The City of Rock Falls is seeking bids for the remodel of the restrooms in City Hall, Rock Falls Chamber and Fire Department.

Bid packets can picked up at the Rock Falls Building Department or downloaded at WWW.RockFalls61071.net. A pre bid meeting is scheduled for June 11th 2019 at 9am at Rock Falls City Hall 603 W 10th Street. Bid opening is scheduled for 10 am on June 25th 2019 at 603 W 10th Street Rock Falls, II 61071.

Bids must be submitted in a sealed envelope, Labeled with City of Rock Falls Restroom Remodel. Bids must be submitted by 10 am June 25th 2019

Construction must start within 45 days of the awarded bid and be completed by November 15th 2019.

A performance bond for the bid amount will be required upon award of the bid.

The public body or other entity awarding the contract shall cause to be inserted in the project specifications and the contract a stipulation to the effect that not less than the prevailing rate of wages as found by the public body or Department of Labor or determined by the court on review shall be paid to all laborers, workers and mechanics performing work under the contract.

When a public body or other entity covered by this Act has awarded work to a contractor without a public bid, contract or project specification, such public body or other entity shall comply with subsection (a-1) by providing the contractor with written notice on the purchase order related to the work to be done or on a separate document indicating that not less than the prevailing rate of wages as found by the public body or Department of Labor or determined by the court on review shall be paid to all laborers, workers, and mechanics performing work on the project.

Amendments to the bid can be found at WWW.RockFalls61071.net

Bid No. 1

Rock Falls Chamber Restroom Remodel

601 W 10th St, Rock Falls, IL 61071

All finished remodel bathroom to comply with ADA

Demolition:

Remove all fixtures, sinks toilets, grab bars, stall dividers, mirrors, lighting ect.

Remove all wall and floor ceramic tile.

Demo door opening.

Wall finish:

Install ½ inch moisture resistant green board dry wall on all walls, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Ceiling finish:

Install ½ inch dry wall on all ceilings, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Flooring:

Level all floors and prep for ceramic tile install.

Install Bell Vista 13X13 Smoke ceramic tile in a brick set pattern with a Bell Vista Octagon Mosaic 2 inch Smoke border around all floors 12 inches from wall. Tec #25 sanded grout.

Install Bell Vista Bullnose 3x13 smoke (p43e0) Tec #25 sanded grout.

Plumbing:

Adjust all plumbing per attached ADA layout for bathroom fixtures.

Install floor drains per state of Illinois plumbing Code.

Adjust all floor drains level with new floor tile. Repair all demolition from drain install.

Install new shut offs on all sinks and toilets.

Install Mansfield 410 urinals with a Sloan186-xl and Zurn Zerk-cpm auto flush eye. White color

Install Madera 1.6 gpf ADA EverClean Toilet with a Exposed Manual valve system Mod;2854.016.020 Finish White (020)

Install a 47 Inch Wall-Mount Double Sink Stone Resin Matte White Trough Bathroom Sink with Two Faucet HoleJ020828-GLOSSY_WHITE in the women restroom (https://www.homary.com/47-inch-wall-mount-double-sink-stone-resin-matte-glossy-white-trough-bathroom-sink-with-two-faucet-hole.html)

Install a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet

Install a Mona Wall Mounted White single hole sink Model # CeraStyle 064200-U-One Hole in the men's restroom with a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet.

Under sink plumbing shall have ADA protection installed.

All plumbing to be inspected and approved by the Illinois Sate Health department.

Fixtures:

Install a Rubbermaid Horizontal Baby Changing Station FG781888PLAT in the Women restroom

Install a Bradley Angle Frame Mirror 18x36 over each sink.

Install a Lavex Stainless steel 400 C-Fold Surface mounted Paper Towel Dispenser.

Install solid plastic Stall dividers HDPE City to have choice of color.

Install brushed nickel grab bars per ADA requirements.

Existing hand driers shall be reinstalled.

Existing ceiling vent fans shall be reinstalled.

All fire alarm system to be reinstalled

All Ptech heating and cooling units to be reinstalled.

Install Toilet paper dispensers Kimberly Clark Coreless Double Roll Tissue Dispenser, $11w \times 6d \times 75/8h$, Smoke/Gray - KCC09604

Install black Betco Clario hand soap dispensers.

