Company Lyon mechanical

CITY OF NOVI

HVAC MAINTENANCE / PROFESSIONAL SERVICES CONTRACT

FEE PROPOSAL FORM

We, the undersigned as proposer, propose to furnish to the City of Novi, according to the terms, conditions and instructions attached hereto and made a part thereof:

SCHEDULED PREVENTIVE MAINTENANCE (INSPECTIONS)

BASE BID	FREQUENCY	COST PER INSPECTION	Times per Year	TOTAL ANNUAL COST
Civic Center	Once per quarter	$ 2,475	~~3~~ 4	$ 9,~~8~~900
Police Department	Once per quarter	$ 2,381	~~3~~ 4	$ 9,524
DPW Facility	Three per year (January/May/ September)	$ 4,983	3	$ 14,94~~7~~9
Indoor Gun Range	Three per year (January/May/ September)	$ 892	3	$ 2,67~~7~~6
Fire Station #1	Three per year (January/May/ September)	$ 1,061	3	$ 3,18~~2~~3
Fire Station #2	Three per year (January/May/ September)	$ 1,074	3	$ 3,22~~1~~2
Fire Station #3	Three per year (January/May/ September)	$ 611	3	$ 1,83~~4~~3
Fire Station #4	Three per year (January/May/ September)	$ 1,879	3	$ 5,63~~6~~7
Fire Station #5 EMS	Twice per year (June/October)	$ 326	2	$ 65~~1~~2
Villa Barr Art Park	Twice per year (June/October)	$ 496	2	$ 992
Township Hall	Twice per year (June/October)	$ 148	2	$ 29~~5~~6
ITC CSP Storage Building	Once per year (October)	$ 323	1	$ 323
Lakeshore Park	Three per year (January/May/ September)	$ 382	3	$ 1,14~~7~~6
			TOTAL ANNUAL COST	$ 54,3~~78~~33

Page 27 of 34

ALTERNATES	FREQUENCY	COST PER INSPECTION	ANNUAL QTY	TOTAL ANNUAL COST
Alternate #1 – Novi Ice Arena	Once per quarter	$ 2,423	4	$ 9,691

REPAIRS/SERVICE CALLS/STARTUP/SHUTDOWN	HOURLY RATE
Regular Working Hours M-F 8:00 AM - 5:00 PM (DPW Working Hours M-F 7:30 AM - 4 PM)	$ 124
Overtime Working Hours M-F after 8 hours, first 8 on Sat.)	$ 186
Sunday Hours (12 Midnight Sat – 8 AM Mon)	$ 198
Holidays (5 PM prior night – 8 AM following day)	$ 248

MATERIALS MARKUP FROM CONTRACTOR'S COST (%)	5 %

OTHER CHARGES - ALL other possible or potential charges must be clearly identified and described here, otherwise, they will not be allowed by the City (ie equipment rental, etc.)

Description	Cost
lift	$ 350 / day
	$
	$
	$
	$
	$
	$
	$

ADDITIONAL TERMS & CONDITIONS:
The City of Novi retains the right to obtain competitive pricing for component parts with a cost in excess of $1,000.

We acknowledge the following addendums: _____
(please list numbers)

EXCEPTIONS TO SPECIFICATIONS:

_____

_____

_____

_____

COMMENTS:

_____

_____

_____

_____

NON-IRAN LINKED BUSINESS
By signing below, I certify and agree on behalf of myself and the company submitting this proposal the following: (1)that I am duly authorized to legally bind the company submitting this proposal; and (2) that the company submitting this proposal is not an "Iran linked business," as that term is defined in Section 2(e) of the Iran Economic Sanctions Act, being Michigan Public Act No. 517 of 2012; and (3) That I and the company submitting this proposal will immediately comply with any further certifications or information submissions requested by the City in this regard.

PROPOSAL SUBMITED BY:

Company Lyon mechanical

Address 30100 South Hill Rd

City New Hudson State mich Zip 48165

Telephone (248) 437-1046 Fax (248) 437-4020

Representative's Name (printed) Carlo Serafini

Title owner (co)

E-mail CSS@Lyonmech.com

Signature Carlo Serafini

Date _____

cityofnovi.org

CITY OF NOVI

QUALIFICATIONS QUESTIONNAIRE

HVAC MAINTENANCE/
PROFESSIONAL SERVICES CONTRACT

The contractor shall complete a Qualification Questionnaire to contain at a minimum the following information. Failure to answer all questions may result in rejection of your proposal.

