

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		BPA NO.	1. CONTRACT ID CODE	PAGE 1	OF PAGES 7
2. AMENDMENT/MODIFICATION NO. A00003		3. EFFECTIVE DATE 08-24-2016	4. REQUISITION/PURCHASE REQ. NO. 673-16-1-6318	5. PROJECT NO. (if applicable) 673-14-604	
6. ISSUED BY Department of Veterans Affairs Network Contracting Office 8 (NCO 8) 8875 Hidden River Pkwy Suite 525 Tampa FL 33637		CODE Y	7. ADMINISTERED BY (If other than Item 6) Department of Veterans Affairs Network Contracting Office 8 (NCO 8) 8875 Hidden River Pkwy Tampa FL 33637		CODE 00248
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) To all Offerors/Bidders			(X)	9A. AMENDMENT OF SOLICITATION NO. VA248-16-R-0725	
			X	9B. DATED (SEE ITEM 11) 08-15-2016	
				10A. MODIFICATION OF CONTRACT/ORDER NO.	
				10B. DATED (SEE ITEM 13)	
CODE			FACILITY CODE		

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

- ☒ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☒ is extended, ☐ is not extended.
- Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:
- (a) By completing Items 8 and 15, and returning 1 copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. ** HOUR & DATE for Receipt of Offers is EXTENDED to:

12. ACCOUNTING AND APPROPRIATION DATA (If required)

13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor ☐ is not, ☒ is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

The purpose of this amendment is to revise RFP No.: VA248-16-R-0725. Please refer to the Table of Contents Summary of Changes/Revisions and Clarifications on page 2.

The proposal due date is extended from 2:00pm Eastern (EST) on Aug 24, 2016 to 2:00pm EST on Sep 1, 2016. The revisions in this amendment are effective Aug 24, 2016. All other terms and conditions in solicitation VA248-16-R-0725 remain unchanged.

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY (Signature of Contracting Officer)	16C. DATE SIGNED

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SUMMARY OF CHANGES/REVISIONS AND CLARIFICATIONS

The summary of changes/revisions and clarifications in this amendment are for information in solicitation VA248-16-R-0725. Corresponding sections and page numbers are provided as reference. Offerors shall read this amendment in its entirety.

1. PRICE SCHEDULE

CLINS LISTING REVISED

PAGE 7

The estimated square footage for each building requiring roof replacement has been revised. The estimated square footage is now integrated into CLINS itemized /alternate deduct list price schedule. Offerors shall use the price schedule in Attachment 1-7a thru 1-7b of this amendment to provide the company's pricing in submitted proposals. Offeror shall comply with all other instructions, terms and conditions for the submission of their and subcontractors' price proposal as per solicitation VA248-15-R-0725 and all amendments issued thereafter.

2. PROPOSAL EXTENSION/DUE DATE REVISED

C.1.8 **PROPOSAL DUE DATE AND TIME:** Offerors shall mail one printed hardcopy of their proposal along with one Adobe pdf scanned copy of the proposal on CD via an authorized mail carrier or by hand-delivery to the Contracting Office by **2:00pm EST on September1, 2016**. The required format for CD submission is Adobe Acrobat pdf format in Version 9 to Version 5.

3. FORM SUBMISSION DATE REVISED

PAGE 20 Sentence on form revised as follows:

PAST PERFORMANCE CONTACT FORM

This is an example of the past performance that shall be completed and included in Offerors' proposals. Past performance submissions are due by 2:00pm Eastern Standard Time on Sep 1, 2016.

AND

PAGE 386 Sentence on form revised as follows:

PAST PERFORMANCE CONTACT FORM

Complete and include all forms with your proposal, which is due by 2:00pm Eastern Standard Time on September 1, 2016.

Offerors shall use the past performance in labeled Attachment 6 of this amendment and submit the requested past performance information in submitted proposals as per solicitation VA248-15-R-0725 and all amendments issued thereafter.

4. REQUEST FOR INFORMATION

Responses for submitted Request for Information will be posted on August 24, 2016 by close of business on the subsequent amendment VA248-16-R-0725 A00005.