Door:

Install a 36 inch by 80 flush steel door and frame, brushed nickel lever handle set, Closer 22 E Von Duprin or comparable. Primed and panted. City choice of color. Doors are to be set to the exterior of the door opening. All exterior wall finish to be replaced to match as existing.

Electrical:

All electrical to be adjusted to be flush with new drywall.

All electrical shall be run within wall. No exposed conduit.

Install new 48 inch 4 bulb led flush mount lights

Pendent lighting to be installed over sinks choice from city with a \$350.00 allowance. Power to be supplied to new lighting to main lighting wall switch.

Signage:

Bid No. 2

Rock Falls City Hall Restroom Remodel

603 W 10th St, Rock Falls, IL 61071

All finished remodel bathroom to comply with ADA

Demolition:

Remove all fixtures, sinks toilets, grab bars, stall dividers, mirrors, lighting ect.

Remove all wall and floor ceramic tile.

Demo door opening.

Wall finish:

Install ½ inch moisture resistant green board dry wall on all walls, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Ceiling finish:

Install ½ inch dry wall on all ceilings, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Flooring:

Level all floors and prep for ceramic tile install.

Install Bell Vista 13X13 Smoke ceramic tile in a brick set pattern with a Bell Vista Octagon Mosaic 2 inch Smoke border around all floors 12 inches from wall. Tec #25 sanded grout.

Install Bell Vista Bullnose 3x13 smoke (p43e0) Tec #25 sanded grout.

Plumbing:

Adjust all plumbing per attached ADA layout for bathroom fixtures.

Adjust all floor drains level with new floor tile. Repair all demolition from drain install.

Install new shut offs on all sinks and toilets.

Install Mansfield 410 urinals with a Sloan186-xl and Zurn Zerk-cpm auto flush eye. White color

Install Madera 1.6 gpf ADA EverClean Toilet with a Exposed Manual valve system Mod;2854.016.020 Finish White (020)

Install a 47 Inch Wall-Mount Double Sink Stone Resin Matte White Trough Bathroom Sink with Two Faucet HoleJ020828-GLOSSY_WHITE in the women restroom (https://www.homary.com/47-inch-wall-mount-double-sink-stone-resin-matte-glossy-white-trough-bathroom-sink-with-two-faucet-hole.html)

Install a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet

Install a Mona Wall Mounted White single hole sink Model # CeraStyle 064200-U-One Hole in the men's restroom with a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet.

Under sink plumbing shall have ADA protection installed.

All plumbing to be inspected and approved by the Illinois State Health department.

Fixtures:

Install a Rubbermaid Horizontal Baby Changing Station FG781888PLAT in the Women restroom

Install a Bradley Angle Frame Mirror 18x36 over each sink.

Install a Lavex Stainless steel 400 C-Fold Surface mounted Paper Towel Dispenser.

Install solid plastic Stall dividers HDPE City to have choice of color.

Install brushed nickel grab bars per ADA requirements.

Existing hand driers shall be reinstalled.

Existing ceiling vent fans shall be reinstalled.

All fire alarm system to be reinstalled

All Ptech heating and cooling units to be reinstalled.

Install Toilet paper dispensers Kimberly Clark Coreless Double Roll Tissue Dispenser, $11w \times 6d \times 75/8h$, Smoke/Gray - KCC09604

Install black Betco Clario hand soap dispensers.

Door:

Install a 36 inch by 80 flush steel door and frame, brushed nickel lever handle set, Closer 22 E Von Duprin or comparable. Primed and panted. City choice of color. Doors are to be set to the exterior of the door opening. All exterior wall finish to be replaced to match as existing.

Electrical:

All electrical to be adjusted to be flush with new drywall.

All electrical shall be run within wall. No exposed conduit.

Install new recessed led lighting in existing openings.

Pendent lighting to be installed over sinks choice from city with a \$350.00 allowance. Power to be supplied to new lighting to main lighting wall switch.

Signage:

Bid No. 2

Rock Falls Fire Department Restroom Remodel

1013 7th Ave, Rock Falls, IL 61071

All finished remodel bathroom to comply with ADA

Demolition:

Remove all fixtures, sinks toilets, grab bars, stall dividers, mirrors, lighting ect.

Remove all wall and floor ceramic tile.

Demo walls per attached firehouse plan

Demo door openings.

New Wall:

Frame in new walls as attached in plans, 2x 4 construction treated bottom plate.

