

SECTION 00 41 00**BID FORM****THE PROJECT AND THE PARTIES****1.01 SUBMITTED TO:**

City of Columbus (Owner)
161 N. Dickason Blvd
Columbus, WI 53925.

1.02 PROJECT:

City of Columbus – Fireman's Park Pavilion Exterior Stairway Rehabilitation

1.03 DATE: May 27, 2025 **(BIDDER TO ENTER DATE)**

1.04 SUBMITTED BY: (BIDDER TO ENTER NAME AND ADDRESS)

A. Bidder's Full Name McKee Associates, Inc.

1. Address

925 Watson Avenue

2. City, State, Zip Madison, WI 53713

3. Phone 608-271-4900

1.05 OFFER

A. Having examined the Place of The Work and all matters referred to in the Instructions to Bidders and the Contract Documents prepared by Funktion Design Studio, LLC. for the above-mentioned project, we, the undersigned, hereby offer to enter into a Contract to perform the Work for the Sum of:

B. Base Bid (Print Total Lump Sum price for Base Bid in words and numbers):

Ninety eight thousand eight hundred

dollars

(\$ 98,800.00). Base Bid is stated in lawful money of the United States of America

1.06 ACCEPTANCE

A. This offer shall be open to acceptance and is irrevocable for ninety days from the bid closing date.

B. If this bid is accepted by Owner within the time period stated above, we will:

1. Execute the Agreement within ten days of receipt of acceptance of this bid.

2. Commence work within ten days after written acceptance of this bid.

1.07 CONTRACT TIME

A. If this Bid is accepted, the Substantially Completion will be October 31, 2025.

1.08 CHANGES TO THE WORK

- A. When Architect establishes that the method of valuation for Changes in the Work will be net cost plus a percentage fee in accordance with General Conditions, our percentage fee will be:
1. 10 percent overhead and profit on the net cost of our own Work;
 2. 10 percent on the cost of work done by any Subcontractor
- B. On work deleted from the Contract, our credit to Owner shall be Architect-approved net cost plus 0 of the overhead and profit percentage noted above.

1.09 ADDENDA

- A. The following Addenda have been received. The modifications to the Bid Documents noted below have been considered and all costs are included in the Bid Sum.
1. Addendum # 1 Dated 5/16/2025.
 2. Addendum # _____ Dated _____.
 3. Addendum # _____ Dated _____.

1.10 BID FORM SUPPLEMENTS

- A. The following Supplements **have been completely filled out** and are **attached** to this Bid Form and are considered an integral part of this Bid Form:
1. Document 00 21 45 - Bidder's Proof of Responsibility.
 2. Document 00 43 25 - Proposed Substitutions.
 3. Document 00 43 36 - Proposed Subcontractors Form: Include the names of all Subcontractors and the portions of the Work they will perform.
 4. Document 00 45 43 - Affidavit of Organization and Authority.

1.11 BID FORM SIGNATURE(S)

- A. McKee Associates, Inc.

Name of Firm

- B. Brian McKee, President

Print name of Signing Officer and Title

- C. 

Signature of Signing Officer

- 1.12 IF THE BID IS A JOINT VENTURE OR PARTNERSHIP, ADD ADDITIONAL FORMS OF EXECUTION FOR EACH MEMBER OF THE JOINT VENTURE IN THE APPROPRIATE FORM OR FORMS AS ABOVE.**

END OF BID FORM

SECTION 00 43 25
PROPOSED SUBSTITUTIONS

PARTICULARS

THE FOLLOWING IS THE LIST OF PROPOSED SUBSTITUTIONS REFERENCED IN THE BID SUBMITTED BY:

(BIDDER) McKee Associates, Inc.

TO: CITY OF COLUMBUS

DATED May 27, 2025 **AND WHICH IS AN INTEGRAL PART OF THE BID FORM.**

The Bidder hereby declares as Bidder that their base bid is for furnishing and installing the equipment, materials, etc. as specified in the Project Documents, or approved in an addendum.

All equipment, materials, etc. proposed for substitutions are listed below and shall meet the exact performance and aesthetic requirements of the like item in the Project Documents. The substitutions are to be designated in moneys to be added to, or deducted from, the Base Bid for each proposed substitution. Complete technical data shall be submitted by the apparent low bidder to the Architect upon request for evaluation.