PRICE SCHEDULE

CLIN NO.	DESCRIPTION OF SUPPLIES/SERVICES	QUANTITY	UNIT	LUMP SUM AMOUNT
0001	<p>Proposals for performing roofing systems replacement will be as price lumped sum and itemized as alternate deducts by buildings on the Price Schedule. In Accordance with Availability of Funds, FAR 52.232-18, the Government may accept the proposed lump sum pricing and/or any alternate deduct pricing for each building based on available funding for award.</p> <p>The Contractor shall provide all supervision, labor, professional scientific and technical support, testing, tools, equipment, materials, parts, transportation, any other support and incidentals necessary to replace roofing systems approximately 177,000 SF of existing roofing on specified areas of buildings number 1, 23, 30 and portions of Buildings 32, 36 and 42 in accordance with the contract documents, project specifications, drawings and regulatory standards. The project site is located at the James A. Haley Medical Center, which is at 13000 Bruce B. Downs Boulevard, Tampa, Florida, 33612. Submission of documents validating competent and certified personnel assignment for the duration of this project is required prior to authorization of work start. The period of performance for Replace Roof Systems Campus Wide, Project 673-14-604 is seven hundred thirty (730) calendar days after issuance of the notice to proceed.</p>	1	JB	\$ _____ (Lump Sum for All Buildings)
0002	<p>Building 1, Alternate Deduct 145,330 SqFt 2nd Floor Roof , East Wing Roof, Lower Roof (South), Lower Roof (SouthWest), 7th Floor Roof and Penthouse Roof</p>	1	JB	\$ _____
0003	<p>Building 23, Alternate Deduct 500 SqFt</p>	1	JB	\$ _____

0004	Building 30, Alternate Deduct 22,020 SqFt Building Roof and Penthouse Roof	1	JB	\$ _____
0005	Buildings 32, Portions of Alternate Deduct 7,700 SqFt	1	JB	\$ _____
0006	Building 36, Portions of Alternate Deduct 5050SqFt	1	JB	\$ _____
0007	Building 42, Portions of Alternate Deduct 7000 SqFt			
		TOTAL PRICE		\$ _____ (Cumulative for Alternate Deducts)

Offerors shall include a price breakdown of each building by major labor category or trade (include the skill level range of employees), materials, equipment, amounts for overhead, profit, and bond costs for project completion. Offerors' price proposals breakdown shall include regular wage and differential wage rates (two separate price breakouts) for labor categories and trades that will perform during both normal hours of operation and after normal hours of operations in the completion of the project (182 calendar days). Offerors shall only include the differential wage rates for tasks that can and will be accomplished after normal hours of operations. If both rates are applicable, the labor category or trade should have two price breakouts as follows:

- One for regular wage rate for performance time during 548 calendar days
- One for differential wage rate for performance time during 182 calendar days

Prime contractor shall also provide copies of subcontractors' pricing with all required identification information for the total price proposal.

Failure to comply with these instructions may result in an offer being ineligible for award consideration.

Print Name of Authorized Representative

Date

Signature of Authorized Representative

PAST PERFORMANCE CONTACT FORM

Complete and include all forms with your proposal, which is due by 2:00pm Eastern Standard Time on September 1, 2016. Requested information on form shall not be altered. Provided information shall be legible and contact information shall be accurate for past performance verification.

1. Current Name of Company		2. DUNS	
3. Company Name during Performance (If not applicable write " N/A")		4. DUNS (or N/A)	
Project or Requirement Title:			
5. Name of Government or Commercial Agency Purchasing Construction Services:			
6. Address:			
7. Contract /Requirement Number		8. Date services were procured / Contract awarded	
9. Original Amount for Construction Services \$		10. Period of performance format required for time period ____/____/____ to ____/____/____	
11. Current Performance Status: Active _____ Completed _____ Percentage completed _____ % Current total amount of contract or Total contract amount upon completion _____		12. Type of Contract (Place "X" by appropriate types) Fixed Price ____ Cost Reimbursement ____ Task Order on IDIQ ____ Time & Materials ____ Labor Hours ____ Blanket Purchase Agreement ____ Incentive contract ____ (_____) Identify Type Hybrid ____ (_____) Identify Type	
13. Description of Services			
Name of Point of Contact :			
Position at the time of referenced contract:			
Voice Phone Number :		Email Address:	