Wall finish:

Install ½ inch moisture resistant green board dry wall on all walls, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Ceiling finish:

Install ½ inch dry wall on all ceilings, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Flooring:

Level all floors and prep for ceramic tile install.

Install Bell Vista 13X13 Smoke ceramic tile in a brick set pattern with a Bell Vista Octagon Mosaic 2 inch Smoke border around all floors 12 inches from wall. Tec #25 sanded grout.

Install Bell Vista Bullnose 3x13 smoke (p43e0) Tec #25 sanded grout.

Shower:

Install Bell Vista 13X13 Smoke ceramic tile on all walls and floor Tec #25 sanded grout.

Install ADA shower seat as in attached plans.

Plumbing:

Install shower floor drains.

Install hot and cold water lines to shower controls.

Install a Moen T8375 Commercial Single Handle Posi-Temp All Metal Shower Faucet

Adjust all plumbing per attached ADA layout for bathroom fixtures.

Adjust all floor drains level with new floor tile.

Install new shut offs on all sinks and toilets.

Install Mansfield 410 urinals with a Sloan186-xl and Zurn Zerk-cpm auto flush eye. White color

Install Madera 1.6 gpf ADA EverClean Toilet with a Exposed Manual valve system Mod;2854.016.020 Finish White (020)

Install a Mona Wall Mounted White single hole sink Model # CeraStyle 064200-U-One Hole with a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet.

Under sink plumbing shall have ADA protection installed.

All plumbing to be installed within walls.

All plumbing to be inspected and approved by the Illinois State Health department.

Fixtures:

Install a Bradley Angle Frame Mirror 18x36 over each sink.

Install a Lavex Stainless steel 400 C-Fold Surface mounted Paper Towel Dispenser.

Install solid plastic Stall dividers HDPE City to have choice of color.

Install brushed nickel grab bars per ADA requirements.

Existing hand driers shall be reinstalled.

Existing ceiling vent fans shall be reinstalled.

All fire alarm system to be reinstalled

Install Toilet paper dispensers Kimberly Clark Coreless Double Roll Tissue Dispenser, 11w x 6d x 7 5/8h, Smoke/Gray - KCC09604

Install black Betco Clario hand soap dispensers.

Doors:

Install a 36 inch by 80 flush steel door and frame, brushed nickel lever handle set, Closer 22 E Von Duprin or comparable. Primed and panted. City choice of color. Doors are to be set to the exterior of the door opening. All exterior wall finish to be replaced to match as existing.

Electrical:

All electrical to be adjusted to be flush with new drywall.

All electrical shall be run within wall. No exposed conduit.

Install new recessed led lighting in existing openings.

All electrical outlets to be updated to GFI.

Pendent lighting to be installed over sinks choice from city with a \$350.00 allowance. Power to be supplied to new lighting to main lighting wall switch.

Install a shower flush mount LED ceiling light, ventilation fan and switch.

Signage:

Alternate Bid

Rock Falls Fire Department single stall Restroom Remodel

1013 7th Ave., Rock Falls, IL 61071

All finished remodel bathroom to comply with ADA

Demolition:

Remove all fixtures, sinks toilets, grab bars, stall dividers, mirrors, lighting ect.

Remove all wall and floor ceramic tile.

Demo door opening.

Wall finish:

Install ½ inch moisture resistant green board dry wall on all walls, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Ceiling finish:

Install ½ inch dry wall on all ceilings, tape and apply smooth finish.

Prime and Paint all walls, city of Rock Falls to supply color choice.

Flooring:

Level all floors and prep for ceramic tile install.

Install Bell Vista 13X13 Smoke ceramic tile in a brick set pattern with a Bell Vista Octagon Mosaic 2 inch Smoke border around all floors 12 inches from wall. Tec #25 sanded grout.

Install Bell Vista Bullnose 3x13 smoke (p43e0) Tec #25 sanded grout.

Plumbing:

Adjust all plumbing per attached ADA layout for bathroom fixtures.

Install floor drain.

Adjust all floor drains level with new floor tile. Repair all demolition from drain install.

Install new shut offs on all sinks and toilets.

Install Madera 1.6 gpf ADA EverClean Toilet with a Exposed Manual valve system Mod;2854.016.020 Finish White (020)

Install a Mona Wall Mounted White single hole sink Model # CeraStyle 064200-U-One Hole in the restroom with a Moen Model # WS84414MSRN Spot resist Brushed nickel faucet.

Under sink plumbing shall have ADA protection installed.