The intent of Substitutions is to ensure proper competition. Any proposed substitutions should improve the operation, performance, and/or maintenance of the structure and its systems or lower the overall cost to the City of Columbus without compromising quality.

LIST

Project Manual Section	Item Description	Proposed Manufacturer	Cost Adjustment
			___ Add ___ Deduct \$
			___ Add ___ Deduct \$
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END OF SECTION

SECTION 00 43 36
PROPOSED SUBCONTRACTORS FORM

PARTICULARS

HEREWITH IS THE LIST OF SUBCONTRACTORS REFERENCED IN THE BID SUBMITTED BY:

(BIDDER) McKee Associates, Inc.

TO (OWNER): CITY OF COLUMBUS

DATED May 27, 2025 **AND WHICH IS AN INTEGRAL PART OF THE BID FORM.**

THE FOLLOWING WORK WILL BE PERFORMED (OR PROVIDED) BY SUBCONTRACTORS AND COORDINATED BY US:

LIST OF SUBCONTRACTORS

	Name, Address, and Telephone	Class of Work	Amount of Subcontract
1.			
	All work will be self preformed by McKee Associates, Inc.		
2.			
3.			
4.			
5.			

	Name, Address, and Telephone	Class of Work	Amount of Subcontract
6.			
7.			
8.			
9.			
10.			
11.			

NOTE: Add additional pages as needed.

NOTE: This list cannot be altered after submission without written consent of the Owner.

END OF SECTION

SECTION 00 45 43
AFFIDAVIT OF ORGANIZATION AND AUTHORITY

STATE OF WISCONSIN

COUNTY OF Dane

(Bidder) McKee Associates, Inc. being first duly sworn on oath deposed and says that the Bidder named on the attached bid proposal is organized as indicated below and that all statements herein made are made on behalf of such Bidder and that this deponent is authorized to make them.

(Fill out applicable paragraph below)

1.01 CORPORATION.

This Bidder is a corporation organized and existing under the laws of the State of Wisconsin

and its President is Brian McKee, and its Secretary is Melissa McKee No Seal
~~, and it does have a corporate seal.~~

~~The President is authorized to sign construction contracts and bids for the company by action of its Board of Directors taken on _____, a certified copy of which is attached hereto. (Strike out last sentence if not applicable).~~

1.02 PARTNERSHIP.

The Bidder is a partnership consisting of and _____
_____ partners doing business under
the name of _____.

1.03 SOLE TRADER.

The Bidder is an individual and if operating under a trade name, such trade name is as follows

_____.

ADDRESS

The business address of the Bidder is as follows:

925 Watson Avenue

Madison, WI 53713

May 1, 2025

Bidder also deposes and says that s/he has examined and carefully prepared the Bid from the Plans and Specifications and has checked the same in detail before submitting this Bid, and that the statements contained herein are true and correct.

Signed Brian McKee Brian McKee

Subscribed and sworn to before me this

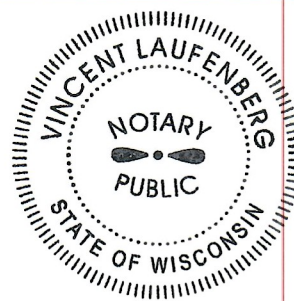
27 day of May, 2025

Notary Public

[Signature] Co. Dane

My Commission Expires 11/7/2025

END OF SECTION



SECTION 00 21 45
BIDDER'S PROOF OF RESPONSIBILITY

BIDDER McKee Associates, Inc.

TO: CITY OF COLUMBUS

DATED 5/27/2025 **AND WHICH IS AN INTEGRAL PART OF THE BID FORM.**

1.01 BIDDER'S PROOF OF RESPONSIBILITY SHALL SUBMITTED WITH THEIR BID FORM.

- A. On all contracts, the bidder must submit a full and complete statement, sworn to before an officer authorized by law to administer oaths, of financial ability, equipment and experience in the work prescribed and of such other matters as the Owner may require for the protection and welfare of the public (Section 66.0901(2), Wisconsin Statutes).
- B. The object of the questionnaire is not to discourage bidding or make it difficult for qualified bidders to file bids. Neither is it intended to discourage beginning contractors. It is intended to make it possible for the Owner to have exact information on financial ability, equipment and experience of the bidder involved so as not to award contracts to parties apparently not qualified to perform the Work.
- C. If the Owner is not satisfied with the sufficiency of the answers to the questionnaire and financial statement, it may disqualify the Bidder or require additional information (Section 66.0901(4), Wisconsin Statutes).
- D. Any questions regarding the information to be provided on this form should be directed to the Owner.

