureau of Building, Grounds and Real Property Management
501 North West Street, Suite 1401B
Jackson, MS 39201

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

BOND AMOUNT: \$ 5%

Five Percent of Amount Bid

PROJECT:

(Name, location or address, and Project number, if any)

GS# 427-015, ARPA Mitigation, South Mississippi State Hospital (EMSH), RFx #3160006132

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 12th day of October, 2023

Terry Service, Inc.

(Principal)

(Seal)

By:

(Title) L. FORD TERRY, PRESIDENT

Travelers Casualty and Surety Company of America

(Surety)

(Seal)

By:

(Title) Peggy L. Jackson Attorney-in-Fact

Resident MS Agent/Fisher Brown Bottrell Insurance, Inc.



(Witness)

(Witness) Braxton Brumfield



**Travelers Casualty and Surety Company of America
 Travelers Casualty and Surety Company
 St. Paul Fire and Marine Insurance Company
 Farmington Casualty Company**

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, St. Paul Fire and Marine Insurance Company, and Farmington Casualty Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Peggy L. Jackson of Jackson, MS, their true and lawful Attorney(s)-in-Fact to sign, execute, seal and acknowledge the following bond:

Surety Bond No.: Bid Bond
 OR

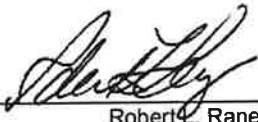
Principal: Terry Service, Inc.
Obligee: Bureau of Building, Grounds and Real Property Management

Project Description: GS# 427-015, ARPA Mitigation, South Mississippi State Hospital (EMSH), RFX #3160006132

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 21st day of April, 2021.



State of Connecticut

By: 
 Robert L. Raney, Senior Vice President

City of Hartford ss.

On this the 21st day of April, 2021, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2026




 Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

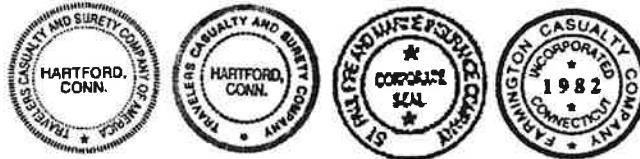
FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of each of the Companies, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 12th day of October, 2023.




 Kevin E. Hughes, Assistant Secretary

**To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.
 Please refer to the above-named Attorney(s)-in-Fact and the details of the bond to which this Power of Attorney is attached.**

PROPOSAL FORM
SECTION 00 4200

To: Bureau of Building, Grounds and Real Property Management
501 North West Street, Suite 1401B [Woolfolk Building]
Jackson, Mississippi 39201

Re: Project # 427-015
Project Title ARPA Mitigation - South Mississippi State Hospital
Location Purvis, MS

I propose to complete all work in accordance with the Project Manual and Drawings within 210 consecutive calendar days for the sum of: (Professional must specify number of days)

BASE BID: (Write in the amount of the base bid in words and numbers. In case of conflict, the written word governs.)

Words: Four Hundred Thirty Five Thousand Seven Hundred Ninety Nine Dollars (\$ 435,799.00)

UNIT COST: (Write in the amount of the base bid in words and numbers. In case of conflict, the written word governs.)

Words: Two Thousand Eight Hundred Twenty Dollars/Terminal Unit (\$ 2,820.00)

Provide a unit price per terminal unit for all labor and materials to remove and replace the existing terminal unit, reheat coil, piping specialties and associated ductwork modifications. The unit cost shall include all cost associated with overhead, taxes, bond, insurance and otherwise as required by the Project Manual. The Contractor is to assume the replacement of twenty (20) terminal units and associated reheat coil, piping specialties and ductwork modifications in the Base Bid. The cost associated with terminal unit controls are not to be included with the unit cost as they are include in the Base Bid.

ALTERNATES: (Write in the amount of all of the alternates in words and numbers. In case of conflict, the written word governs.)

Alternate #1 Adds Deducts

Words: Two Hundred Twenty Two Thousand Six Hundred Dollars
(\$ 222,600.00)

Description Alternate #1 shall include the replacement of the existing terminal units and associated piping.

Alternate #2 Adds Deducts

Words: Thirty Three Thousand Four Hundred Seventy Five Dollars
(\$ 33,475.00)

Description Alternate #2 shall include the work associated with providing two isolation rooms as indicated on the contract documents.

Alternate #3 Adds Deducts

Words: N/A Dollars
(\$ _____)

Description _____

Alternate #4 Adds Deducts

Words: N/A Dollars
(\$ _____)

Description _____

Division 0

ADDENDA ACKNOWLEDGMENT: (modified dates August 2016)

No. #1 - 9/19/23

No. #2 - 10/5/23

No. #3 - 10/9/23

No. N/A

No. N/A

No. N/A

ACCEPTANCE:

I certify that I am authorized to enter into a binding contract, if this Proposal is accepted.

Signature  Date 10/12/2023

Name and Title Ferrell Spicer Controls Manager

Name of Business Terry Service, Inc.

Complete spelling of bidder's name and address - exact as recorded at the Secretary of State

[<http://www.sos.state.ms.us/busserv/corp/soskb/csearch.asp>] which should be the same as you applied for at the Mississippi State Board of

Contractors [<http://www.msdoc.us/Search2.CFM>] (see 2.07, 3.01, 5.01) PLEASE LOOK IT UP at SoS. SoS rules when the 2 are different.

Address PO Box 1557 (mailing)

Address 746 S Ridgewood Rd. (physical)

City/State/Zip Code Ridgeland, MS 39158 County Madison

Phone 601-956-9211 Fax 601-957-9340 Email ferrell.spicer@terryservice.com

■ BIDDER'S CERTIFICATE OF RESPONSIBILITY NUMBER(S): 08838-MC

■ MINORITY BUSINESS ENTERPRISE? Yes _____ No X (to assist with Code 57-1-57)

■ Attach copy of Non-Resident Bidder's Preference Law (5.04 of Bidder's Checklist)

■ **Mechanical / Plumbing / Electrical Contractors:** (modified Dec 2013 SoS per 10/17/12 Addendum 1 & Feb 2014; 021219 sub over \$50,000.00; modified 04/06/2020)

Regarding said Divisions of the Specifications of the BoB Standard Form of Agreement Between The Owner and The Contractor: List any Mechanical/Plumbing and/or Electrical Sub-Contractors that will perform work of this contract; regardless of cost even for under \$50,000.00. COR must be included where sub-contract exceeds \$50,000.00. If no sub-contractor is listed, and such work is within scope of contract and over \$50,000.00, bidder's own COR classification(s) must be sufficient to self-perform any such work. If no sub-contractor is listed, then use of sub-contractor to perform such scope will not be permitted. This is in accordance with 5.05 and 5.06 of the Bidder's Checklist.

Mechanical Contractor: McLain Plumbing & Electrical Service, Inc Certificate of Responsibility No. 03556-MC
Plumbing Contractor: N/A Certificate of Responsibility No. _____
Electrical Contractor: Allied Industrial Services, LLC Certificate of Responsibility No. 21507-MC

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