All plumbing to be inspected and approved by the Illinois State Health department.

Install a Bradley Angle Frame Mirror 18x36 over sink.

Install a Lavex Stainless steel 400 C-Fold Surface mounted Paper Towel Dispenser.

Install brushed nickel grab bars per ADA requirements.

Existing hand driers shall be reinstalled.

Existing ceiling vent fans shall be reinstalled.

All fire alarm system to be reinstalled

Install Toilet paper dispensers Kimberly Clark Coreless Double Roll Tissue Dispenser, 11w x 6d x 7 5/8h, Smoke/Gray - KCC09604

Install black Betco Clario hand soap dispensers.

Door:

Install a 36 inch by 80 flush steel door and frame, brushed nickel lever handle set, Closer 22 E Von Duprin or comparable. Primed and panted. City choice of color. Doors are to be set to the exterior of the door opening. All exterior wall finish to be replaced to match as existing.

Electrical:

All electrical to be adjusted to be flush with new drywall.

All electrical shall be run within wall. No exposed conduit.

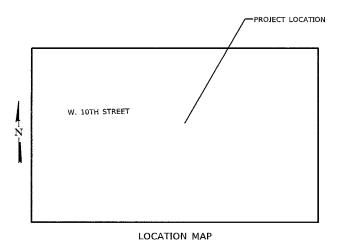
Install new recessed led lighting in existing openings.

Signage:

