Navarro County, Texas RFP No. 2025 – H – 001

**HVAC System** 

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AUG 2 3 2024

V. SPECIFICATIONS/RESPONSE PACKAGE

V. SPECIFICATIONS/RESPONS	E PACKAGE	ALIDITA COUNTY
Corsecana Sust metal lo.	Shc.	AUDITOR'S OFFICE
COMPANY SUBMITTING PROPOSAL		FEDERAL ID NUMBER
P.O. BOX 1676		
ADDRESS.		
Coesecana, Seras 75151		
CITY, STATE, Z	10	
Kay LOBO Gresilent	/ Owne	r)
NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	/	
903-872-8434		
TELEPHONE NO.	FAX NO.	
consicanagira earthlink. net		
e-mail.		
Luy Cold B.	V.	8-23-24
SIGNATURE OF AUTHORIZED REPRESENTATIVE		DATE

This page and the pages (pages 8-16) that follow make up the complete response package for this RFP.

### Navarro County Justice Center HVAC system overview:

The Navarro County Justice Center was opened for operation in October 1988. Many of the original HVAC units have been replaced out during the last 34 years. The HVAC units in the Detention Center are required to have automatic and manually controlled smoke exhaust fans electrically connected to the HVAC system. The currently installed roof mounted units are at least 13 years of age; the current units are as follows: 22-Carrier 5 ton #1711G20181; 23-Carier 5 ton #1711G20179; 14-York 5 ton #N0F8924816; 15-Goodman 10 ton #106110380; 1-Goodman 10 ton #1107753851; N/A-Goodman 10 ton #1107443827. (See Attached Exhibits)

The pneumatic smoke exhaust systems in the Justice Center are controlled by two electrical control panels. One is located in master control (controls A/C 13 units), the other control panel is located in the bottom picket area (controls 4 A/C units). The master control panel controls the upstairs detention area, the bottom panel controls only the basement (bottom) detention area.

All of the heating/Air-Conditioning units and exhaust fans are roof-mounted style, located on the Navarro County Justice Center. This bid is for Heat/Air-Conditioning units providing heating and cooling in the original Justice Center, it does not include the Justice Center annex equipment.

Control of the smoke exhaust system is by manual control (officer in appropriate control area) or automatic (started by fire detection system).

System Compatibility with Existing Conditions: HVAC systems shall be installed to meet all manufacturer's specifications such as ESP, electrical characteristics such as wire sizing, maximum and minimum breaker sizing. Should additional work be necessary, such as duct or

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electrical modifications, or if additions are necessary to meet all manufacturer's specifications, it will be the sole responsibility of the contractor without additional expense to Navarro County.

Refrigerant Lines: The contractor shall provide a new properly sized line set should the existing line set not be compatible with proposed systems. Should the existing line sets be of sufficient size to be utilized with the proposed new system, the line set shall at minimum to be flushed using a recognized line flush procedure, utilizing products such as Pro-Flush or Quick System Flush. It will be the contractor's sole responsibility to provide documentation of compatibility.

Minimum Efficiency/Requirements:

E.E.R.13

AFUE 80

R-410A Chlorine-Free refrigerant

Single stage cooling

High-Efficiency Copeland scroll compressor

High Pressure switch

Low Pressure switch

Factory installed filter dryer

850 RPM Condenser fan motor

Copper Tube/enhanced aluminum fin coil

Sweat connection service valves with easy access to gauge ports

Contractor lug connection

AHRI certified

ETL listed

Heavy-duty galvanized-steel cabinet

Powder-paint finish with 500-hour salt-spray approval

Top and side compressor and tubing access

Single-panel access to controls with space provided for field-installed accessories