Name of Firm Lyon mechanical

Address 30100 South Hill Rd

City, State Zip New Hudson MI 48165

Telephone (248) 437-1046 Fax (248) 437-4020

Mobile (734) 216-2551

Agent's Name (please print) Carlo Serafini

Agent's Title Co-owner

Email Address CSS@Lyonmech.com

Website Lyonmech.com

1. Organizational structure: Corporation, Partnership, etc. Scorp
2. Has any officer or partner of this organization owned or operated a company that declared bankruptcy during the last 10 years? No ✓ Yes ____
   When: ____
3. How many years has your organization been in business under its present name?
   Since 1984
4. Under what other or former names has your organization operated? ____
   none
5. How many full time employees? 12 Part time? 0
6. Telephone Numbers for Service Calls
   Business Hours: (248) 437-1047 ____
   Night & Weekend Hours : (248) 437-1047 ____
7. Provide your procedure for handling night & weekend calls. Include response times. Failure to provide this information with your proposal will result in the rejection of your proposal.

Call comes in, dispatcher takes info, calls on call technician, and within an hour tech will be on site. most live within 30 mins of office in New Hudson. Tech comes out, diagnose, then between inventory, we have 24/7 access to our supply houses.

8. Address of your local facility 30100 S. Hill Rd New Hudson MI 48165
9. Does your company inventory replacement parts and components for its service contracts at its local facility? yes

   If not, how does the company acquire replacement parts and components?

10. Are you able to provide insurance coverage as required by this RFP? yes
11. List the scope of services (type of work) you are able to perform.

    HVAC, Service, install maintenance, boilers, chillers, etc. Full service mechanical contractor firm. Also do plumbing, electrical as well. Controls, backflows etc. Commercial, Industrial & residential systems.

12. Provide a list of all personnel to be assigned to this contract. Include name, title, license number, years of experience, full/part time, on-call availability, qualifications, professional licenses/certifications, etc. Attach additional sheets if necessary.

13. Provide information about your experience with Johnson Controls Niagara Framework software management system. Provide name of person assigned to our account with this experience, how many years' experience, etc.

Carlo Serafini - 32 years HVAC exp.
15 years plus on Johnson controls Niagra.
Also do MDOT for michigan.

14. Will you be using any subcontractors for any work that may be performed under the specifications or that the City may request? If so, provide examples of subcontractors including company name, hourly rates and additional costs including any administrative overhead.

All in house, no subcontractors

15. Provide a list of all open contracts your company currently holds. Include contact name, organization, type, size, required date of completion, percentage of completion, value of contract.

Comp.
Henry Ford c/college - $200,000 / boilers 12/31/25
AJR - $250,000 - plumbing / backflows comp. 12/1/25
Gordon Foods - HVAC/Plmbing - comp. 12/1/25 $275,000

16. What is your company's approach (methodology) to maintaining operating efficiency of HVAC equipment under your control?

Call comes in, dispatched, within 1 hr response to cell and onsite.
Clean, check, test, lubricate, replace filters, use meters amp draws. Etc. make reports & recommendations to prevent failures

17. References: Provide at least four (4) references comparable in scope to this RFP. Use an additional sheet if you have more references to provide.

A. Company Name St Joseph Catholic Church
Address 830 S. Lafeyette South Lyon MI 48178
Contact Name Chris meloche Phone number (906) 748-3181
Length of contract 3 year
Type of equipment covered under contract Rtus, boilers, freezers, refrigeration

B. Company Name Gordon Foods
Address 7770 Kensington Ct. Brighton MI 48116
Contact Name Bryan Smith Phone number (248) 446-8381
Length of contract 3 year / plus
Type of equipment covered under contract Rtus, boilers, plumbing, hvac, refrigeration

C. Company Name Colonial Acres
Address 25105 Potomac Ct South Lyon MI 48178
Contact Name Paul Bollinger Phone number (419) 690-9515
Length of contract 3 year
Type of equipment covered under contract hvac, plumbing, boilers, water heaters, Rtus

D. Company Name Korex

Address 50000 Pontiac Trail Wixom MI 48393

Contact Name Mike Dunn Phone number (248) 624-0000 x 293

Length of contract 3 year

Type of equipment covered under contract Rtus, make up air, hvac, water heaters, chillers

18. Provide any additional information you would like to include.

THE FOREGOING QUESTIONNAIRE IS A TRUE STATEMENT OF FACTS:

Signature of Authorized Company Representative: Carlo Serafini

Representative's Name (please print) Carlo Serafini

Date 11/7/25