CITY OF ROCK FALLS TOILETROOM ACCESSIBILITY EVALUATION

603 WEST 10TH STREET ROCK FALLS, ILLINOIS 61071

2018





INDEX OF DRAWINGS

G1 COVER SHEET

0

0

0

0

- G2 GENERAL ACCESSIBILITY CODE DETAILS
- G3 CODE PLANS
- 03 TOTAL SHEETS

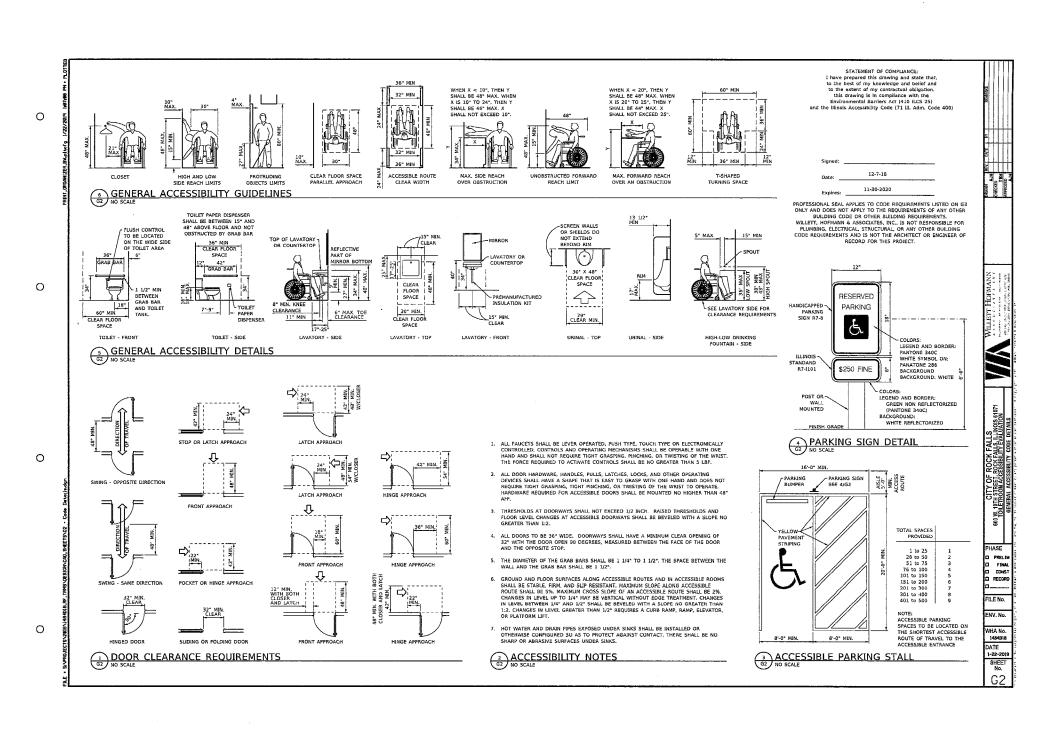


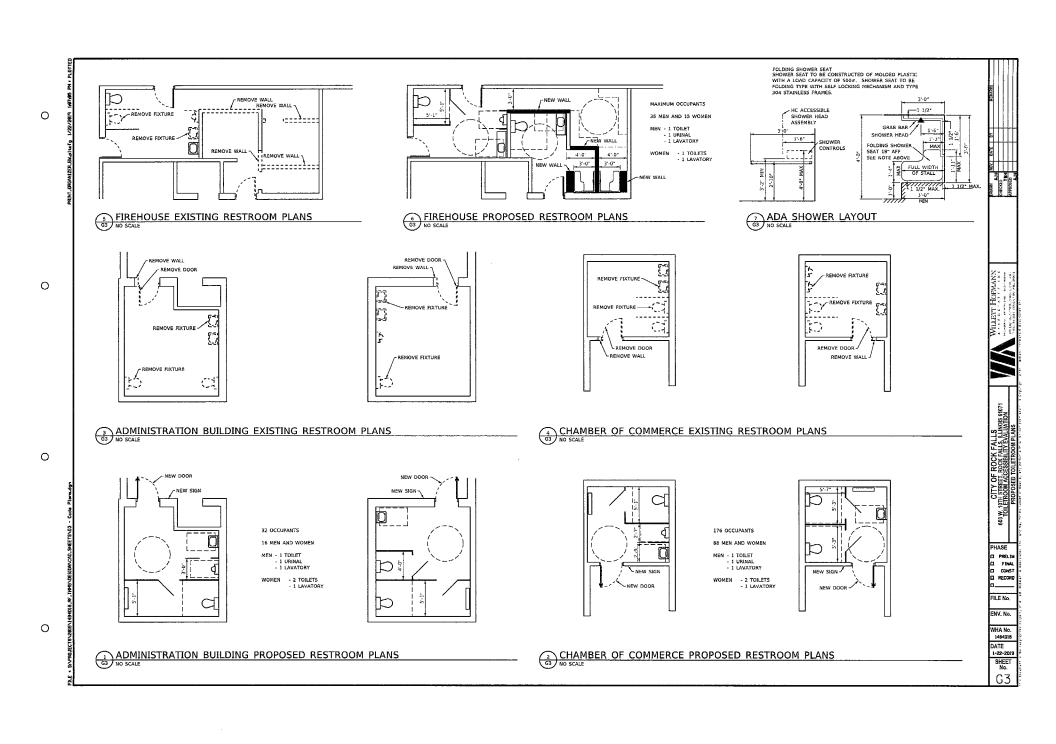
ENGINEERING ARCHITECTURE LAND SURVEYING

809 EAST 2ND STREET, DIXON, IL 61021-0367 T: 815-284-3381 DESIGN FIRM: #184-000918

WHA NO. 1484D18

DATE: 12-11-2018





City of Rock Falls Restroom Remodel Bid Sheet

Contractor Name	
Address	
Phone number	
Bid No.1	
Rock Falls Chamber Restroom Remodel	Bid 1 Total
Bid No. 2	
Rock Falls City Hall Restroom remodel	Bid Total
Rock Falls Fire Department Restroom Remodel	Bid Total
	Bid 2 Total
City of Rock Falls Fire Department Alternate Bid	Bid Total

PREVAILING WAGE CERTIFICATION

Contractor –	
Owner City of Rock Falls, Illinois	
Contractor agrees that not less than the prevailing rate of the State of Illinois, shall be paid to all laborers, work contract, and Contractor agrees that all subcontracts ar written stipulation that not less than the prevailing rate and mechanics performing work under such subcontract by the Department of Labor of the State of Illinois.	ers and mechanics performing work under the dower tiered subcontracts shall contain a of wages shall be paid to all laborers, workers
Contractor also agrees that it shall:	
1. Make and keep for a period of not less than thr and other workers employed on the project, including ewhen available, social security number, classification or period, number of hours worked each day, and the star	each worker's name, address, telephone number classifications, hourly wages paid in each pay
2. Submit no later than the 15th day of each caler immediately preceding month with the City Clerk until sactivates their database at which time certified payrolls	such time the Illinois Department of Labor
At the time of request for each progress payment, Cont affidavit listing all suppliers of labor and material, the weach to date, the amount due for work performed to date to any such supplier signed by such supplier.	ork performed by each, the amounts paid to
Contractor:	Owner: City of Rock Falls, Illinois
	D
By:	Ву:

President Mayor

CERTIFICATE	OF	COMPT	TANCE	STA	TITE!	TENT
T R.R. I I R I L. A. I H.	T)K	CONTRA	ALALINU. P.	3 I A		

The undersigned, upon being first duly sworn, hereby certifies to the City of Rock Falls, Whiteside County, Illinois, that(bidder) shall comply with all of the following established compliance standards.
1. Certificate of Compliance with Safety Standards
2. Certificate of Compliance that the above bidder is not currently delinquent in the payment of any tax administered by or owed to the Illinois Department of Revenue, or otherwise in defaulupon any such tax as defined under CH.65, Sec. 11-42.1-1, Illinois Compiled Statutes.
3. Certificate of Compliance that the above bidder complies with the Illinois Human Rights Ac as amended by Section 2-105, Public Act 87-1257 in relation to employment and human rights
 Certificate of non-Disqualification certifying that the above named bidder is not barred from contracting with any unit of State or local government, as a result of a violation of Ch. 720 Sec. 33E-11 of the Illinois Compiled Statutes.
NOTE TO BIDDER: Anyone who makes a false statement, material to this Certification commits a Class 3 Felony under Illinois Compiled Statutes, Ch. 720, Sec. 33E-11 (b).
5. Certificate of Compliance with Prevailing Wage Rate Act certifying that all work under this contract shall comply with the Prevailing Wage Rate Act of the State of Illinois, Illinois Compiled Statutes, Chapter 820, par. 130/31. et. seq., and as amended by Public Act 86-799 and 86-693 with rates to be paid in effect at time work is performed. Contractors shall submit monthly certified payroll records to the Office of the City Clerk.
Name of Contractor
By:
State of Illinois)
County of)
Subscribed and sworn to before me this day of, 20
Notary Public

CITY OF ROCK FALLS Certificate of Insurance Requirements

All Contractors, manufacturers/distributors and suppliers shall be required to carry and evidence insurance coverage with a standard Accord Certificate of Insurance with minimum limits applicable as outlined below. These Tier amounts shall be decided and required by the Department Head using the knowledge of the potential risks associated with the project being bid.

1. Minimum Insurance Requirements and limits

I. Low Hazard

- 1	000,000
	000,000
C. Workers Compensation \$1,	000,000
D. City of Rock Falls named as "Additional Insu	ıred"
E. 60 days' notice of cancellation	
F. Hold Harmless Agreement included in contra	ct
G. Umbrella Liability \$1,	000,000

II. Medium Hazard

A. Commercial General Liability	\$2,000,000
B. Automobile Liability	\$2,000,000
C. Workers Compensation	\$2,000,000
D. City of Rock Falls named as "Addition	nal Insured"
E. 60 days' notice of cancellation	
F. Hold Harmless Agreement included in	contract
G. Umbrella Liability	\$2,400,000

III High Hazard

A. Commercial General Liability	\$3,000,000		
B. Automobile Liability	\$3,000,000		
C. Workers Compensation	\$3,000,000		
D. City of Rock Falls named as "Additional Insured"			
E. 60 days' notice of cancellation			
F. Hold Harmless Agreement included in c	ontract		
G. Umbrella Liability	\$9,000,000		

1. Cancellation or Alteration

The policies of insurance required by this exhibit shall provide that they cannot be cancelled or altered in any way changing coverage except after 30 days prior written notice by certified mail to owner.

2. Workers' Compensation and General Liability Waiver of Subrogation in favor of the City of Rock Falls.

3. Insurance Certificates

- A. Must be submitted ten (10) days prior to any work being performed to allow review of certificates.
- B. Certificates not meeting requirements must be revised and resubmitted within fifteen (15) days or the subcontractor will not be allowed on the jobsite.
- 4. Additional Insured and Broad Form Vendors' Liability in favor of the City of Rock Falls.

The City must be named as an Additional Insured with the following wording appearing on the Certificate of insurance: "The City of Rock Falls and all officials and employees of the City as to any and all projects, as an additional Insured for the Commercial General Liability as respects and all projects for any work being performed and this coverage will be primary and noncontributory."

5. Minimum Insurance Carrier

All contractors, manufacturers/distributors and suppliers' insurance carriers must comply with the minimum A.N. Best rating of A-VI for all insurance carriers.