1.02 STATEMENT OF BIDDER'S QUALIFICATIONS

- A. Name of Bidder McKee Associates, Inc.
Bidder's Address 925 Watson Avenue, Madison, WI 53713
- B. Type of Organization (check one): Corporation X Partnership _____ Individual _____
Joint Venture _____. Other _____. If other, attach a brief statement describing the organization.
- C. When Organized? Wisconsin
- D. If a corporation, when and where incorporated 1970 Wisconsin
- E. Attach a statement listing the corporate officers, partners or other principal members of your organization and detailing the background and experience of the principal members of your personnel, including the officers.
- F. How many years has your organization been engaged in the contracting business under the present firm name? 55 years
- G. General character of work performed by your firm? Commercial Construction

- H. Attach a list of contracts on hand, for both public and private construction, including for each contract, the class of work, the contract amount, the percent completed, the estimated completion date, and the name and address of the Owner or contracting officer.
- I. Has your organization ever defaulted on a contract or failed to complete any work awarded to it?
Yes _____ No X . If so, attach a statement stating where and why.
- J. Has an officer or partner of your organization been an officer or partner of some other organization within the past 5 years that failed to complete a construction contract during that period?
Yes _____ No X . If so, attach a statement indicating the name of the individual, other organization and explain where and why.
- K. Has any officer or partner of your organization within the past 5 years failed to complete a construction contract handled in his/her own name?
Yes _____ No X . If so, attach a statement indicating the name of individual and explain where and why.
- L. Attach a list of the major projects your organization has completed within the past 3 years, including for each project: the class of work, the contract amount, the completion date, the name and address of the owner or contracting officer.
- M. Attach a list of major equipment which is available to your organization for the proposed work. Indicate type, model, age and condition.
- N. Attach a statement of your experience in the construction of work similar in nature and importance to this project.
- O. Credit available: Attach a letter from your bank(s) or other financial institution(s) advising line of credit set up for your organization.

1.03 NAME OF INSURANCE COMPANY AND NAME, ADDRESS AND TELEPHONE NUMBER OF AGENT

Hausmann Group, 740 Regent Street, Madison, WI 53715

Pat McKenna 608-257-3795

1.04 FINANCIAL STATEMENT:

- A. Condition at close of business on _____, 20____.
- B. Assets
- | | |
|---------------------------------------|-------------------------|
| 1. Cash | \$ Provide Upon Request |
| 2. Accounts Receivable | \$ _____ |
| 3. Real Estate Equity | \$ _____ |
| 4. Materials in Stock | \$ _____ |
| 5. Equipment, Book Value | \$ _____ |
| 6. Furniture and Fixtures, Book Value | \$ _____ |
- C. Other Assets
- \$ _____

D. Liabilities

1. Accounts, notes and interest payable

\$

2. Other Liabilities

\$

E. NET WORTH

\$

The undersigned certifies that he is a Certified Public Accountant and that he knows by personal inspection of the books of account of the affiant contractor that the facts of the above financial statement are true and correct as of the closing date indicated.

Signature Certified Public Accountant

1.05 ADDITIONAL INFORMATION MAY BE SUBMITTED IF DESIRED.

A. _____

B. _____

C. _____

D. _____

1.06 DATED AT _____ THIS 27 DAY OF May, 20 25.

State of Wisconsin)

)SS:

County of Dane)

Brian McKee

(Name of Contractor)

, being duly sworn according to law, says

that he/she is of McKee Associates, Inc.

(Name of Organization)

and that the answers to the foregoing questions and all statements contained herein are true and correct.

SIGNED Brian McKee Brian McKee, President
(Contractor)

Subscribed and sworn to before me this

27 day of May

, 20 25

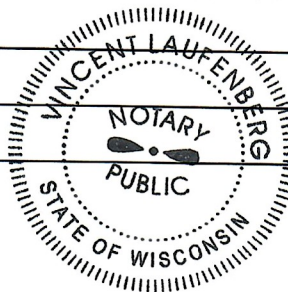
Notary Public

Co. Dane

My Commission expires 11/7/2025

Business Phone: 608-271-4900

Business Fax: 608-271-4957



END OF SECTION