Enthalpy controlled economizer

Unit voltage 208/220 - 3 phase - 60 hertz

Natural Gas Fired Burners

100 MBH Output Aluminized Steel, 1 Stage

3 Phase monitor

Coil Guard/Hail Guards

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# 1. System requirements

Direct Digital Controllers (DDC) to mo units.	onitor and control the 17 rooftop n			ditioning No
Direct Digital Controllers (DDC) to mor	nitor the 27 rooftop mounted smoke	exhaust fans.	Yes	No
Direct Digital Controllers (DDC) will be event the server should fail.	nave the ability to function in a sta		. /	/ ), in the No
	·	4		
Upgrade the two existing exhaust fan	control panels with pilot lights, push	buttons and hor	ns.	
			Yes	No
Computer, stand alone server, control DDC system, minimum of 17" LCD m will install applicable software to run s	onitor, this server will operate as th	è host computer	o contro , winnin Yes	ol above/ g bidder No
Graphical navigation and temperature	display shility on computer display			/
Graphical havigation and temperature	display ability of computer display.		Yes	No <u>~</u>
Alarm condition report to client compu	ters and capability to transmit via e	mail to a cellular		
phone.			Yes	No
	•	ı		,
Replace existing temperature sensor equipment.	s with new sensors for controlling			ditioning No_
grand and the state of the stat		·		/
Relocation of controller relay system, to weatherproof housing on the outsid	from blower section of roof mounte e of Heating/Air-Conditioning unit.			ng units
Inspection of existing actuators require	ed for smoke damper operation.		Yes	No
Supply all necessary wiring and provid	de labor for above system requirem	ents.	Yes	No <u>/</u>
Proper labeling of all wires, panels, rel	lays and system sensors.	·	Yes	No
Start-up and verification of system ope to verify system meets the bid requirer	eration. Navarro County Sheriff's O ments.			entative No
Bidder will provide a complete and f system, completely integrated with ex smoke exhaust fans.	unctional Heating/Air-Conditioning disting Heating/Air-Conditioning unit	s, pneumatic co	ntrol val	control ves and No

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All system drawings will be provided on 11" x 17" paper and in PDF formation	et. YesNo
Bidder will provide on-site training of system operation.	YesNo
Bidder must be able to provide on-site service to system within two received 24/7.	hours after initial service call is  YesNo
Minimum of one-year warranty on materials and labor.	YesNo
Bid exclusions  Any defective smoke evacuation actuators and/or dampers not fund	tioning properly will require an
authorized NCSO person verify the functionality and then authorize reparaterial basis.	air or replacement on a time and
Any additional equipment not located on the NCSO provided system blufor repairs etc. from an authorized NGSO person.	reprints, will require authorization
3. Inspection of system for bid	
System blueprints can be viewed at the Justice Center, however we can the facility. Bidder can visually inspect the facility upon request. Call N 903-875-3370, ask for Clitis Jordan or Brad Steele for an appointment.	nnot allow the blue prints to leave lavarro County Justice Center at
Contractor will be responsible for complete turn-key HVAC installation adapta-curb, consumable supplies, all labor, etc. HVAC units are requirements and any Local, State, and or Federal requirements.	This includes crane, electrical, equired to meet these minimum
Please complete the following:	
Description (Make/Model): 10 CK  Price:   Q H , 500 · 00	·
	: ಇ
Price should include all costs of shipping, handling, installation	on and e-training.
Estimated Delivery:	on and e-training.  L WELGW Sirve Welhs  OUT
Warranty:	
	(
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#### **BID PROPOSAL AFFIDAVIT**

The undersigned certifies that the bid prices in this proposal have been carefully reviewed and are submitted as correct and final. He further certifies that the bidder agrees to furnish any and/or all items upon which prices are extended at the price(s) offered, and upon the conditions contained in the specifications of the Invitation to Bid. The period of acceptance of this bid proposal will be thirty (30) calendar days from the date of the bid opening.

COUNTY OF NAVARRO §	
BEFORE ME, the undersigned authority, a Notary Public in and for the State of Texas, on this day personally appeared Billy RayCobb JR., who, after being duly sworn, did depose and say: "i, Billy RayCobb JR., am a duly authorized officer or agent for Lossiana Steet Metal Co Jick, and have	
been authorized to execute the foregoing bid proposal on their behalf. I hereby certify that the	
foregoing proposal has not been prepared in collusion with any other bidder or other person or	
persons engaged in the same line of business prior to the official opening of this bid. Further, I	
certify that the bidder is not now, nor has he been for the past six (6) months, directly or	
indirectly concerned in any pool or agreement or combination, to control the price of the	
services or materials bid on, or to influence any person or persons to bid or not to bid thereon.	
Name and Address of Bidder: Casicana Sheet Metal Co. Inc.  DIANE DOUGLAS  P.O. BOX 1476  QUAITER OF TOWNS 10-27-2024  Notary ID 275469hone  Output  Output  Notary ID 275469hone	
By: Billy Ruy Cohb J. Title: Mesident / Gwner	
Signature: Billy fly Cold 21	
SUBSCRIBED AND SWORN to before me by the above named on this the 23 nd day of day of day.	
Notary Public in and for the State of Texas  Page 12 of 1	16

vendor referenc	ES
Company: Orsicence Sheet Metal	Co. Inc
Please list three (3) references of current customers who company provides. The County prefers customers of simi proposal.	can verify the quality of service your lar size and scope of work to this
REFERENCE 1	· ···································
Company Name: Community Nation	al Bank
Address: 321 N 15 14.	
Contact Person/Title: Pat Fain	
Phone: Fax:	e-mail:
Contract Period: Scope of	Work: @
Company Name: MAVAMO County Fustic	e Conter
Address: 300 W 3nd Mu. S	lite 4
Contact Person/Title: JURIL Siller -	County auditor
Phone: Fax:	e-mail t gillen & NAVANO COURTY . org
Contract Period: Scope of	Work:
the state of the s	
REFERENCE 3 Company Name: (Mt.W. HVAC)	
	e Waco Jupas 76711
Contact Person/Title: Palma Wilma	
Phone: 972-619-2428 Fax:	e-mail:
Contract Period: Scope of	Work:
BelgRyCHN	Appeared to the second
[ Jev ] "	Page <b>13</b> of <b>16</b>

**VENDOR REFERENCES** 

### **RESIDENCE CERTIFICATION**

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Navarro County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contracts; pertinent provisions of §2252.001 are stated below:

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% %	(3)	"Nonresident bi	dder" refers to	o a person who	is not a reside	nt.	
	(4)	"Resident bidde this state, inclu- owner has its p	ding a contrac	ctor whose ultin	nate parent con	of business is in	า y .
	l cert	ify that Oscic	ana Shee	x metal	Co Inisa F	Resident Bidder (	of Texas
	as de	efined in Governm					
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⊒   		ed in Governmen	[Compa t Code §2252	any Name] .001 and our pi		lonresident Bidd business	er as
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Sign	nature:	Billy flay (	Mp Z			l	
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## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/23/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER State Housley Insurance Agency Inc.	CONTACT Manuela Taylor.  NAME: PHONE IAIC: No. Ext): 903-872-8444 (AIC. No): 903-87	72-9470
1000 W 2nd Ave	E-MAIL ADDRESS: Manuela@Lyndahousley.com	
Consideration TX 75110	Insurer(s) Affording Coverage	NAIC#
	INSURER A: State Farm Lloyds	43419
INSURED	INSURER B: State Farm Mutual Automobile Insurance Company	25178
Corsicana Sheet Metal Company, Inc	INSURER C : State Farm Fire and Casualty Company	25143
P.O. Box 1676	INSURER D:	
Corsicana, TX 75151	INSURER E:	
	INSURER F:	
COVEDAGES CERTIFICATE MI MADED.	DEMOLOS MINAMEN	<del></del>

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADD SUB POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE s 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS MADE X OCCUR \$ 100,000 MED EXP (Any one person) \$ 5,000 93-J3-P801-3 02/16/2024 02/16/2025 PERSONAL & ADV INJURY \$ 1,000,000

GEN'L AGGREGATE LIMIT APPLIES PER: s 2,000,000 GENERAL AGGREGATE POLICY PRODUCTS - COMP/OP AGG \$ 2,000,000 OTHER! COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY 11 8035 (FLEET) 02/11/2024 02/11/2025 (Ea accident) ANY AUTO **EODILY INJURY (Per person)** s 500,000 SCHEDULED AUTOS NON-CWNED AUTOS ONLY OWNED AUTOS ONLY BODILY INJURY (Per accident) \$ 500,000 535 9060 07/13/2024 07/13/2025 PROPERTY DAMAGE (Per accident) AUTOS ONLY 500,000 UMBRELLA LIAB ..... OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE RETENTION \$ DED. WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE EL EACH ACCIDENT s 1.000,000 93-GK-1452-9 02/16/2024 02)16/2025 OFFICERMENBER EXCLUDED? (Mandalory in NH) If yes, describe under E.L. DISEASE - EA EMPLOYER s 1,000,000 DESCRIPTION OF OPERATIONS below EL DISEASE-POLICY LIMIT S 1.000.000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD, 101, Additional Remarks Schedule, may be attached if more space is required)

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CERTIE	ICATE HOLDE	D		CANCELL	ATION

Naverro County Auditor Office 300 W 3rd Ave Suite 4 Corsicana, TX Atten: Terri Gillen SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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### MINIMUM INSURANCE REQUIREMENTS

- The Offeror shall, at all times during the term of this contract, maintain insurance coverage
  with not less than the type and requirements shown below. Such insurance is to be
  provided at the sole cost of the contractor. These requirements do not establish limits of
  the contractor's liability.
- All policies of insurance shall waive all rights of subrogation against the County, its officers, employees and agents.
- Upon request, certified copies of original insurance policies shall be furnished to Navarro County.
- The County reserves the right to require additional insurance should it be deemed necessary.
- A. Workers' Compensation (with Waiver of subrogation to Navarro County) Employer's Liability, including all states, U.S. Longshoremen, Harbor Workers and other endorsements, if applicable to the Project.
  - Statutory, and Bodily Injury by Accident: \$100,000 each employee. Bodily Injury by Disease: \$500,000 policy limit \$100,000 each employee.
- B. Commercial General Liability Occurrence Form including, but not limited to, Premises and Operations, Products Liability Broad Form Property Damage, Contractual Liability, Personal and Advertising Injury Liability and where the exposure exists, coverage for watercraft, blasting collapse, and explosions, blowout, cratering and underground damage.
  - \$300,000 each occurrence Limit Bodily Injury and Property Damage Combined \$300,000 Products-Completed Operations Aggregate Limit \$500,000 Per Job Aggregate \$300,000 Personal and Advertising Injury Limit. Navarro County shall be named as "additional insured" on commercial general liability policy.
- C. Automobile Liability Coverage:
  - \$300,000 Combined Liability Limits. Bodily Injury and Property Damage Combined. Navarro County shall be named as "additional insured" on automobile policy.

Attach copies of current insurance coverage that meets or exceeds these requirements to this page and include in the response package. Failure to provide this information may result in disqualification of Offeror.

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# OFFEROR'S BUSINESS STATEMENT

Please briefly describe below, or on a separate sheet, your business including, but not limited to, number of years in business, number of employees, the products and services your company specializes in and any other information that may be helpful to the County in the proposal evaluation process.

Company: Corsicana Sheet Motal Co. Shr. We have been in business since 1972. We Motall residential, new wilds, + Commercial lguipment. We take great fride in her work Our austoners are the best. We feel it is a Genor to serve our Lown + County. We have 7 Imployees Any ether questions planse peel free to Call 903-872-8434. Mank you gor this

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